PUBLIC PETITIONS COMMITTEE

Tuesday 13 May 2008

Session 3

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PUBLIC PETITIONS COMMITTEE

8th Meeting 2008, Session 3

CONVENER

*Mr Frank McAveety (Glasgow Shettleston) (Lab)

DEPUTY CONVENER

*John Farquhar Munro (Ross, Skye and Inverness West) (LD)

COMMITTEE MEMBERS

*Bashir Ahmad (Glasgow) (SNP)

*Claire Baker (Mid Scotland and Fife) (Lab)

*Angela Constance (Livingston) (SNP)

Nigel Don (North East Scotland) (SNP)

*Rhoda Grant (Highlands and Islands) (Lab)

Robin Harper (Lothians) (Green)

*Nanette Milne (North East Scotland) (Con)

COMMITTEE SUBSTITUTES

Jim Hume (South of Scotland) (LD) Marilyn Livingstone (Kirkcaldy) (Lab) John Scott (Ayr) (Con) John Wilson (Central Scotland) (SNP)

*attended

THE FOLLOWING ALSO ATTENDED:

Roseanna Cunningham (Perth) (SNP) Scott Foley (Unite) Christine Grahame (South of Scotland) (SNP) Jennifer Newman Dr Richard Simpson (Mid Scotland and Fife) (Lab) Rab Stewart (Unite)

THE FOLLOWING GAVE EVIDENCE:

Nicola Sturgeon (Deputy First Minister and Cabinet Secretary for Health and Wellbeing)

CLERK TO THE COMMITTEE

Fergus Cochrane

ASSISTANT CLERKS

Franck David Zoé Tough

LOC ATION

Committee Room 1

Scottish Parliament

Public Petitions Committee

Tuesday 13 May 2008

[THE CONV ENER opened the meeting at 14:04]

Cancer Treatment Drugs Inquiry

The Convener (Mr Frank McAveety): Good afternoon and welcome to the eighth meeting in 2008 of the Public Petitions Committee. As always, I ask everyone to ensure that all electronic devices are switched off. We have received apologies from Nigel Don, who is on a visit to Brussels with the Justice Committee. The substitute member for the Scottish National Party, John Wilson, is also involved in that.

We are continuing our inquiry into the availability of cancer treatment drugs on the national health service. We have had a number of contributions to the inquiry so far. Today, we welcome the Cabinet Secretary for Health and Wellbeing, Nicola Sturgeon; Dr Sara Davies; and Elizabeth Porterfield. I am sure that the cabinet secretary knows the format of committee meetings. I invite her to make an opening statement if she wishes.

The Deputy First Minister and Cabinet Secretary for Health and Wellbeing (Nicola Sturgeon): First, I thank the committee for giving me the opportunity to be here today. I will keep my opening remarks to a minimum to allow maximum time for questions and discussion.

I take this opportunity to put on the record my condolences to the family and friends of Mr Gray. His dignity and perseverance in pursuing his petition should be a lesson to us all. The inquiry that the committee is undertaking, and its outcome, will be a fitting tribute to and legacy for Mr Gray.

While we talk about policy issues and the complex decisions that always have to be made in the NHS, it is important that we remember that, ultimately, this is all about individuals and the impact of such decisions on them. That is why we are working hard on our cancer strategy, our action plan for palliative care and our support for life sciences research.

We all know that cancer and its treatment are multifaceted and often involve complex drugs and other treatments used in combination. The arrival of individual new drugs can and does raise hopes and expectations, but we need to be confident at all times that they offer real benefits to patients in practice.

The arrangements that we have in place to assess new drugs and treatments in Scotland are designed to ensure that effective new drugs and treatments are made available to patients as widely and as quickly as possible. Those are difficult decisions that involve weighing up a range of factors, including the clinical benefits and cost. As the committee well knows, the arrangement for providing such advice in Scotland is through bodies such as the Scottish medicines consortium and NHS Quality Improvement Scotland. Rightly, those arrangements operate completely independently of ministers and they are widely acknowledged to be robust.

The committee has heard evidence on and wants to pursue a range of issues, such as the top-up system for which some people are calling, whereby patients could top up their NHS care by paying for certain elements of their care privately. It is important that we keep an absolute focus on equity, safety, probity and continuity of care but, of course, we are open to listening to the wider debate. I am sure that we will pursue some of those issues this afternoon.

The evidence before the committee highlights the elements that, in combination, inform decisions about the drugs that should be recommended for use in the NHS. I underline that the decisionmaking processes that are in place are designed to allow a whole range of factors and perspectives to be considered and debated thoroughly before a decision is made. The key purpose of those processes is to clarify the benefits of drugs and treatments for patients. There is debate about how that is done, such as through the quality-adjusted life years system. There are important technical debates to be had, but it is important to recognise that QALY assessments provide the basis for discussion. The QALY assessment alone does not determine the decision. In the end, all such decisions have to be taken in the best interests of patients.

The issues before the committee demonstrate the complexity of the decisions that need to be made. I hope that we can remain focused on the importance of the robust decision-making process, which seeks to secure the availability of drugs and treatments on an equitable basis. However, if the system needs to be improved, I am determined that it will be.

Thanks to the work that the committee has done, I have formed initial views on some areas that we might look to improve over the coming months. We will no doubt pursue and develop some of the issues in more detail today. I look forward to discussing the issues with the committee and, ultimately, to receiving the committee's recommendations in due course.

The Convener: Thanks. I echo the kind words that you said about Mike and his family. We have a series of questions that we are asking all the individuals who make presentations to the committee. Nanette Milne has the opening question.

Nanette Milne (North East Scotland) (Con): I have a couple of questions. One is about defining roles and the other is about guidance. You referred to the complexity of the decisions on prescribing cancer drugs, and it is clear that a plethora of organisations is involved: the Scottish medicines consortium, the National Institute for Health and Clinical Excellence, NHS Quality Improvement Scotland, regional cancer networks, area drug and therapeutics committees, medicines management groups, joint formulary committees and prescribing advisers. How can you ensure that they all slot together efficiently and effectively and demonstrate an effective use of resources in the assessment and prescribing system?

Nicola Sturgeon: That is a fundamental question. The picture is complex and an array of organisations is involved. I think that they fit together well and that they all have clearly defined roles. I will say a bit more about that in a moment.

I have detected from the evidence that has come before the committee—it is a view with which I agree—that we perhaps need more transparency and a greater understanding of some of the organisations' roles and the interrelationships between them. That is one of the issues that the Government will certainly want to consider following the committee's inquiry.

The Scottish medicines consortium perhaps has the lead role. Scotland is fairly unique in having an organisation such as the SMC, which looks at all new drugs at the point of licence and provides, as quickly as possible, advice to the NHS at large. Sometimes, for understandable reasons, there is a bit of a misunderstanding about the role of the SMC and the roles of NICE and NHS QIS. As the committee knows, NICE has very limited applicability in Scotland. When NICE conducts multiple technology appraisals, its decisions may have relevance. Unlike the appraisals of the SMC, which looks at drugs at the point of licensing, those appraisals may take place a year or two after a drug has been in use, so NICE might have more information and evidence at its disposal. If NHS QIS's view is that a NICE appraisal is relevant in Scotland, that can overrule and supersede the SMC's decision. Examples of NICE taking a view that differs from the SMC's are rare, but it is possible.

Having read the evidence that the committee has taken, I detect that there is perhaps most confusion and most need for greater transparency in relation to the area drug and therapeutics committees. It has been suggested to the committee that, given the role of the SMC, there may not be a role for the ADTCs. I am not sure that I agree with that, but I certainly think that there a case for making the arrangements transparent. When the SMC recommends a drug that is unique, its advice should be considered to be binding and NHS boards are obliged to implement the recommendation. The ADTCs perhaps have more of a role to play when the SMC recommends a drug that is not unique and many similar drugs are on the market. In that situation, it is legitimate for the ADTCs to make decisions about where the new drug fits in and there may be, for very good reasons, local variations in their decisions—I know that you have had examples of such cases.

I think that the roles of the various organisations are well defined, but they are perhaps not well understood. We need to ensure that there is transparency in the system and understanding of how it works.

Nanette Milne: That came out clearly in the evidence that we took at our previous meeting and it leads me on to the issue of guidance. Guidance, local formularies and so on are designed to deliver cost-effective treatment for patients but, ultimately, the clinician in charge makes the decision and has the freedom to prescribe what he or she thinks the patient needs. How can you ensure that clinicians operate in an atmosphere of clarity and understanding and that they are not bombarded with too much guidance and advice?

14:15

Nicola Sturgeon: I am sure that all clinicians would make a similar plea not to be bombarded with too much guidance and advice, but it is important that the right guidance and advice are in place to regulate the framework in which decisions are taken. When the SMC does not recommend that a drug be used widely in the NHS, the whole system ultimately comes down to clinical judgment and decision making. It is, of course, open to a clinician to make a case for a drug to be prescribed on an exceptional basis; I know that you are well aware of that.

The clinical judgment should be powerful, weighty and influential, but whether it should be the last word on an issue is another question. There must still be a transparent procedure to determine whether a drug should be prescribed on an exceptional basis. Evidence from other witnesses has noted that although all NHS boards are obliged to have procedures in place for exceptional prescribing decisions, there is no guidance about what those arrangements should be. Whether there should be a one-size-fits-all approach or whether some local flexibility is

appropriate is a debate that is being usefully explored in the inquiry.

Angela Constance (Livingston) (SNP): You touched on the exceptional prescribing process. Have you formed any initial views as to how well the process works, whether it is consistently applied across boards, and whether it is fair and transparent?

Nicola Sturgeon: Before I come to that, I will make a more general point, which is again reflected in some of the evidence that you have heard. I believe, without turning round to look, that Andrew Walker might be sitting behind me in the public gallery, so I will ensure that I quote him properly and accurately. He made the point about a lack of data in the system. As a result of the inquiry and of my own thoughts, I will consider how we can ensure that we are gathering data and systematically reviewing whether SMC decisions are being implemented consistently throughout the country. I acknowledge that that is a big job, given the number of recommendations that the SMC will make every month and every year, and that it will be very resource intensive, but it is done in England and there is a case for saying that we should gather that evidence base here.

To go back to the answer that I gave to Nanette Milne, all NHS boards are expected to have procedures in place to deal with exceptional prescribing applications. The cancer networks also have a role to play in those decisions. There is no evidence to suggest that the systems are not working properly. Indeed, some of the recent highprofile cases, including the case of Mr Gray and the case—not involving a cancer drug—of a young child in Glasgow, are examples of the exceptional prescribing arrangements working. There are issues to do with the speed at which the decisions are taken, but it is important to say that there is no evidence that they are not working. There is a debate to be had about whether we need to consider standardising some of the arrangements. Without that standardisation, we may struggle to convince people of the transparency.

Angela Constance: Following on from your comments about the process—in particular, about the speed of the process—do you think that the exceptional prescribing process as it stands places undue stress on patients and do you think that it could be improved? How service user friendly is the system for patients who have been told that the treatment that a clinician has recommended for them will not be publicly funded and who are considering avenues to challenge that?

Nicola Sturgeon: We should always look to improve that system where we can. However, we have to be realistic about the fact that, because these decisions and processes happen at a time

of stress for a patient anyway, they will always be difficult for any patient to deal with. The issues to do with when the discussions are had with patients and the degree of information that is shared and discussed with them also take us into the realm of professional and clinical judgment and decision making, which will vary from case to case. Moreover, some patients will want to be centrally involved in such discussions and, if an application for exceptional prescribing is made, will want to be heavily involved in the processes, whereas other patients will not want to be and some will not be medically fit to take part in them. Therefore, it is important that, as a rule, clinicians are in the lead.

Inevitably, there will also be situations in which the clinician does not think that there is a case for exceptional prescribing but the patient still wants to make one. Although, rightly and as you would expect, I do not know all the details of Mr Gray's case, I understand that that was the case in his situation.

We should always look to streamline the processes and make them as stress free as possible but, given the context of such decisions, we would all be misleading people if we suggested that we could remove the stress from them completely.

Rhoda Grant (Highlands and Islands) (Lab): Given that exceptional prescribing is the clinician's decision—we have heard evidence that that is the case—different boards tend to act in different ways. We have also heard evidence about how patients can get access to drugs from one clinician but not another. That causes a lot of concern because people regard it as postcode prescribing; if a patient stayed in a certain area and had a different clinician, they would be prescribed the drug that they want.

Although it transpired that Mr Gray's clinician did not agree that the drug would help him, Mr Gray fought the case and proved that there was benefit to him in having the drug. There is a lack of confidence among such people, who are in very bad circumstances—we can only imagine what it would be like if it was our lives. How do they understand the system? What equips them to get the best treatment for themselves and to be confident that they are receiving it?

Nicola Sturgeon: That is a fair point. It comes back to making the processes as clear, robust and transparent as possible. When a clinician decides that somebody should have a drug prescribed exceptionally, they are saying in effect that circumstances and criteria apply to that individual patient that did not apply generally when the SMC took its decision. It is a fact of life that different clinicians will, for good reasons—although they might not be easy for people to understand—reach different decisions. When clinical and

professional judgment is exercised, different professionals will come to different judgments. It is important that the processes that the patients can then go through—either with their clinician's support or to challenge their clinician's view—are clearly understood, robust and transparent. If I read all the evidence correctly, we perhaps have some work to do on that point.

John Farquhar Munro (Ross, Skye and Inverness West) (LD): Good afternoon, folks. As you are probably well aware, the issue is complex. Two issues concern me and, I am sure, many of the patients, who depend on the best possible treatment when they are admitted to health care, whether a hospital or whatever. We have received evidence that the Scottish medicines consortium has rejected a drug that is effective for particular types of cancer simply because of cost—not because it was not effective for the treatment of particular cancers but just because it was too expensive. That is disappointing.

Given that, when a patient is admitted to a hospital, they expect to get the best possible care for their condition, surely it would be a retrograde step if, in the middle of their consultation with the general practitioner or hospital staff, they were to be told that they could not have a particular treatment not because it was ineffective but because of the cost. One can only imagine the trauma experienced by an individual who is told that, although there is a drug to treat their condition, it cannot be prescribed because it is too expensive. Unfortunately, that is what happened to Michael Gray—at least until he proved his case and the health board relented.

What can individuals who are caught in such a sad situation do? What avenues are open to them to question such decisions and to try to secure a different decision from the clinician?

Nicola Sturgeon: First, I should tell John Farquhar Munro that I spent yesterday travelling around his beautiful constituency. I enjoyed my visit greatly.

I agree absolutely that these are some of the most difficult issues and decisions that any of us will ever have to deal with. Certainly, as the Cabinet Secretary for Health and Wellbeing, I cannot think of many other situations that cause more angst, anxiety and trouble than that of an individual with a life-threatening condition who knows that a certain drug can help them but that it is, for a variety of reasons, not readily available on the NHS.

However, I would probably challenge the idea that the SMC rejects drugs simply because of cost; it reaches its decisions after weighing up and balancing a variety of factors. Although such decisions are very difficult, they are necessary in

any system of finite resources. Indeed, these difficult decisions have always been taken in the NHS; they have perhaps come more to the fore as more and more advanced drugs have come on to the market.

In any case, we must not say to people that such decisions can be avoided in future; instead, we must try to build confidence in the processes that lead to them. I believe that, although people might disagree and have difficulty with its decisions, the SMC system is robust and transparent—although, that said, we might consider increasing the transparency of the whole system.

The SMC's decisions are taken not by politicians but by experts. That independence from Government ministers and other politicians is crucial, because these decisions have to be defended on the basis of expert evidence.

I am sure that every single month someone will be disappointed with the SMC's decisions. However, we need to know that those decisions have been based on the right factors and considerations, and that no undue influence has been brought to bear in the process.

John Farquhar Munro: I quite agree that MSPs should not get involved in medical matters. They have enough problems with politics.

What avenues are open to individuals who wish to appeal decisions?

Nicola Sturgeon: That is the purpose of the exceptional prescribing procedures that we have been discussing. As the SMC's recommendations apply to the whole population and the NHS in general, there will always be individuals who think that their situation is different and therefore justifies a different decision. That will open up the exceptional prescribing procedures that exist in every board. As I have said, there is no evidence to suggest that those procedures are not working, although I concede that we might need to make them better understood by the general public who, after all, are affected by their outcomes.

14:30

Claire Baker (Mid Scotland and Fife) (Lab): I want to ask a couple of questions about funding, which we have touched on briefly. We are talking about expensive treatments, and the issue of wastage has come up in our inquiry. What is the extent of the problem of wastage in the supply of existing cancer treatment drugs? What action is the Scotlish Government taking to reduce wastage, and could money from savings be made available for other cancer drugs?

Nicola Sturgeon: I do not have information to hand to answer your first question on the extent of

the problem. I am happy to see whether we can provide any information to the committee to quantify that. I am not sure whether we will be able to but, if we can, I will ensure that the information is provided.

Reducing waste in the NHS is vital, not only in the prescription and use of drugs but across the board. Every pound that we can save from preventing a wasteful use of resources can be spent on meaningful, effective care for patients. We are constantly looking to see how we can improve our procedures.

Most important will be what NHS boards and cancer networks do on the front line. When Alan Rodger gave evidence to the committee, he gave some examples of what NHS boards are doing. For example, NHS Greater Glasgow and Clyde treats all Herceptin patients in a Herceptin clinic, so that if part of a vial of the drug is not used for one patient, it can be used for the next patient. That is a practical example of what can be done to cut waste. We need to ensure that such best practice is shared across boards. The need to ensure that we get the maximum benefit in the NHS from taxpayers' money is very important to me.

Claire Baker: My next question is about how the price is set for the drugs and the difference between the drug costs in private treatment and on the NHS. What are the reasons for that and how does the difference apply to people who have to use private medication? How could it help someone in the same situation as Michael Gray, for example?

Nicola Sturgeon: There are several different angles to that question. If I am following the wrong one, you can tell me, and I will go down the one that you want me to follow.

There are several issues. First, there is the pharmaceutical price regulation scheme, which controls prices for branded drugs. That is a reserved issue, and committee members will be aware that the scheme will be brought to an end early, after the Office of Fair Trading market study suggested that we could move towards a more value-based pricing of drugs. The Department of Health in England leads for all the devolved Administrations on that, but it is clearly a piece of work in which we will be closely involved.

The second issue that Claire Baker might have been getting at was co-payment and co-funding for drugs.

Claire Baker: We were planning to talk about that in more detail soon, but if you want to talk about it now, that will be fine.

Nicola Sturgeon: If we are to go into the issue in more detail, I will keep my comments brief. I

have been struck by some of the comments and written submissions that have been made to the committee, particularly by clinicians, on the lack of clarity in the current guidance to NHS boards on co-payment. We need to take a fresh look at that.

Although the issue may superficially seem simple—somebody receiving most of their care on the NHS and paying privately for only one part of it—it is anything but straightforward for practical, financial, ethical and moral reasons, as well as reasons of clinical accountability. I will give two examples of the issues that we need to grapple with. One is an issue of practice and the other is an issue of principle.

The issue of practice involves clinical accountability. Cancer treatment is one of the best examples—probably the best. Chemotherapy usually consists of a combination of different drugs, and it is not easy to separate one drug from another in the package of care. Someone has to bear the overall clinical accountability for the package of care, but if treatment is divided between the NHS and the independent sector, the lines of clinical accountability become blurred, which can have serious implications.

My second point is about the issue of principle. The NHS provides health care free at the point of need, and equity of access is the fundamental principle of the NHS. A system that in effect allows people to top up the care that they get on the NHS by paying privately for part of their care raises the danger of a two-tier system in which people who can afford to pay for bits of their care privately do so and people who cannot afford such care are denied it.

Complex issues are at stake. I accept that we need to reconsider the guidance, to ensure that boards and clinicians are given as clear a steer as possible, but I would not want anyone to go away with the idea that this is a simple issue—not that any member would do that.

Claire Baker: If part of a patient's treatment is provided privately, does the cost to the individual reflect the cost to the NHS of providing the treatment? Is the burden on the individual too much or is it justified, given the treatment that they will receive?

Nicola Sturgeon: The cost that an individual might have to pay might not reflect the cost to the NHS, because the individual would be funding not just a discrete part of their care but the whole package, for the reasons that I outlined. Therefore, the cost to the individual would not necessarily be the same as the cost to the NHS would be if the NHS were providing the treatment.

The Convener: The comments so far have been helpful. Rhoda Grant will focus on the issue in more detail.

Rhoda Grant: Cabinet secretary, I take it from your answer to Claire Baker that you are considering the chief medical officer's guidance. We heard evidence that the guidance is ambiguous in that, on one hand, it seems to suggest that public and private provision can be mixed and, on the other, it suggests that there cannot be mixed provision.

I take on board what you said about clinical accountability, but I suppose that that is bureaucracy and can be sorted out. On the principle of the NHS, which I suppose is a moral issue, the petitioner said that he could not have paid for all his treatment without the help of his family and friends. Many people cannot pay the whole cost of their treatment, given the expense, but the petitioner thought that if it were possible to pay privately only for the part of the treatment that was not available from the NHS—the drug that he took was a small part of his treatment—many more people would take the opportunity to do so.

I understand an awful lot of what you said, but when someone cannot get life-saving or lifeprolonging treatment on the NHS, is it fair that they should have to pay for all their treatment, which would be available free of charge, just so that they can access a small part of their treatment?

Nicola Sturgeon: I understand where members are coming from. There is a slight danger that a general discussion of the issue masks very different individual circumstances.

I challenge the notion that we are talking about bureaucracy in relation to packages of care; with respect, more fundamental issues are at stake. As members know, I am not a clinician, so I hope that you will bear with me. In a course of chemotherapy for the treatment of cancer, three or four drugs might be used. One drug alone might not be life saving; it is the combination that has the effect. It is also important that drugs are given in the right doses and in the right balance. If something were to go wrong and a patient had an adverse reaction to a drug that was being provided by a provider other than the NHS, important issues about clinical governance and accountability would become blurred, as I am sure members understand. There are real dangers for patients in such an approach.

I do not want to suggest to the committee that I do not understand the motivation and sentiments behind your questions; I want you to understand—as I am sure that you do—that complex issues are at stake.

I have said that we will look again at the guidance that the previous Administration issued in February last year. There could be more clarity around how the principles enunciated in the guidance are expressed and we will take a close

look at that. We will also look closely at any recommendations made by the committee after its inquiry and make sure that we reflect on them properly.

The Convener: I am conscious of the time, given that you have other commitments this afternoon.

The petitioner and his family have consistently said that they believed in the principles that you have set out to do with the NHS's role in providing access to a range of treatment for people at their time of need. However, the petitioner faced the reality that, because of the nature of his illness, he had to fund an element of his treatment privately and the funding for the element that he would otherwise have expected the NHS to pay for was unavailable. Michael Gray said that there are many more people like him out there who would not have had access to the resources that he and his family put together.

What difference will we make during the next couple of years so that there are fewer occurrences of the circumstances in which Michael and his family found themselves? His testimony was very powerful. I understand the ethical issues; we unravelled some of those at the last meeting. The issue is the cold reality of how that family confronted that tragedy and its economic and personal impact.

Nicola Sturgeon: I agree that the testimony of Mr Gray and his family, friends and many supporters was incredibly powerful. I challenge anyone not to be deeply moved by it and not to want to do whatever they can to improve the system. That is certainly where I am coming from.

It is important to recognise that difficult decisions will always have to be made. As Cabinet Secretary for Health and Wellbeing, I think that it would be dishonest of me to say to the public that such difficult decisions will not be confronted by other individuals in the future. We must make sure that the processes work better, certainly better than they did in Mr Gray's case. Again, without going into all the individual circumstances, I think that the NHS board in question would freely admit that there were shortcomings in the process that was followed that contributed to the anxiety that Mr Gray had to suffer. I am not forgetting for a minute that we are talking about individuals and real lives, but much of what I have said this afternoon is about improving processes so that even if some individuals are disappointed with some of the decisions that come at the end of those processes, they can still have confidence in what has led to and underpins those decisions. With the committee's co-operation and help, I hope to work towards improving those processes in future.

The Convener: There are no other questions, and I am conscious that you have other commitments, cabinet secretary. I thank your officials for being present today although they did not get to speak and need not have bothered coming.

We anticipate that our report will be available just before recess. We would be happy to engage with you and your departmental officials on issues arising from that.

Nicola Sturgeon: I am happy to do that.

The Convener: Thank you for your time.

We will take a brief comfort break before going on to the next petition.

14:43

Meeting suspended.

14:46

On resuming—

New Petitions

Fresh Talent Initiative (PE1146)

The Convener: Agenda item 2 is consideration of new petitions. For PE1146, I welcome Jennifer Newman. You have a lonely shift up there on your own, but do not worry as we are not as fierce as we might look. PE1146 urges the Parliament to ask the Government to review the fresh talent working in Scotland scheme with the Home Office to allow overseas students on the scheme to stay and work in Scotland for an extended period at the conclusion of their academic studies without the need for a work permit and, as a result, ensure greater benefits for all concerned given the amount of public funding that is being spent on training such individuals.

You will have seen the format from the previous contributions. Do you want to make an opening statement or will we just go straight to questions?

Jennifer Newman: I definitely want to tell you about my experience, if that is okay.

The Convener: You have two minutes.

Jennifer Newman: My name is Jennifer. I came to Scotland in 2001 to do a masters degree at the University of Stirling. For that, I received funding from the domestic abuse service development fund, which is a Government initiative, as well as from the University of Dundee. After completing an MPhil in domestic abuse, I began working in Forth valley on a health promotion initiative called working healthy lives. which is another Government initiative that promotes a productive workforce in Scotland by tackling issues such as employability and the environment. I am sure that some of you have heard of the initiative.

After my two years of working full time under the fresh talent initiative, I was sacked because I am American—that was the only reason. At the end of the period of the initiative, the job that a fresh talent person is doing must be offered to a resident worker if any such worker has the minimum qualifications, even if the fresh talent person is the best candidate with the most experience. I had 60 clients in Forth valley with whom I had built up relationships—with such award schemes, continuity of relationships is very important—but none of that mattered. Just because I was American, I had to go.

The implications for Scotland, including the implications for funding, are huge. For one thing, some 9,000 people are involved in the initiative. Given that it costs £6,000 to put a recruitment ad

in *The Scotsman* and *The Herald*, my recruitment had a financial implication, as did all the training that I received for healthy working lives. All of that cost the Government money. When I was sacked, the Government had to re-advertise the post, and it will now have to train somebody else. The new person has a background in podiatry, so she will have to have all the training on the criteria for the healthy working lives initiative.

Luckily, I have received a job offer from Glasgow, and the employer is working on getting me a work permit. However, I wanted to do something to help the other 9,000 students on the fresh talent initiative, so that they do not have to go through what I went through.

A lot of funding and training was involved for me, and I am passionate about Scotland. I love it here. The green paper on the Home Office website describes what people need in order to stay in the country. The criteria include experience, skills and willingness to volunteer—I volunteer as well. I just feel that the immigration issues should be looked at

Nanette Milne: Thank you for your introduction, Jennifer. Have you heard whether there is any intention to extend the two-year limit at United Kingdom level, and whether any representations have been made directly to the UK Government?

Jennifer Newman: The whole immigration system has been changed to a points-based system. The fresh talent initiative will be subsumed into the post-study category of the new system, which will be Britain-wide rather than Scotland-wide. However, that still has implications. You are letting people stay for two years and letting them work in any job, and you are training them, but after the time is up, they can lose their iob.

The Government wants everybody to speak English, but people might be working in a technical area and, although they might be learning English, if they get sacked after two years they might not understand why. There will not be any support for them; there was no support for me.

The relocation advisory service of the Scottish Government is really excellent. People from the service came to my work and told my employer, "You can keep Jennifer but you have to argue her case on the form." However, our human resources department called the Home Office and the Home Office said no. Another really big issue is that lots of information from the fresh talent people and the Home Office has been conflicting. Even the way in which posts are advertised has to be really specific. The fresh talent people said that the advert had to be put on Jobcentre Plus and Eures, but the Home Office told me three different things—one time I was told monster.co.uk; one

time I was told *The Scotsman* and *The Herald*; and one time I was told it could just be on the national health service's SHOW website—Scotland's health on the web.

When you call the Home Office, the people are not helpful at all. That has to be looked into, because people's lives are being affected. People just need a little support.

Nanette Milne: This Parliament does not have too much influence over the Home Office.

Angela Constance: I have to admit that I am no expert on employment law, but I was puzzled by your petition, Jennifer. Fairness must be an issue, and surely the person best qualified for the job is the person most suitable. Obviously, immigration considerations arise when it is being decided whether people can stay in the country or not. The system is hugely complex, and I know from experience of trying to help constituents that contradictions arise and contradictory advice is offered. Did you take any advice on employment law?

Jennifer Newman: Yes, I spoke to an employment lawyer and an immigration lawyer. Unfortunately, immigration law overrides employment law.

The Convener: New proposals have come from the Home Office. Obviously, the Scottish Parliament and the Scottish Government have relationships with the UK Government and the Home Office on issues such as this one. The fresh talent initiative was an initiative of the previous Scottish Government, and the system is being reformed to become a points-based system.

Without going into too much detail, because the committee cannot look into personal circumstances, can you tell us whether you would have a better chance under the new system than you had under the previous system, or is the new system even less effective?

Jennifer Newman: I do not know. I will give you an example. There is something called the highly skilled migrants programme, for which a person needs 75 points to qualify. All that they need is a degree and experience of working in the UK. They also need to speak English. I have 60 points because I am 37. If I was 27, I would have 75 points. The only thing that is keeping me from qualifying is my age. It does not matter that I have five years' work experience here, that I have been here for seven years or that I have gained two higher degrees here. The points-based system does not take anybody's individual circumstances into consideration—it is more like a tick-box approach.

The Convener: Any system will have inherent contradictions and individual cases that go against

the general principle. From your experience or what you know of others' experience, which may have been similar, what are the counselling and support services like for individuals who have taken the challenge of coming from abroad, whether from America or from other parts of the world? What support services are available to you should things go slightly topsy-turvy?

Jennifer Newman: There is nothing. I will just have to go back with my seven years of skills and Scottish degrees. I will just be thrown out.

The Convener: To your knowledge, is there an appeals mechanism?

Jennifer Newman: I could raise a human rights case with an immigration lawyer, which would cost £750 to initiate and would probably fail. I will do that if I have to.

Bashir Ahmad (Glasgow) (SNP): You blame the Home Office. Have you submitted a written complaint to the Home Office?

Jennifer Newman: Yes, I have submitted a written complaint to the Home Office, as have Anne McGuire and Keith Brown. It is basically just tough. That is why I wanted to raise awareness of the situation. I have skills here and I want to contribute here. I love Scotland with all my heart and I want to stay, but I cannot because the Home Office will not let me.

Bashir Ahmad: Convener, can we put the case to the Scottish Government, asking whether it can do anything with the Home Office?

The Convener: Given the fact that Jennifer has already contacted elected members, it might be appropriate for her to continue to pursue the matter through the member of the House of Commons and the constituency member of the Scottish Parliament, Keith Brown. That avenue is available, rather than having the committee take action directly. In the distillation of our discussion, we will maybe arrive at some issues that we wish to pursue. However, let us ask some more questions, first.

Jennifer Newman: To be honest, I did not bring my case here to get help for myself. Luckily, I have a job offer in Glasgow, and my employer is doing what they need to do to get my work permit. Fingers crossed, they will be successful. The reason that I brought my case here is that there are 9,000-plus students here on the fresh talent initiative who might experience similar issues. I knew from 21 November that I was going to lose my job, but I did not lose it until my work visa ran out. For all that time, when I was on the fresh talent initiative, from November to May, I could not enjoy my life because I spent all my time looking for other jobs. My morale at work was low because I knew that I was going to lose my job. I wanted to

come here to raise awareness of the situation and to let you know that there are people in Scotland with skills who want to stay and contribute but who cannot because of the current immigration system.

Nanette Milne: I am intrigued by your comment about your age being a factor in the points system. I thought that the legislation against ageism was UK-wide. I am very surprised that age is a contributory factor in the points system and wonder whether that needs clarification.

Jennifer Newman: I think that immigration issues override ageism as well. I think that they override everything, although I do not understand why.

The Convener: In your place of employment, was there any representative organisation to which you could have taken your concerns, such as an affiliate union?

15:00

Jennifer Newman: I got a local person who was involved in the union to come with me when I was sacked—when the discussions took place and my employers said that they had called the Home Office three times and been told that they could not hire me. Fresh talent initiative staff told them they could hire me but that they had to argue the case, so there was conflicting information.

The Convener: The petition raises issues that are not within our remit but that we can explore. From whom would we like to seek further information? Nanette Milne was concerned about two issues.

Nanette Milne: We should write to the Home Office to ask it to provide the rationale for some of its decisions.

Bashir Ahmad: I, too, would like the Home Office to provide us in Scotland with that information. The petitioner is a good, able person, but she is not getting the chance to stay in Scotland to work, which is shameful for us.

Rhoda Grant: Can we write to the Scottish Government on the issue? I understand that the fresh talent scheme was intended to encourage people to come to Scotland to work and, eventually, to settle. There is no point in attracting people to come for two years and then have them go away. The scheme is aimed at building our talent and encouraging people to stay here. The advice that the petitioner received was conflicting and came at a crisis point, when everything had been stopped.

There should be support throughout the initial placement. Like everyone involved with the scheme, the petitioner needed such a placement so that she could decide whether she wanted to

stay here to work and what she could contribute. It should have been possible to make some assessment of her contribution. Someone should have held her hand through the initial placement, working with her and advising her and her employer on how the situation could be made permanent, if it was working out. Something seems to be missing. The organisation should have been able to tell the Home Office that she was here under the fresh talent scheme, that her placement was working out and that it wanted to formalise the position and to make it more permanent. It is fine to have a scheme for two years, but we need to ask how it can achieve its aims

Jennifer Newman: The two-year scheme does not apply to settlement. You have to be here on a five-year work permit in order to be able to apply to stay permanently. I do not understand why the two years that I spent with the NHS do not count towards the five-year period for settlement. If anything, it should be taken as proof that I will work and will not live off benefits. Once you have been here for 10 years, you can apply to stay for ever. I have been here for seven years, so if I get the job in Glasgow I will be fine, as it comes with a five-year work permit. However, I want to raise awareness of the issue.

The Convener: You have raised a number of issues in the petition, in your oral evidence to the committee and in your answers to our questions. You have provided us with a template for exploring three or four issues. We have received your petition and you have had a chance to speak to the committee. We will pursue the matter with the organisations that have been mentioned in the discussion—the Government, the Home Office and one or two other agencies that deal with the sector in which you were involved. After we have received their responses, we will keep you fully informed of when the committee will reconsider the petition and determine whether and how it wishes to take it forward. You have raised some legitimate issues that we want to explore. I hope that you have found the process helpful.

Jennifer Newman: Thank you.

The Convener: I hope that it was not too terrifying.

Jennifer Newman: No.

The Convener: Would members like to take a break now?

Nanette Milne: Let us go on.

The Convener: There is a good work ethic this afternoon.

Scottish Agricultural Wages Board (PE1139)

The Convener: PE1139 was submitted on behalf of Unite the Union. I declare an interest as I am a member of that trade union, as are one or two other committee members.

Claire Baker: I, too, declare an interest as a member of Unite.

The Convener: As people can tell from looking, we have never been agricultural workers.

PE1139, which is by John Quigley on behalf of Unite the Union, calls on the Parliament to urge the Government to retain the Scottish Agricultural Wages Board as a separate body and to expand its remit to cover all workers in the agricultural sector, including those who work in private and ornamental gardens and in all types of fish farming.

I welcome to the meeting Scott Foley, Rab Stewart and Scot Walker, who all represent Unite. Like the previous petitioner, they will make an opening statement, after which we will ask questions.

Scott Foley (Unite): I will read a short statement. I hope that it is short—it sounded short to me earlier.

I thank the committee for giving us the opportunity to speak to the petition. My statement has been prepared to elaborate on and enrich our union's petition. The petition's sole aim is to gain from this fledgling Government its continued support for the Scottish Agricultural Wages Board. By continuing to support the long-established board, the Government would show its continued support for workers who are employed in the agricultural sector. It would also reinforce the United Kingdom's position and its commitment to the International Labour Organization's convention number 99.

About 67,000 workers are directly employed in Scottish agriculture, and 25,000 of them are covered by the board. It is estimated that the employment of a further 250,000 workers depends on the sector. They range from workers in retail and food distribution to those in processing, packaging and the drinks industry. Those people work in an industry whose accident ratio is among the highest in the Scottish economy. Notwithstanding that, they have a proud past as honourable and hard-working individuals.

Such honourable behaviour has not always been reciprocated. We have only to look back a couple of generations to see the reasons for providing such workers—the backbone of Scottish industry—with a common pay and conditions framework. Historically, the law of master and

servant played a major part in squeezing every ounce of sweat from workers' brows. The threat of losing a tied house left many vulnerable.

Members of the Scottish Parliament will appreciate that a return to such a scenario is not impossible. Even in these so-called enlightened times, rogue gangmasters continue to operate outside the law. Without the protection of the wages board and the wages inspectorate, even seemingly law-abiding companies would exploit indigenous and migrant workers in the sector.

One recent case tells of an employer who forced mainly migrant workers to work 39 hours over four days under one contract of employment and a further 39 hours over three days under another contract. Using different employer names for each contract, that employer breached not only the agricultural wages order, but working time regulations. Those workers were not paid for the overtime that they clearly worked; they were only ever paid at the plain-time rate, which did not reach the minimum amount that the board sets or even the national minimum wage. They had to pay for compulsory transport to work. The company moved them to another site to avoid paying the rate for workers who have been employed for more than 26 weeks. They were also forced to continue working into the late evening, because when people are forced to take company transport home, they must wait for that transport. The board and its inspectorate ended that blatant exploitation but, without them, such an occurrence might-and likely would—happen again.

Colleagues, I ask you to put yourselves in the shoes of those vulnerable people and to think of the protection that you would want for you and yours.

Members might have heard of lobbying by the National Farmers Union Scotland to have the wages board abolished. It says that the rates that the board sets are irrelevant and that the majority of employers pay well in excess of them. If that is indeed the case, surely those reasonable minimum rates are realistic and achievable. The NFUS states that it carried out a survey of farmers that clearly showed that a majority felt that nondiscriminatory wage rates set by the board would dissuade them from employing young people. It states that 91 per cent of the 441 respondents said that they would not employ 16 and 17-yearolds. Members will agree that we can make statistics say anything, but 441 responses from the 51,249 holdings in Scotland represents only 0.86 per cent of the holdings.

Scottish agricultural workers are not comparable with other workers in Scottish industry. Although other sizeable groups can enter into collective bargaining agreements in the workplace or individual company, farm workers cannot meet the

thresholds for statutory recognition rights in the vast majority of cases. For example, out of the 6,632 holdings in Scotland that employ full-time employees, only 176 employ seven workers or more; 3,753 employ one full-time employee; 1,608 employ two; 596 employ three; 288 employ four; and 211 employ five or six. Therefore, out of 6,632 holdings, 6,456 employ fewer than seven full-time staff.

The Parliament might initially be of the view that the national minimum wage legislation and working time regulations replicate in part the provisions of the Agricultural Wages (Scotland) Act 1949. However, those important legislative measures do not encompass the minimum standards that are contained within the act. Members should recognise that the agricultural sector is heavily subsidised and, therefore, it is important that those statutory provisions remain to ensure that a fair proportion of those subsidies is directed to the dedicated workforce that tills our nation's soil.

Unite recognises that the Government proposes to review the board's functions. However, we strongly suggest that, if any such review is deemed to be necessary, rather than consider the board's abolition, the review should seek to widen its scope to all agricultural workers and those in the fish farming sector.

Angela Constance: The point about migrant workers was well made. Mr Foley mentioned the ILO convention 99. What is that, and what is its significance?

Scott Foley: The ILO convention 99 calls for a minimum rate in agriculture and adequate machinery for the creation and enforcement of such minimum standards. The United Kingdom entered into it in 1953 and, in 1978, Ireland became a signatory. Article 1.1 states:

"Each Member of the International Labour Organisation which ratifies this Convention undertakes to create or maintain adequate machinery whereby minimum rates of wages can be fixed for workers employed in agricultural undertakings and related occupations."

Nanette Milne: You mentioned that the Government will conduct a review of the Scottish Agricultural Wages Board and is committed to issuing a consultation document within the next year or so. I presume that I am right in thinking that you will make your own strong submission to that consultation.

Scott Foley: That is correct. It is my understanding that the consultation is forthcoming. We are waiting to be made aware of its content and format, and we will do our best to consult as many of our members as possible.

Nanette Milne: Clearly, your response will depend on the suggestions that are made in that document.

Scott Foley: Yes.

Rhoda Grant: The points that you make, you make well. I understand that it will be difficult to get agricultural workers to respond individually to the consultation for the reasons that the board exists in the first place: they might be afraid to stand up to an employer because they are small in number and do not have the strength of numbers for support if they want to do anything like that. That concerns me a little bit. If there seems to be a concerted effort among the employers to respond to the consultation, how will you balance that with responses by workers?

Secondly, I understand the reasoning behind your desire to include more people in the board's remit. However, I note that you mentioned engineering and construction workers in that regard, and I understand that their minimum wages were set by their own boards. How would that fit in with the agricultural workers?

15:15

Scott Foley: I do not think that I mentioned construction workers. I talked about retail and distribution—

Rhoda Grant: No, it was written in the additional information.

Scott Foley: Those workers would have been mentioned in reference to the scope of the union's operations.

The Scottish Agricultural Wages Board is the last of the wages boards—all the others have been replaced. We consider agricultural workers to be a special category, and the ILO convention that we mentioned recognises them to be so. Agricultural workers are also covered by article 2 of the European social charter that was signed by the Council of Europe, which calls for additional holidays and reduced hours for dangerous and unhealthy occupations. As we stated, agricultural labour is among the most dangerous work in the country.

To answer your first question, it is difficult to reach a high proportion of our members, not only because of the circumstances that they are in in rural economies, but because a lot of people are afraid to put their head above the parapet when it comes to raising objections to what their employers seek to gain from any such review. However, we will endeavour to reach as many of them as possible regarding the consultation document.

The Convener: Concern has been raised about the future of the wages board, given the broader political debate about decluttering the quango state and reducing the number of non-departmental public bodies. I assume that the

union has a view on that matter as well. Why are you so concerned about this NDPB? What makes it different? It is important that you tell us that. How is the board different from the other bodies that were mentioned in the First Minister's statement in early January? Why are you so worried about a review of the Scottish Agricultural Wages Board?

Scott Foley: There has been a lot of discussion and debate on the purpose of quangos and what they do with what is assumed to be the vast amount of money that they spend. However, the wages board is completely different. It is made up of independents. It involves employers and trade unions, and it costs approximately £130,000 a year, which is spent on conducting the pay negotiations, running the associated ad hoc committees that might take place as a consequence of those negotiations, and the administration of the inspectorate. That is not a vast sum of money to use in the service of protecting minimum standards for people who are the backbone of Scottish industry.

The Convener: Would you like the future of the board to be made more secure rather than less secure?

Scott Foley: I like to think that the Scottish Government will make it more secure—not just for workers now, but for workers in the future—in order to prevent the creation of two-tier employment in agriculture. The UK Government has given a commitment to retain the Agricultural Wages Board for England and Wales, and Ireland has recently gained support for its equivalent board. Wages in the countries that border Scotland could be subject to a degree of protection that will not exist in Scotland, which could lead to a race to the bottom in Scotland.

The Convener: I think that the deadline for responses to the consultation process is being brought forward. Has Unite had any behind-thescenes discussions with the Government about what the review's principles will be, or are you still in the dark?

Scott Foley: We are still largely in the dark. I have made tentative inquiries about when the consultation phase will commence, but I have not yet had anything concrete back. I understand that it is imminent.

The Convener: Does anyone want to add anything?

Rab Stewart (Unite): Yes, convener. I am one of the longest-serving members of the Scottish Agricultural Wages Board—you can tell that by looking at me. I have been on the board for a number of years. We have been through many issues and tried to regulate and maintain minimum standards, some of which have been more easily achieved than others. Because of the industry's

vastness and remoteness, we need regulation, which needs to be enforced.

In the mid-1980s, when we started talking about the determination of pensions with the farmers, employers and owners, we faced all kinds of difficulties; eventually, we had to abandon the idea. Pensions were being introduced in every industry, but we had to abandon the idea because, as far as the employers were concerned, if it was not dictated by the wages board, it was not going to happen. They did not even want to discuss the matter. When we look at the industry and the remoteness of some parts of it, I cannot understand that, but I think that it is one of the quirks of the United Kingdom and not just Scotland.

The employers seem to understand the necessity of regulating the welfare of the animals that people look after, but they do not understand the necessity of regulating the welfare of the employees who do that work. There is something vastly wrong with that.

As my colleague Scott Foley said, minimum wages and holidays do not lend themselves to agricultural workers who are finely attuned to the jobs that they do. They are part veterinarian, part mechanic, part driver—they are part everything. They are multifaceted and multiskilled and we do not want to lose them to other industries, but that is what will happen if we do not have some form of regulation to protect them.

The Convener: Thank you. You have identified two or three areas that the committee can pursue. One would be a behind-the-scenes dialogue between Government officials and ministers and your officials, given the role that the union plays on the board. The second is the timescale for that dialogue and for the consultation, and the third is Rhoda Grant's point about the fairness of the response and how it reflects the views of all those who have an interest in the issue.

We can write to the minister with responsibility for the policy area. It might be worth writing to the First Minister, given the statement that he made in early January. We are halfway through the year and it might help to get an update.

I am in the committee's hands, but would it be fair to say that we recognise that there is a need to declutter the quango sector, but that this situation looks a bit odd in that context? Should we at least explore that point, even though members might take different views?

Angela Constance: I have never been a lover of the quango state and never will be, but the board does not sound as if it is a quango. It sounds like a more meaningful partnership arrangement. Expenditure on it, at £130,000 per year, is not vast. I hope that the committee can

throw its weight behind the petition. If we are moving into a consultation period, could the committee make today's discussion part of that consultation?

The Convener: There is no problem with that. The *Official Report* can be made available to the department that is collating the consultation responses. I expect that Unite and other interested parties will submit a more sharply focused analysis to judge from what we have heard this afternoon.

People make broad statements about tackling the number of quangos, but some of the organisations that are included in that are not quite what we think they are. If such organisations were no longer in existence, that would be a dangerous road to go down because they look after interests that no one else bothers about and make a difference to people's life experiences or work environments.

We need clarity on timescales and an identification of some of the issues. We also need to ask about the principles of the review.

Rhoda Grant: I represent a rural area, which tends to have a low-wage economy. It is important that we do not make that worse by getting rid of an organisation that tries to keep wage levels up. If the board were to go, that would not augur well for the wider environment.

The Convener: The petitioners have heard the committee's deliberations; I hope that that was useful and constructive. I hope that we can move the petition on to get greater clarity and a solution that might meet your concerns.

We will take a brief comfort break.

15:26

Meeting suspended.

15:30

On resuming—

Ice Rinks (PE1138)

The Convener: PE1138, by Mrs Erica Woollcombe, calls on the Parliament to urge the Government to take the necessary steps to ensure the continued provision of local ice rinks and to recognise their benefit in promoting health and wellbeing. Members have before them the petition and the supporting documentary evidence.

The petition raises a specific concern, but it also relates to the broader debate about investment in our infrastructure. Only three weeks ago, when Audit Scotland reported on some of the big challenges that we face, I think it said that we would need to spend something like £100 million

per year over the next 10 years to get our sports infrastructure up to a standard that the public would consider acceptable for the future.

How can we expedite matters? We are pursuing some of the issues with the relevant Government ministers and officials. Perhaps we should just gather information on the petition. Do members have any strong views or comments?

Nanette Milne: The convener of the Health and Sport Committee is with us. Perhaps we should refer the petition to that committee for consideration as part of its inquiry on pathways into sport.

The Convener: I know that Christine Grahame is here for another petition, so I am sorry if we have sprung that on her.

Christine Grahame (South of Scotland) (SNP): You certainly have.

The Convener: In essence, PE1138 is about the quality of facilities. Your committee is taking evidence on pathways into sport and on our support for sport as we move towards the Commonwealth games in 2014.

Christine Grahame: Yes. Do you want me to say something about that?

The Convener: Nanette Milne asked whether it would be appropriate to give the Health and Sport Committee the information on the petition. I know that you are investigating pathways into sport, which is mainly about individuals, organisations and sports clubs, but people might say that they do not get into, or advance in, sport because the quality of facilities is poor.

Christine Grahame: As Rhoda Grant knows, we heard evidence from Rhona Martin that a lot of local ice rinks are closing down. That is partly to do with European Union regulations on how the ice is made and so on. It would be useful to absorb the petition into our work.

Angela Constance: I support that, given that John and Sinead Kerr are constituents of mine—they come from Livingston.

The Convener: We should write to the Convention of Scottish Local Authorities about the broader issue. Each local authority has the right to determine what it wishes to do with its budget. That is a contested issue at local and national level at different times. It would be useful to hear what decisions or recommendations have been made by COSLA, as part of its sports strategy, about striking a regional balance in access to provision. Each local authority might have to make difficult decisions, but it would be a pity if regions of Scotland did not have a range of facilities for different sports.

There are one or two interested parties that we should write to, which are part of the structure around ice rinks or organised sport. The clerk wants to give me some sound advice, so I invite him to share it with the committee.

Fergus Cochrane (Clerk): I seek clarification on whether the committee has agreed to refer the petition to the Health and Sport Committee, or to gather information from other sources at this point.

Rhoda Grant: Can we do both?

The Convener: Can we do both, Fergus?

Fergus Cochrane: The convention is that if we refer the petition to another committee, it is then up to that committee to determine what action it wants to take on it.

The Convener: We should gather evidence, but provide our information to the Health and Sport Committee. That is what Nanette Milne was suggesting. Are you a wee bit happier now?

Fergus Cochrane: Yes.

The Convener: Good. Ensuring contentment among the clerks is my ambition in life.

Water Charges Relief (PE1142)

The Convener: PE1142, by the Rev Jock Stein, on behalf of Dunfermline Presbytery, calls on the Parliament to urge the Government to continue the scheme of relief and exemption of charities and churches from water and sewerage charges beyond 2010. Do members have any comments on the petition?

Nanette Milne: This is a burning issue. I know that the petition comes from a specific area, but I am sure that we have all been bombarded with concerns from church and charity people and from those who are involved in village halls. We should involve the Government in the petition.

Rhoda Grant: We need to get clarity on the statement about the relief going beyond 2010. Some of the people to whom I have spoken have issues with the scheme, which was a transitional scheme, such as how it affects groups. For instance, if a charity has an income of more than £50,000 a year, it is not eligible for relief. If a village hall committee decides to be proactive and run, say, a lunch club, a crèche, a nursery and other services, its turnover will quite quickly rise above the £50,000 a year mark. This is almost a tax on development, which could halt people's ambition to provide services and therefore affect small communities.

It has been pointed out to me that an organisation that moves premises also loses out on water rates relief, which means that small organisations might be stuck in buildings that are

either not efficient or not effective enough to meet their needs.

I hope that those two issues will be raised with the Government, because they need to be taken into account if a permanent scheme is to be drawn up. We have come some way on this matter, and we need something other than a transition scheme.

The Convener: As we know from our constituents, the issue crops up every few years, so it is certainly worth exploring.

Claire Baker: With regard to Rhoda Grant's important point about the scheme being transitional, if we are going to ask the Government for clarity, we should also ask whether it thinks that the scheme will be extended or whether a permanent scheme will be introduced at some point. Given that the operation of much of the voluntary sector depends on continuity and sustainability, it would be good if the scheme were to be put on a safer footing.

The Convener: I think that we have secured a reasonable consensus. Are members agreed?

Members indicated agreement.

Right of Notification (PE1143)

The Convener: PE1143, from Carol Ann Bowmaker, calls on the Scottish Parliament to urge the Government to amend all relevant legislation to ensure that private tenants have a right to be notified when their landlord has applied for planning permission to demolish their home and that such permission is not granted and notices to quit are not issued to a tenant when outstanding repairing standard enforcement notices exist on a property.

The accompanying material contains all the detail. Do members have any comments?

Rhoda Grant: This is one of those petitions that make you think, "Surely that can't happen." Surely a landlord must advise his or her tenants if something is to happen to their property. We should take some advice on the matter and find out how we can close this loophole.

The Convener: I agree that this is an odd one. You have to read the petition again to see whether it said what you thought it did.

I suggest that we write to a range of individuals, particularly the minister with responsibility for this issue and certainly the local authorities, perhaps to get a snapshot of the situation in an island authority, a rural authority and an urban authority.

Domain Names (PE1144)

The Convener: PE1144, by Ross Ingebrigtsen,

on behalf of dotSCO, calls on the Scottish Parliament to urge the Scottish Government to give full support to the application to the Internet Corporation for Assigned Names and Numbers to introduce a standard ".sco" top-level domain name in order to enhance Scotland's distinct languages, culture and identity and for use by all Scottish public bodies.

Christine Grahame MSP has joined us for the discussion. Do members have any comments?

Bashir Ahmad: I fully support dotSCO's proposal. For one thing, the name is easy for me to pronounce. Secondly, Scotland is not a well-known country in the world. Indeed, when I lived in the place that I left behind, I did not know that Scotland was on the map. The real priority for me and for Scotlish people is to give the domain name—and Scotland itself—full support.

The Convener: So you thought that you were going to California, but you were sent to Caledonia instead. Good call, brother.

Christine Grahame: I am glad that the convener read out the terms of the petition, because they are not as they have been given in the Scottish Parliament information centre briefing paper. Members are frowning at me, but I assure them that the SPICe briefing needs to be corrected. I must also point out that I appear before the committee with some trepidation, as I have two sons who will be dismayed to hear me talk about top-level domains and seem to know what I am talking about.

PE1144 is an important petition that has attracted a great deal of attention. The petition's 1,200 signatures include those of David Hamilton MP—a Labour member of Parliament—and John Scott MSP. Two motions on the issue have been lodged in the Scottish Parliament. One was lodged by Stewart Stevenson and is mentioned in the SPICe briefing; the other—the SPICe paper does not mention it, unfortunately, but I am not wounded—was lodged by myself. I called my motion "Lets Go With '.sco'", as one might.

The campaign has the support of the cross-party group on the Scots language. Members should also know that the Welsh Assembly is supporting a similar campaign for ".cym", which will be for the Welsh language. Basically, the petition is seeking a domain for the Scots language and Scots culture. The campaign group dotSCO, which was set up by two young men—Ross Ingebrigtsen and David Hutchison—as a not-for-profit organisation, has attracted support from civic Scotland and a lot of interest from businesses and cultural groups.

Let me just point out a couple of issues from the SPICe briefing paper. The paper states:

"Internet services are a reserved matter".

Although that is quite correct, the petition is seeking a cultural top-level domain for the Scots language, which is not reserved to Westminster. Indeed, for members' interest, I have dug out a copy of the Parliament's very own publication "Makkin yer voice heard in the Scottish Pairlament", which is in the Scots tongue. Given that we are now putting Scots on various signs, I think that that question can be put aside. DotSCO will apply for a top-level domain name under a cultural banner, just as the Welsh have done with the support of their Parliament.

The SPICe briefing paper also mentions the second-level domain "scotland.eu". In answer to a parliamentary question from Stewart Maxwell in 2006, the then Executive minister Tom McCabe stated:

"The Executive believes that Scotland.eu, combined with the Top Level Domain (TLD) .uk will clearly convey Scotland's online identity."—[Official Report, Written Answers, 30 May 2006; S2W-25732.]

However, I challenge members to type "scotland.eu" into Google. They will be taken straight to "scotland.org", which is a single promotional website. The second-level domain "scotland.eu" is just not used in the broad manner that ".sco" would be used.

As a sponsored top-level domain name, rules will apply to ".sco" that the sponsors will need to put before the Internet Corporation for Assigned Names and Numbers. ICANN meets only a few times a year and, I understand, assigns domains only once every four years. It will next do so in the autumn or towards the end of the year. At a meeting that I attended with dotSCO, I was advised by Nominet-which is mentioned in the SPICe paper—that ICANN is expecting a large number of applications for cultural domains. Only a handful of applications were made the first time round, but domain names are becoming so popular that ICANN is expecting lots of applications this time. Therefore, we need to get a move on one way or the other, as ICANN allocates such domain names only once every four years.

The SPICe paper also mentions that, in 2001, Nominet received an application from ScotNom Limited for the use of ".scot.uk", which is a second-level domain. However, ".sco" will be a top-level domain. In other words, it is the very last bit at the end of the web address.

I am impressed that Nanette Milne seems to be following me. If I am explaining this well enough, I am glad.

The Convener: You lost me at "co dot".

15:45

Christine Grahame: My point is that, at that recent meeting, the organisation that deals with domain name registration and so on—I have stuff about Nominet here—was very enthusiastic. That was not simply because it will get more business or anything like that. The people at Nominet do not sniff around and bite at things if they do not think they will be worth while and attract many users. The point is that ".sco" will be attractive to people.

I hope that the committee will support the petition, which is to urge the Scottish Government to give its full support to the application. The application has to go through tests but, given what Nominet has said, if an application has parliamentary support—let alone Government support—that will make a huge difference to whether it is successful.

I am aware that the Cabinet Secretary for Finance and Sustainable Growth is considering the matter. I do not know whether the Minister for Enterprise, Energy and Tourism is doing likewise. It is of extreme interest. Businesses, such as cultural and tourism businesses, would be extremely interested in it. That is something that dotSCO would have to prove to ICANN in order to get authorisation.

The Convener: Do members have any comments, questions or observations?

Rhoda Grant: I am afraid that it is as clear as mud to me. I am not criticising you, Christine.

The Convener: I will refer Rhoda Grant to the Official Report.

Rhoda Grant: I read the petition and the background notes and I listened carefully to what Christine Grahame said, but I am not 100 per cent clear about this. Who makes the application?

Christine Grahame: DotSCO, which is a not-for-profit organisation, will have to present a case to ICANN about why the domain name should be allocated. I learned from meeting Nominet that one has first to establish that there is Scots culture and a Scots language. We can take that as read. It has then to be established that there will be users for the site and that it is not going to be like "scotland.eu", which nobody has ever used. You have to establish that various people will register and that it will become useful. DotSCO has to produce a business case and show that tourism businesses and so on might want to use ".sco".

Nominet has made it clear that if there is parliamentary backing for the move, as there is from the Welsh Assembly for the ".cym" campaign, that would show that there was a fair wind behind it. If there is parliamentary and Government backing and businesses and cultural organisations are interested, there is a prospect of having the

domain name allocated. However, it would not be allocated without rules. There has to be a framework, a bit like a memorandum of understanding or articles of association. There would have to be rules by which organisations could apply to have ".sco" at the end of their web address. Organisations would not be allowed to just add it; they would have to be approved. Nominet is like the referee of the internet—I knew that the convener's ears would prick up at that statement.

The Convener: Refs have been in the news recently.

Christine Grahame: I know, but I am not going there.

Rhoda Grant: So, any organisation—or any person—could say that they wanted to apply for a ".whatever" domain, but they would have to build a case for it. It is the strength of the case that determines whether they can have that name.

Christine Grahame: Yes—people have to build a case for a top-level domain name.

Rhoda Grant: Would the organisation that applies for the ".sco" top-level domain police the use of it?

Christine Grahame: Yes. It would have to ensure that what was happening under that domain name fitted the criteria.

Rhoda Grant: I could probably ask questions all day.

Christine Grahame: I am impressing myself. I seem to know a few answers. No doubt, I will be told afterwards that I got them wrong.

The Convener: Are there any other comments?

Angela Constance: I do not do technology very well and I am a bit of a cultural pygmy, to boot. I hope that the committee can support the petition. All we are asking is for the Government to throw its weight behind dotSCO, which has to do the spade work to make its case. I do not think that that is a big ask. None of us is a technological expert, but other people out there are.

I want to pick up on the final point that Christine Grahame made. The important thing to consider is the impact that such a move would have on business and enterprise. I am a cultural pygmy, but the important thing for me is the impact on enterprise in Scotland.

Bashir Ahmad: I see no reason not to support the petition. As I said earlier, Scotland is not known to the rest of the world. The domain name ".sco" would help to raise Scotland's profile in the world.

Rhoda Grant: I suggest that we write to the Scottish Government, asking for its comments

before we make a formal decision on whether we should ask it to support the petition. It would be good to get some input and the Scottish Government's thoughts on it.

The Convener: Okay. We will write to the ministers who have responsibility in the matter—there may be more than one because of its cross over nature. I thank Christine Grahame for her expert guided tour. Her grandson will be marking her and she should get 10 out of 10.

Christine Grahame: I do not have a grandson yet, unless you have heard something that I have not heard.

The Convener: Sorry. There could have been a gag in there, but I am in a public committee.

Beverage Containers (PE1145)

The Convener: PE1145, by Dr Alexander Gemmell, calls on the Scottish Parliament to urge the Scottish Government to introduce a statutory deposit and return scheme on all used beverage containers. Members have seen the details in the background information that has been provided with the petition. Do members have any views on how the committee should deal with the petition?

Nanette Milne: We need to get views from the Government, the licensed trade people and Waste Aware Scotland, for example.

The Convener: The petition raises issues that impact on businesses. There is also the enforcement issue to consider. We might want to hear from people in Scotland and the UK who are involved in dealing with waste and packaging about the best ways in which to address the petitioner's concerns.

The core issue is something that we all get frustrated with—the amount of rubbish and waste products that are left lying around. Cans and bottles could easily be recycled. The petitioner raises a fundamental issue of concern about how we tackle that problem in Scotland.

Nanette Milne: I remember when there was a deposit—I cannot remember how much it was—on lemonade bottles.

Angela Constance: It was 10p.

Nanette Milne: It was not 10p when I remember it from, which was pre-decimalisation. In those days, we did not have to deal with Europe. I know that there are now implications with regard to European matters. Perhaps we should also get views from European producers.

The Convener: I have tried to explain to my son that it is a life-affirming experience to collect ginger bottles and get the cash back. The look of incredulity on his face told me that he did not know that I had done things as horrific as that.

Nanette Milne: It supplemented our pocket money.

The Convener: Exactly. I seem to remember that we even got money back on Domestos bottles, which shows how old I am getting.

There is a range of folk we will contact. We will respond to the petitioner once we have received replies.

Current Petitions

Broken Glass (PE986)

15:53

The Convener: The next item is discussion of current petitions. The first is PE986, by primary 6/7 of Woodlands primary school, which calls on the Scottish Parliament to urge the Scottish Government to take greater action to protect the public, domestic and non-domestic birds and animals from the dangers of broken glass; to promote the use of plastic bottles as an alternative to glass; and to introduce a refundable deposit scheme that is aimed at reducing the amount of broken glass in public places. The petition's aim is similar to that of PE1145, which we have just discussed. We have received background information on the issues and we have seen the petition before. Do members have any strong views on how we should deal with it?

We have had a response from the Government, but there are a couple of issues that we may want to pursue further, such as how it will tackle the problem of broken glass and how that combines with its broader message about anti social behaviour and the environment. Do members want to pursue the matter further with the relevant authorities?

John Farquhar Munro: Environmentally, the petition has a lot of merit. Various schemes are being promoted, but they do not seem to be developing into a national effort. I think that we should pursue the matter, but where should we apply the pressure, convener?

The Convener: We need to get some clarity from the Government about what it intends to do. The problem is systemic and our role needs to be in partnership with local government because it has direct responsibility for cleansing and waste disposal. We want to fit in with the broader debate around outcomes and pledges to reduce waste and to ensure a tidier and cleaner environment. That is probably the best advice that I can give you until we get a response.

John Farquhar Munro: Okay.

Angela Constance: I agree, but we should not forget the point that the petition originally made about children having safe places to play. It is not unreasonable to seek some sort of clarity from the Government about whether it will or can pursue that by raising awareness.

The Convener: I am happy to ask for that as well. We will accept those recommendations.

Nanette Milne: Is this an issue for an organisation such as the Convention of Scottish

Local Authorities, given that local government is now much more autonomous and is, as the convener said, responsible for cleansing?

The Convener: That would be worth doing, partly because COSLA has policy conveners who respond to the Scottish Government's or the UK Government's direction of travel, and who set the broad template for how local government can respond to waste or other issues in respect of the built environment and quality of life. It is not unreasonable to raise the matter with COSLA, which might tell us about positive action that councils are taking and which we might like to become uniform throughout Scotland.

Charter for Grandchildren (PE1051)

The Convener: PE1051, by Jimmy Deuchars, on behalf of Grandparents Apart Self Help Group Scotland, calls on the Scottish Parliament to urge the Government to make the charter for grandchildren legally binding, ensuring that the rights of children are recognised by all public agencies and families, and enforced by law.

Do members have any suggestions about how we can deal with the petition?

Rhoda Grant: I have a lot of sympathy with the petition, but the issues that it raises were considered when Parliament passed the Family Law (Scotland) Act 2006. The Minister for Children and Early Years made a commitment to family group conferencing for children in difficult circumstances: that would involve grandparents. The child can initiate family group conferencing, which puts the onus back onto the child to ask for what they need.

We should close the petition because we should not look to enshrine in law something that might not always be in the best interests of the child, such as in cases where there is domestic abuse or where the child might be in danger. Although I understand the frustration of grandparents who feel that they are being separated from their grandchildren maliciously, for want of a better word, we must be careful that we do not push for something that creates more problems than it solves.

The Convener: Do you recommend that we close the petition?

Rhoda Grant: Yes.

The Convener: Does the committee accept that recommendation?

Members indicated agreement.

Independent Midwifery Services (PE1052)

The Convener: PE1052, by Jayne Heron, calls on the Scottish Parliament to urge the

Government to promote the services of independent midwives and to ensure that such services continue to be available. Again, the petition has come directly to the committee. Are there any comments on how to proceed with it?

John Farquhar Munro: I recall the petitioner coming to the committee. I am of the same opinion as I was then: I am not very supportive of the suggestion within the petition, but it is up to the committee.

16:00

The Convener: Are there any other observations?

John Farquhar Munro: I would close the petition.

Claire Baker: We did not receive responses from any of the NHS boards that we wrote to, did we? The letter that we received from Dr Margaret McGuire suggests that it is for NHS boards to find a solution. Should we pursue that?

The Convener: I understand the deputy convener's view, but I think that Claire Baker is right to suggest that there are key players whose views we have not heard. We might still arrive at John Farquhar Munro's conclusion, but we should seek more information to allow us to see a fuller picture. I support Claire's suggestion.

Nanette Milne: I do not know its details, but the Health and Social Care Bill is going through the Westminster Parliament just now. Should we raise the issue with the Health and Social Care Bill Committee? I think that it will be considering indemnity issues.

The Convener: We could ask the UK health minister whether the issues that are raised by the petition will have any impact on that bill. In addition, we will write to a selection of NHS boards to seek to clarify the options that are open to them in making available and promoting independent midwives, and to ask how boards are supporting people who would like to have an independent midwife as part of their prenatal care.

Members indicated agreement.

Broadcast Spectrum (Local Television) (PE1055)

The Convener: PE1055, by Graeme Campbell, on behalf of media access projects Scotland—MAPS, for short—calls on Parliament to urge the Government to seek clarification on the ownership of electromagnetic broadcast spectrum in advance of the proposed spectrum packaging and award process, and to seek assurances that capacity will be reserved on the digital multiplexes to enable local and new Scottish television channels

originating in Scotland to be broadcast to Scottish viewers receiving the public service broadcasting channels.

The Scottish Broadcasting Commission is now in situ and has been raising such issues. An event took place last week in Our Dynamic Earth on digital commitments, in order to keep people up to date on the issues. Furthermore, during the past month two or three questions on the issue have been asked in Parliament.

I would like the committee to remain aware of this petition, but I am conscious of the timeframe and wonder whether we should suspend consideration of it until we have received a report from the Scottish Broadcasting Commission. We can let the petitioner know that we are still pursuing the petition but wish to study the commission's deliberations.

Members indicated agreement.

Deep Vein Thrombosis (PE1056)

The Convener: We have already heard oral evidence on PE1056, by Gordon, Jane and Steven McPherson, which calls on Parliament to urge the Government to introduce mandatory assessment tools relating to diagnosis of deep vein thrombosis. The petition also makes a range of recommendations on making people aware of the impact of DVT and of the early-warning signals.

We are still awaiting information from NHS Quality Improvement Scotland, which has reported to the chief medical officer. We might also want to wait until the responsible minister responds. I know that Nanette Milne has inquired into the issue.

Nanette Milne: I agree with the convener. I received an e-mail from the petitioner, which came with a relevant paper. I wonder whether we could send that on.

The Convener: We have received a series of responses from the petitioner. The information will be among our documents.

Nanette Milne: I have received more information today.

The Convener: If it is additional information, you should pass it to the clerk.

Nanette Milne: Thank you. The petitioner certainly thinks that it is relevant.

The Convener: Do any members have recommendations on what we should do with the petition? We will certainly want the Government's view on how its new policies address the issues that are raised by the petitioners. We can certainly continue our dialogue with the petitioners on DVT.

Members indicated agreement.

Endometriosis (Research Funding) (PE1057)

The Convener: PE1057, by Andrew Billson-Page, on behalf of the Save Our NHS Group, is on issues relating to the future of the national health service. Again, following the Kerr report, there have been various substantial discussions.

Sorry—my fault—I am misreading the petition. PE1057 is on the diagnosis of endometriosis, in light of the Kerr report recommendations. I apologise, but I had thought that the petition was about the NHS more generally.

What options for action do we wish to consider?

Nanette Milne: The diagnosis of endometriosis is a significant issue that has been rumbling away for a few years now. I can remember being approached about it when I first entered the Parliament five years ago. We should contact the Government to find out how it intends to increase awareness of the condition, how it is engaging with Endometriosis UK and whether it is encouraging the NHS to invest in further research projects. Quite a lot of work is on-going—I think that three research projects are on the go—but there is not a lot of awareness of the condition.

The Convener: Nanette Milne's recommendation is worth while. We will pursue it with the Government to see what is happening.

Supermarket Developments (PE1058)

The Convener: PE1058—I will try to get this one right—by Dr Samer Bagaeen, calls on the Scottish Parliament to consider and debate the traffic, environmental and sustainability impact of large 24-hour supermarket developments on existing communities in designated town centres.

Do members have any comments on PE1058, which has been in the system for over a year?

Rhoda Grant: Will this week's members' business debate on supermarkets cover those issues?

Nanette Milne: Yes.

The Convener: The difficulty is that such planning issues are dealt with by the local authority, which in this case is Glasgow City Council. Personally, I think that such issues are dealt with at local level through quite an open process that allows individuals to raise concerns, so I would close the petition on that ground, but other members might feel that the petition raises broader issues.

John Farquhar Munro: I feel the same. There are plenty of local planning regulations to control such developments.

Nanette Milne: This is a big issue throughout the country, but I agree that planning law exists to deal with the matter.

The Convener: We will close the petition on the ground that the issue is for councils to deal with. The nature of the issue is such that it is being ventilated at the appropriate level.

Debating Chamber (Scottish Parliament Symbol) (PE1066)

The Convener: Ironically—it is quite funny, given the subject matter—PE1066, by John M Thomson, calls on the Scottish Parliament to consider and debate the displaying of the current symbol of the Scottish Parliament in a prominent position in the debating chamber.

Do members have any views on the petition? We have raised the matter with the Scottish Parliamentary Corporate Body, which deals with such issues. Personally, I would close the petition on that ground. The SPCB may want to address the issue, but I doubt that we can add anything more. Is it agreed that we close the petition?

Members indicated agreement.

The Convener: PE1066 and all that is closed.

Scottish Prison Population (Catholics) (PE1073)

The Convener: PE1073, by Tom Minogue, calls on the Scottish Parliament to investigate and establish the reasons for the apparently disproportionate number of Catholics in Scottish prisons.

Do members have any suggestions on how the committee should deal with the petition?

Angela Constance: I do not have any difficulty with the suggestion that the committee should seek a written response from the Scottish Government, but we should first ask the right people about the issues that the petition raises. We have not done that so far. Given the nature of the petition, we should perhaps target some thinkers, academics and others who work in relevant areas of practice. I suggest that we write to organisations such as Sacro and the Association of Directors of Social Work, which I know has a criminal justice committee. We may even want to contact a selection of throughcare and aftercare social work teams, such as the one at Barlinnie prison. Various academics, such as Gill McIvor at the University of Stirling, who did a lot of work on the criminal justice system, and various ex-governors, such as Alex Spence, have done various bits and pieces of research, but I do not know whether they are still around. We should ask people who will give a bit more thought to the issue, rather than bureaucrats and civil servants.

The Convener: I suggest that we also write to some of the judges who are making decisions. If the petition has validity, decisions are being made at the evidence and conviction stages. I do not know about the structure and who it would be best to deal with, but we should seek clarity on the issue. The petition has been in the system for a while, so I want to bottom it out over a reasonable period. Angela Constance has given helpful suggestions to try to get further clarity on the issue.

Rhoda Grant: We also need to chase up the Scottish Government for a response. We cannot close the petition until we hear from the Government.

The Convener: Are those suggestions agreed to?

Members indicated agreement.

Scottish Civic Forum (PE1082)

The Convener: PE 1082, by John Dowson, calls on the Parliament and the Government to undertake an urgent review of issues relating to the Scottish Civic Forum and the funding that was previously available to it, and to adhere to the principles of guidance on participation as published in the Scottish Parliament's participation handbook.

The petition has been in the system for a while. It is not a comfortable fact, but funding has been withdrawn from the Scottish Civic Forum and it does not seem likely that it will be restored. That is difficult for those who have been involved with the organisation, which did a lot of good work before the Parliament was established and in its early years. Do members have any views on how to deal with the petition?

Nanette Milne: I do not think that there is anything more that we can do.

The Convener: The recommendation is that we formally close the petition. Is that agreed to?

Members indicated agreement.

Free Public Transport (Under-18s) (PE1107)

The Convener: PE1107, by Robin Falconer, on behalf of Highland Youth Voice, calls on the Parliament to urge the Government to reduce public transport fares for all under-18s in full-time education and to make provision for young people with no income to travel free or pay only half the adult fare. The petition has been in front of us before and there are still issues to be considered, although the idea of even more highlanders coming down to the fair city of Glasgow fills me with fear and trepidation.

John Farquhar Munro: If we get the highlanders back from the city of Glasgow we might do a bit better. There are too many of them there

Rhoda Grant: Glasgow would not cope without them

John Farquhar Munro: I think that the petition is worth supporting.

The Convener: Fair enough. Shall we write to the Scottish Government asking it to consider the issues again and to indicate what the timetable is for any review of the very good concessionary travel scheme that has been part of the transport network for the past three or four years?

Members indicated agreement.

Local Planning Inquiries (PE1112)

The Convener: PE1112, by Robert Kay, calls on the Parliament to urge the Government to clarify the circumstances in which the Scottish ministers would not accept the decisions of a local planning inquiry and public local inquiry, particularly in relation to housing developments on green-belt land, such as that at Cavalry park in Kilsyth.

The petition has been before us several times. As we discussed earlier, with the present planning law and the role for local authorities, the issues are best dealt with locally. Do members wish to propose any options for action?

Nanette Milne: The specific matter has been raised with the Scottish Public Services Ombudsman, so there is nothing more that we can do.

The Convener: Shall we close the petition on those grounds?

Members indicated agreement.

Residential and Abstinence Treatment (PE1113)

The Convener: PE1113, by Peter McCann, on behalf of Castle Craig hospital, calls on the Parliament to urge the Government to increase the availability and provision of residential and abstinence treatment for those who are alcohol and/or drug dependent.

This is a good petition and there are still issues that we need to pursue. As elected members, we all have major challenges with individuals in our communities who have addiction issues and whose families are not able to access the necessary support. I think that only one addict in nine can access the support that is required to break a serious drug habit. None of us is immune

to that issue, whether we represent Highland, urban or lowland Scotland.

Are committee members happy to seek further clarification from the responsible minister?

Members indicated agreement.

Child Care Strategy Review (PE1114)

16:15

The Convener: PE1114, by Gillian Vance, on behalf of the Galloway Childcare Company, raises issues about the provision of adequate funding for child care services across all local authorities. Again, the petitioner is concerned about the impact of recent budget decisions by a local authority.

The Government is opening up its early years strategy to consultation—I think that ministers have formally announced that—so perhaps we can raise issues through that. Do members agree to keep the petition open, write to the responsible minister and invite the Scottish Government to make representations to the UK Government on issues surrounding the tax credit system and the assistance that it might offer the petitioner?

Members indicated agreement.

The Convener: I thought that Angela Constance would say yes to that. We will raise issues about the overall support for child care in Scotland.

Transport Strategies (PE1115)

The Convener: I welcome a couple of members with an interest in the last petition: Roseanna Cunningham and Richard Simpson. The petition is PE1115, by Caroline Moore, on behalf of the Campaign to Open Blackford Railway-station Again—COBRA—which calls on the Scottish Parliament to urge the Government to ensure that national and regional transport strategies consider and focus on public transport solutions, such as the reopening of Blackford railway station, which is identified as a priority action in the latest Tayside and central Scotland regional transport strategy, and in doing so to recognise the positive impacts that such a reopening could have on local transport opportunities.

Does Roseanna Cunningham or Richard Simpson wish to make a quick statement?

Roseanna Cunningham (Perth) (SNP): I have very much supported the campaign from the outset. I ought to declare an interest, as I am within the catchment area and would be able to use the train if it stopped at Blackford.

I will make some comments about the papers that I have seen. The committee asked for

information from various organisations, and the responses raise some issues that lead me strongly to urge it not to close the petition yet.

There is a detailed response from COBRA itself, which raises many specific issues on the back of the information that the committee has received. Although COBRA is not too bothered with the response from the Tayside and central Scotland transport partnership—tactran—there is a bit of a contradiction between what is in tactran's strategy and what it says in the letter about its commitment to the station's reopening.

Network Rail's response is disappointing, because there is indeed a suitable rail service that could be expanded from Dunblane back up the line to Blackford. There is no reason why the service could not start and stop at Blackford instead of starting and stopping at Dunblane, which would take an enormous amount of pressure off Dunblane.

The Scottish Executive timetables for a review seem to be inordinately long. Equally, I wonder about approaching ScotRail for its comments about the matter, because some of the issues about backing another train service up the line would impact on its workings.

At this stage, and given the response from COBRA, a number of questions still require to be explored.

Dr Richard Simpson (Mid Scotland and Fife) (Lab): I concur with Roseanna Cunningham's comments and will add a couple. There is enormous and growing pressure on parking at Dunblane. Indeed, I think that the committee is almost about to get a petition on it, because the situation is becoming so difficult. The car park at Bridge of Allan, which is the next station down the line, has already been extended significantly, but it is now completely full, so people are back to parking on the streets there. The knock-on effect of traffic not being accommodated further up the line is creating significant problems.

I have two other points to make. First, although COBRA is not keen to be seen as campaigning to have Gleneagles station closed, access is not available in both directions at that station, which means that disabled people have extreme difficulty. In one direction, people have to come from Perth station to assist them to get on the train; in the other direction, it is impossible. Considering the Disability Discrimination Act 1995 and the long-term future, Blackford station would accommodate access for disabled people.

Finally, although the timing is probably too tight, the Ryder cup will be an important aspect of our tourism in 2014. As the station already exists at Blackford, it would be possible to get on with any work quickly. Gleneagles station is unable at the

moment to accommodate the numbers of people who are likely to come. As Roseanna Cunningham has said, an extended rail service could go up from Dunblane using either the Glasgow or Edinburgh trains—both trains already go to Dunblane—

Roseanna Cunningham: Or the one that is just the Dunblane train.

Dr Simpson: Yes, or the one that is just the Dunblane train. There are possibilities and no massive problems with the line. A station at Blackford would fit in with the changes that will have to be made given the new Alloa line that is opening on Thursday.

The Convener: I imagine that we will want to keep the petition live rather than close it—that is reassurance for Roseanna Cunningham and Richard Simpson. There are issues of substance in the documents, which both members have spoken strongly about. We will be happy to pursue those issues.

Do members have any other recommendations on how we could move forward?

Rhoda Grant: We could pursue Roseanna Cunningham's suggestion and contact First ScotRail for its comments.

The Convener: Okay. Are there any other comments?

Bashir Ahmad: The previous train service was stopped, because diesel cars and buses were preferred. These days, it is clear that diesel is not good for the public because of pollution. Rail services were suitable in the past, and they are still suitable now. I support the proposal in the petition.

The Convener: Also, we will need to review the Scottish transport appraisal guidance appraisal. We can continue consideration of the petition, seek further information on the issues raised by members, and bring the petition back to the committee. Obviously, Roseanna Cunningham and Dr Richard Simpson will be notified in due course so that they can continue to contribute.

New Petitions (Notification)

16:23

The Convener: I am conscious that we have had a long session and that some members have to nip away. The papers that are in front of us give us information on the new petitions and what we are likely to take oral evidence on at future meetings. Do we agree to note the petitions?

Members indicated agreement.

The Convener: The next meeting will be on 20 May, when we will hold our final oral evidence session in the cancer drugs availability inquiry. We will distil the key comments and findings to share among ourselves for a final paper. There are also a couple of housekeeping issues to deal with once the meeting is formally closed.

Meeting closed at 16:24.

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