

MEETING OF THE PARLIAMENT

Thursday 8 December 2005

Session 2

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Scottish Parliament

Thursday 8 December 2005

[THE DEPUTY PRESIDING OFFICER *opened the meeting at 09:15*]

Criminal Justice Plan

The Deputy Presiding Officer (Trish Godman): Good morning. The first item of business is a debate on the first anniversary of the criminal justice plan.

09:15

The Minister for Justice (Cathy Jamieson): Some people say that a week is a long time in politics—I see Conservative members nodding, so perhaps they know something that I do not—but a year in Parliament can seem to pass really quickly. However, a year seems much longer for people who live with antisocial behaviour or in fear of violence, or for somebody who becomes the latest victim of a young person who has offended again and again. Too many among us have had to suffer such a time. Let me be clear: a justice system that does not meet the needs of Scotland's people must be reformed, which is why we are engaged in the widest-ranging reform of our criminal justice service in more than 50 years. Our measures are not quick fixes or administrative dodges; they are about end-to-end reform and improvement to build the criminal justice service that we have long sought and that Scotland's people demand and deserve.

A year ago this week, I launched Scotland's criminal justice plan, which is our ambitious and far-reaching programme for a safer, stronger Scotland. We had to reform and the plan set out what we had to do, although it was clear that it would not be done in 12 months. However, we have made a strong start. I give this commitment to our hard-hit communities: the Executive is on their side and we will not stop until we deliver the criminal justice system that we all want. I ask people to judge us on our actions, on the reforms that are taking shape in local communities and on the fact that we stand side by side with people in local communities in dealing with antisocial behaviour, the so-called booze and blade culture, sex offenders, drugs and in reducing reoffending, making our daily lives safer and, importantly, rebuilding respect and confidence. We should also be judged on the improvements that we are making to our courts and to how we manage sentenced offenders.

Of course, it is not only our justice reforms that are relevant. We have invested in early years

education, to provide a free nursery place for every three and four-year-old; in our young people, with the aim of creating excellence in our schools; and in our communities—we have provided record investment to help those who are socially and economically disadvantaged back into work. Those are just a few of the other steps that the Executive is taking, all of which will contribute to the stronger, safer Scotland that I talked about. However, as we said when we launched the plan, the initiative is a long-term one and we have much more to do.

Actions continue to speak louder than words, so we are acting to make our daily lives safer. We have more police officers than ever before; crime clear-up rates are at historic highs; and we have strengthened the Scottish Drug Enforcement Agency by increasing the number of officers, which has helped to smash more criminal networks—84 were dealt with in the past year alone. Safer, stronger communities are built on those who respect themselves and the wider community. By fostering and rebuilding respect, we will turn the tide on antisocial behaviour and halt offending behaviour in its tracks. We have acted to provide powers and funding for local authorities, the police and their partners. Those powers are being put into practice and we are beginning to see the results of that: we now have 550 community wardens on the streets; the fixed-penalty notice pilots are interesting, with around 1,500 being issued in Tayside alone; and at least 688 warning notices and 33 penalty notices have been issued for noise nuisance.

We are using the Proceeds of Crime Act 2002 to repair the harm that serious and drug crime causes to our hardest-hit communities. The drug dealers don't care campaign resulted in 175 arrests, more than four times the normal number of actionable calls and more than £1.5 million-worth of seized drugs and cash. We are acting on sex offenders, who are relatively few in number but, rightly, a matter of high public concern. We will end unconditional release for sex offenders who are on short-term sentences and strengthen how we manage and supervise all sex offenders in the community.

We are acting on violence, to end the nightmare of knives that grips Scotland and that holds us all back. We aim to legislate on knives, swords and air-guns and we are dealing with the stain of alcohol-fuelled disorder and sectarianism. We have already banned stealth knives and batons and have made it an offence for any person to manufacture, sell, hire or own a listed banned weapon. We have consulted on a licensing scheme for the sale of non-domestic knives and restrictions on the general sale of swords. In a debate in the Parliament yesterday, we set out the steps that we are taking to end all forms of

violence against women. Those are steps in the right direction, but they are not yet enough.

During the past year, we have worked closely with Strathclyde's violence reduction unit. The violent crime figures for Glasgow for April to September of this year show what can be done when we tackle problems together. The number of murders was down by almost a quarter, the number of attempted murders was down by almost a third and the number of serious assaults was down by 12 per cent. We have long said that we will learn the lessons of what works, by starting where violence hits hardest and then rolling out the measures throughout Scotland. That is why we will, I am pleased to say, support the roll-out of the Strathclyde violence reduction unit to become a national centre of expertise to share best operational practice and to give advice to police and partners throughout Scotland. We will work with the Association of Chief Police Officers in Scotland and the VRU on a series of targeted national campaigns. That work is about action, not words.

Mr John Swinney (North Tayside) (SNP): Will the minister give more detail on exactly how the violence reduction unit will operate in parts of the country outwith Strathclyde? How many individuals is the unit likely to deal with?

Cathy Jamieson: That is a timely intervention, as I was about to say a bit more about the work that the violence reduction unit will do. It is important to point out that we need the unit to support work that is done locally. I know that Mr Swinney has concerns about antisocial behaviour in more rural communities, which we accept is a problem. The violence reduction unit will share best practice and expertise and support people throughout Scotland. However, we must build violence reduction into everything that we do—we cannot say simply that the unit must solve all the problems. That is why we intend to establish a national working group that will bring together senior decision makers from the key services, supported by a range of anti-violence experts, to identify and drive forward best practice throughout Scotland. We will support that work with a website that will provide information and advice and which will be part of the process of supporting people in local communities. I want practical and commonsense steps that achieve results. That has happened in Glasgow and Strathclyde, so I believe that we can roll out the work throughout Scotland.

That work is only part of the process. We must ensure that we have joined-up services that try to bring law and order into chaotic lives and lifestyles. Four weeks ago, the Parliament approved the Management of Offenders etc (Scotland) Bill, which contains far-reaching

reforms to allow us to reduce reoffending and bring law and order to chaotic lives. The potential benefits that the legislation will bring include better risk assessment, better case management, better information sharing, better-quality approved and accredited interventions and better joint working. Alongside that, we have acted to provide a full range of appropriate community sentences. Drug treatment and testing orders are now available to almost every court in Scotland. We know from the evidence so far that half of the offenders who receive a DTTO will not reoffend within two years. The orders have been used to deal with about 1,000 of the most persistent and chaotic offenders since 1999.

Miss Annabel Goldie (West of Scotland) (Con): To clarify, DTTOs are not available in district courts, are they?

Cathy Jamieson: No, they are not. The member and I have had an exchange on the matter before and discussed whether it would be appropriate to roll out DTTOs to the district courts. It is important that we focus on those who are likely to cause the most problems and we have tried to ensure that the full range of services is available throughout Scotland. The likelihood, however, is that the most serious and persistent offenders will be dealt with in the sheriff courts, so it is appropriate that we focus on those courts at present.

We must reform how our courts work, so that we have efficient courts, delivering effective sentences. Our High Court reform is already delivering impressive results. Initial estimates tell us that around one in four listed witnesses no longer needs to attend. In about 55 per cent of cases with a preliminary hearing, the accused is tendering an acceptable guilty plea. Around 50,000 witness appearances are estimated to have been saved. We are now acting on our summary courts, which deal with 96 per cent of all criminal cases—those are often the cases that are most visible to people locally. A quick, effective response at this stage is a real opportunity to stop a first-time offender becoming a persistent offender.

As we introduce legislation, we want to increase the availability of alternatives to prosecution. It is our intention to increase the maximum level of fiscal fine from £100 to £500 and to introduce fiscal compensation orders, in which the accused is offered a chance to pay compensation directly to their victim to put right their wrong. It is also our intention to introduce a new option for prosecutors: the community fiscal fine. The fine has been described as a fine on time, in which offenders are offered the opportunity to put something back into the communities against which they have offended. Those reforms will give prosecutors a

greater range of options to deal with many of the volume offences—the so-called minor offences that have to be dealt with outside the court system—and to speed up how we deal with low-level offending, to free up time so that the more serious offences can be heard in court more quickly.

Stewart Stevenson (Banff and Buchan) (SNP): Will the minister turn her mind to the £10 million-plus of outstanding fines and say whether she has plans to improve the effectiveness of the recovery of fines from offenders? Last year, we took the ineffective approach of sending 6,000 fine defaulters to prison.

Cathy Jamieson: Mr Stevenson will recall that we have introduced some of the McInnes report's proposals, which makes it clear that we want to improve the position. On a cautionary note, however, the sum that is given for outstanding fines will always include a number of fines that people are paying by regular instalment. We want to speed up the process, and measures such as supervised attendance orders are being introduced as an alternative to putting people in prison for relatively short periods, to no good effect. We will continue to pursue such measures.

On summary justice, the Executive believes that lay justice has an important part to play in our justice system. However, we should open up the selection process and improve training and support to ensure that people are not only aware of the system of lay justice but are able to serve their communities within the justice system. More people should have the opportunity to do that.

We believe in further improving our courts. In March this year, I announced the phased unification of the summary criminal courts. I am pleased to announce today that, subject to Parliament approving the legislation, the first sheriffdom to unify will be Lothian and Borders, followed by Grampian, and Highlands and Islands. That will give us a modernised service, which will deliver sharper, smarter justice and reflect the needs of local communities. It is not only local communities that want that unification; the professionals who work in the system have long asked for it. Phasing will allow the right local solutions to be put into place. Court business must continue to be carried out in locations throughout Scotland, taking account of the needs of victims, witnesses and communities.

Our reforms are taking root and are setting criminal justice in Scotland on a different path. A considerable amount of work has been done in the past year. We recognise that much more has to be done, but we are on the right path—a path that offers us hope for a better future for everyone. The path of reform is rarely easy; if it were it would perhaps be more often travelled. However, the

Parliament must take the right approach to reform. We must constantly strive to improve services and we must remember that we are doing that because we want to make the daily lives of our citizens much better and our communities much safer places to be.

During the past year, I have been heartened by the skill and commitment of staff who work every day to make the lives of their fellow citizens just that bit safer and easier. It has been a difficult time for some staff within the criminal justice system, as the pace of change has speeded up. However, I put on record my thanks to everyone who has been involved in that process so far. I am particularly proud of those throughout our communities who show day-in, day-out that people gain respect by how they live their lives, by being decent citizens within their communities and by how they behave towards others, not by the weapons that they carry in their pockets, by how hard they appear to others on the street or by achieving what they want through threat or fear.

I hope that the debate will give us an opportunity to confirm that the Executive, the Government and the Parliament are on the side of the decent, ordinary citizen in communities throughout Scotland. I believe that the Parliament will continue to support our work in reforming the system to deliver the safer, stronger Scotland that we need and that the people we represent deserve.

09:30

Mr Kenny MacAskill (Lothians) (SNP): I thank the minister for her speech. The Scottish National Party concurs fully with much of what she said. No one who enters politics or who is given the privilege of appearing in the chamber seeks to make Scotland a more lawless place; we all seek to make Scotland a better place. A debate such as this gives us a better opportunity to review matters than does an adversarial debate that is focused on one aspect. The debate will be wide ranging—the minister's speech has been wide ranging.

The SNP accepts that progress has been made—I am on record as saying that. I see the glass as half full, not half empty. It is a Scottish trait to consider the worst aspects. The SNP has welcomed the many legislative changes that have been made. We also appreciate the many procedural changes.

There are difficulties on the way, and we have recently heard of miscarriages of justice. The system must be big enough to admit when it gets something wrong. I do not want to go into individual cases, but recently someone was released after a considerable period in prison. Is he due an apology? Is the family of the victim due

an apology? What are the circumstances? I am not seeking a comment from the minister, but that is a test not only of whether the system has got it right, but of whether it is big enough to admit that it has got it wrong.

Cathy Jamieson: It would be completely inappropriate for me to comment on individual cases, but I hope that Parliament recognises the work of the Scottish Criminal Cases Review Commission and the fact that the Executive has given funding to MOJO—the Miscarriages of Justice Organisation Scotland—which is one of the voluntary organisations that supports people who have found themselves in that position. We recognise that there are situations in which people require support.

Mr MacAskill: Absolutely. I was not criticising the Executive, but pointing out how we should shape the justice system. The system must be prepared to admit its errors as well as to seek praise. Significant progress is being made on witnesses—the Solicitor General for Scotland is here to receive that accolade.

Matters are still being raised; I am particularly thinking of one that was presented to the Public Petitions Committee yesterday, although it is not appropriate now to go into the tragedy that befell Mrs Reid. Ultimately, we will have to balance the operation of the system with the needs and wants of the victim. Until now we have ignored the rights of the victim, and it is to the credit of the Executive, and the Solicitor General in particular, that that has been dealt with. There is an opportunity to go further—just how far remains to be seen.

There are areas in which the SNP considers that the Executive has not gone far enough, such as the changes on air weapons, although they are welcome. We need an all-encompassing system that must be dealt with by the Parliament, with the Executive taking responsibility for driving it forward. Progress has been made on knives, and the SNP recognises that the Executive has, quite correctly, been willing to drive further and faster to create a significantly different system in Scotland than has been the case south of the border. It would be logical to do likewise with air weapons, on which there is a significant and distinctive Scottish problem.

Jeremy Purvis (Tweeddale, Ettrick and Lauderdale) (LD): Does the SNP propose an all-out ban on air-guns, or a registration system?

Mr MacAskill: Our position is clear. New weapons should be licensed when they are first sold, and unless someone has them for the specific purpose of pest and vermin control, or because they are a member of a registered gun club, there is no legally justifiable or ordinary

commonsense reason for possessing them. Air-guns are not things of fun that people should get in their Christmas stockings to enable them to go out shooting. The situation is unacceptable: we have said that before and we say it again.

It is important that the minister mentioned respect and responsibility. Those words have been bandied around, but they are fundamental to individuals accepting responsibility for their actions. Individuals have rights, but they must also recognise the rights of their neighbours. That is why we are happy for antisocial behaviour orders to be used in Mid Calder. We recognise that that cannot be the ultimate solution, as it might lead the offenders simply to congregate in East Calder, Pumpherston or West Calder. However, the residents of Mid Calder are entitled to have immediate action taken to protect them on a Friday or Saturday night or at any other time of the week.

We must look for a solution that is based on acceptance of responsibility and respect. Some of the problems are cultural matters in which legislation has a role but cannot, ultimately, be the enforcer. It is important to recognise that the criminal justice system alone cannot solve all the problems that manifest themselves as criminal justice matters. It is impossible for the police to do anything other than firefight unless we drill down to the question of why kids are hanging around in Mid Calder. Some of the offences are committed out of badness and the offenders need to be dealt with through punishment; however, we must work out and address why certain areas are affected and why certain individuals are involved. I received a written answer from the minister on 1 December that makes it clear that there are social and economic issues involved and that drink, drugs and deprivation underpin much offending. The answer states that 77 per cent of people who are sent to prison have a drink or drug dependency problem. We have a problem that cannot be addressed simply by the criminal justice system; however, that does not mean that it should abdicate responsibility. The house owners and shop owners in Mid Calder want a solution, not an excuse. They want immediate action.

We must remember that neither the police nor prisons alone can address these matters; they have to be addressed in different ways. If we are to get the society that we want, we must address the underlying problems of drink, drugs and deprivation. The percentage of people who are admitted to prison with a drink or drug dependency problem is shameful and reflects badly not so much on the Executive as on Scottish society. We have a problem in our midst and, if we are to address its manifestations in crime and antisocial behaviour, we must tackle it. We cannot simply expect our police officers to rush from area to

area, dishing out ASBOs, firefighting on a wet Friday night, or whatever. We need to drill down below that.

Finally, I will address rendition flights. Professor Christopher Gain today seems to be suggesting—as an academic lawyer would—that those who fuel such planes are guilty of participation. However, it would be a brave chief constable who sought to access a plane that was operated by the Central Intelligence Agency or some other United States agency. It is a political matter that must be dealt with by the Executive and by number 10. We have values, which we have talked about before, and the system must be big enough to admit it when it gets things wrong. If we get something right, we should congratulate ourselves; if we get something wrong, we should recompense those whom we have mistreated.

The Deputy Minister for Justice (Hugh Henry): Kenny MacAskill has suggested that the Executive needs to take action. Will he spell out what action it should take?

Mr MacAskill: The Executive should make it clear that we have laws and values in Scotland, which we have upheld through the centuries and which we adhere to. It should make it clear that we object to torture and do not wish to participate in flights that are linked to that. At a minimum, the Executive should state publicly that it is telling the Prime Minister that we do not want those flights here. The Executive may not have the power to redirect the planes, as airspace is a reserved matter, but it should state whether it is for or against such flights.

Is the Executive prepared to tell Tony Blair that it does not want Scotland's hands to be sullied with the carting of those people from the middle east to eastern Europe, whether they are in nappies, whether they are drugged and wherever they are from? That is the least that the Executive should do, because it is fundamentally accountable for Scots law. We do not wish to participate. If Scots law is being flouted by anyone—by a ned in Mid Calder or by the largest superpower the world has ever known—and what is happening is contrary to the values of our society, we should make it clear that that is unacceptable.

There is a historical precedent for that. Some 20-odd years ago, New Zealand amended its constitution to state that the country would be nuclear free. That was proposed by a Labour Government, to its credit. New Zealand then faced the problem of United States ships seeking to enter its ports to refuel. The Government of New Zealand said that, unless the US denied that the ships had nuclear weapons on board, the ships could not enter its ports; however, US policy on its ships is the same as that on its aeroplanes.

Pauline McNeill (Glasgow Kelvin) (Lab): Will the member give way?

Mr MacAskill: No.

The US neither confirms nor denies that nuclear weapons are on board its ships, just as it neither confirms nor denies whether its planes are carrying prisoners from A to B. To its credit, the New Zealand Government said that unless the US denied that nuclear weapons were on board the ships—or if it confirmed that they were—the ships could not dock there. The New Zealand Government acted like a Labour Government. It acted to uphold the values and the constitution of New Zealand.

Pauline McNeill: It is not for Governments to—

The Deputy Presiding Officer: Ms McNeill, sit down. Mr MacAskill, you should finish now.

Mr MacAskill: New Zealand's constitution has remained unchanged, although Conservative Governments have since taken over. The New Zealand Government recognised the law, the constitution and the values of the people. The Scottish Executive has failed to stand up for the laws and values of the people. It is the Executive's duty to make it clear that rendition flights are unacceptable and to tell Tony Blair that we do not want those flights in our airspace.

09:42

Miss Annabel Goldie (West of Scotland) (Con): I was lulled into leisurely retrospection this morning and almost convinced myself that I was in a time machine and had found myself back in 2000. That was until I listened to Mr MacAskill and wondered where on earth a debate on the criminal justice plan of this devolved Parliament was straying. It turned out that I was not in a time machine; the Executive was simply spinning things in that way. The minister wants to talk about what has happened in criminal justice in Scotland over the past year, but Labour and the Liberal Democrats have been in charge of the Scottish justice system for the past six years, not just one year. No matter how much they might like to obscure their abysmal record over those six years, I am not going to let them.

The minister has talked about the progress that has been made on the criminal justice plan, but I wish to remind her of the real consequences of the Executive's policies on law and order over the past six years. Since 1999, crime and offences are up 15 per cent to an all-time high. Serious assault is up by 6 per cent; rape and attempted rape are up by 47 per cent; fire-raising and vandalism are up by 58 per cent; and drug crime is up by 38 per cent. A chilling statistic from the Scottish crime survey is that three out of four crimes are never

reported to the police. If anything is indicative of a significant dent in public confidence in our criminal justice system, it is surely that statistic. I could continue to cite statistics, but I have limited time.

With all those problems and so many challenges, what has the Executive done? The minister said—I support her in this and hope that I quote her correctly—that a justice system that does not meet the needs of the public must be reformed. I pose the question: how has the Executive reflected that? It has voted four times against ending the automatic early release of prisoners and has passed legislation to make it easier for prisoners to get out of jail even earlier.

Cathy Jamieson: Does Miss Goldie accept that, as we have made clear, we intend to end the current automatic early-release system and that the correct way in which to do that is by properly considering the views of the Sentencing Commission for Scotland, which has been asked to do that job, and by putting in place a system that will ensure better management of offenders between prisons and the community?

Miss Goldie: Intentions, intentions, intentions. The minister does not need me or the Scottish public to tell her that the road to hell is paved with good intentions. The public look for political leadership, not intentions.

How has the Executive reflected its admittedly laudable approach? It abandoned the just say no drugs campaign, which was replaced with one that gives mixed messages. It has no idea how many drug rehabilitation places are available in Scotland for dealing with the growing number of addicts. It has presided over a burgeoning growth industry in methadone scripts and it abolished Scotland Against Drugs without any debate or explanation and without giving any notice to the Parliament. In the meantime, drugs-related crime has soared and our prisons are awash with drugs. Our overstretched police officers have been given so many new responsibilities that, according to the Executive's research, only about 145 of them are on our streets at any one time. If I were Minister for Justice, I too would want to hide from such a record.

By contrast, my party believes that crime can be cut and we have policies that will achieve that. Due to time constraints, I cannot mention all the issues on which I would like to offer the minister some advice—although I will keep her in mind in future debates—so let me focus on three simple steps that would dramatically improve the Scottish criminal justice system. First, we must end the automatic release of prisoners now. The minister disputes that such a move is possible or practical, but sometimes in public life Governments need to show political leadership by responding to public dismay at a system that is discredited. If the

minister is as committed to such a policy as she suggested this morning, she ought to introduce legislative proposals to address the issue.

Cathy Jamieson: Will the member take an intervention?

Miss Goldie: I have been generous in accepting one intervention from the minister already.

Each week, our newspapers contain further sad stories of people who have been attacked and killed by individuals who, but for the practice of automatic early release, would still have been in prison. Surely the minister accepts that there is a public appetite for a change in that practice. Such a change must apply to all offenders, not just sex offenders as the criminal justice plan hinted. Just last week, Derek Ferguson was found guilty of the tragic murder of 16-year-old Steven Pettigrew. The stabbing took place in April this year, when Ferguson should still have been in prison for his brutal attack on a father and son in 1999. Surely the practice of automatic early release cannot continue to be acceptable.

Secondly, the Executive must learn from elsewhere by accepting the merit and wisdom of a zero-tolerance policing strategy and introducing genuine local accountability. I am aware that the public throughout Scotland are frustrated by a feeling of impotence about their ability to influence how general strategic policing is conceived and provided. The members of the public who pay taxes to fund our police forces do not know where they fit in. My party believes that some level of accountability could be achieved through the direct election of police board conveners and the publication of localised crime statistics. If the minister will not listen to me, perhaps she will listen to Chief Constable John Vine, who said:

"We still run our police forces in Scotland like social clubs. About 80% of our time goes on making life comfortable and the public out there are almost a bloody nuisance who get in the way. We need to change that culture. They are paying our wages and we need to be far more responsive to what they want. I think we need a new deal with them."

Well said, John Vine.

Thirdly, as I told the First Minister last week, we need to introduce a politically led strategy to deal with the scourge of drugs abuse in Scotland. After six years of devolution, the deficiencies and omissions in information to which I have referred can no longer be acceptable. The Executive needs to find out more information about what is happening in Scotland so that it can work out a strategy for those who need to find help, which they must be able to find easily. The Executive must also rapidly deploy strategies to provide vastly improved facilities for rehabilitation of drug-addicted people.

I have been able to make only those few suggestions in the time that is available to me this morning, but I urge the minister to listen to public opinion and common sense and to reverse the tide of rising crime in Scotland. It can be done, but it needs courage, conviction and political leadership.

09:50

Jeremy Purvis (Tweeddale, Ettrick and Lauderdale) (LD): At the beginning of Mr MacAskill's speech, I thought that the Cameron effect had touched the SNP. However, if he started his speech as David Cameron, he most certainly ended it as Michael Howard. Annabel Goldie picked up the latter theme, so it is evident that the consensual element in Conservative politics has not reached north of the border.

We all have constituency casework involving constituents who have been victims of crime. The fact that I am a Liberal Democrat does not mean that I am softer on crime than any other member or that I do not understand how crime can affect families and communities, including my own. Being a Liberal Democrat does not mean that I am not on their side, but it means that I believe that our justice system should not be designed around the latest tragedy. Firearms and sex offending are good examples of complex and difficult criminal justice issues that should not be shaped by yesterday's newspaper headlines. Of course such issues are sensitive, but the Parliament must ensure that it strikes the right balance not by responding to headlines but by having a proper criminal justice system.

Part of the solution must be to reduce reoffending, as is emphasised in the criminal justice plan whose anniversary we mark today. Many of those who have gone through the social work system and have then been given a disposal now receive an assessment and supervision in the community. That aspect of the criminal justice plan often gets overlooked. In the Lothian and Borders criminal justice consortium area in 2003-04, almost 5,000 assessments were prepared for the courts. Of those, 61 per cent resulted in an order requiring community supervision. About 1,000 prisoners were supervised both in prison and in the community. Of course, it is hard to test the success of that supervision, because robust monitoring of recidivism is difficult. It is easier to monitor whether someone commits an offence immediately after their release from prison or on bail than, say, two years after their release. However, the Cinderella service of criminal justice social work will rightly need to have increasing visibility in the future.

The Parliament is aware of my long-standing view on the ineffectiveness of short-term prison sentences. It is inevitable that we will always need

the sanction of imprisonment whereby we deprive someone of their liberty, but our continuing reliance on short-term prison sentences is ineffective in reducing reoffending. Structurally, it can undermine the work of the dedicated professionals who are committed to rehabilitating offenders, because it means that they lack the structural tools to assist them in their task.

According to the Executive's figures for 2003, 54 per cent of all custodial sentences were for less than three months and 21 per cent were for less than 60 days. The high number of very short sentences that are handed down by our courts not only contributes to our large prison population—and our unenviable record as one of the most imprisoned countries of Europe—but makes it almost impossible to provide offenders with real training and education or allow them successfully to complete drugs or alcohol programmes. Although the new centres in our prisons try to co-ordinate programmes so that they start in prison and continue in the community, we simply do not have the right levels for that to work for individuals and communities. That is a tragedy.

It is no secret that I would like the Sentencing Commission to promote a much wider acceptance of the value of real and thorough community sentences. The ability to impose community and restorative justice disposals—and, arguably, drugs programmes—should be widened so that such disposals are available to district courts.

We should end the arbitrary early release of prisoners, but, rather than adopting the Conservatives' arbitrary approach, we should replace automatic release with a more flexible system of tailored release. Such a system should include community supervision and additional requirements, such as attendance at a course or programme, that are shaped around the individual's specific requirements. For example, a condition of release might be that the individual attends a housing interview or an anger management course. We should not underestimate the benefits of such an approach for some types of offender who are released from prison, especially given the utterly chaotic lifestyles of so many of them, to which the minister referred.

In 1994, just over 10 per cent of all penalties in Scotland were custodial. In 2003, the figure was nearly 13 per cent. Today, there is a greater reliance on sending Scots to prison than there was even 10 years ago.

Most controversially, but most importantly, I want to see a phasing out of sentences of three months or less and a presumption against sentences of less than six months. A sheriff or a justice of the peace would have to give a reason for deciding that no alternative was either available

or desirable. We now have considerable evidence in all the areas that we are discussing. I know that the Sentencing Commission will give serious consideration to such issues.

It would be positive for us to move in the direction that I have suggested, but inevitably that would involve placing a greater burden on the community sector and on criminal justice social work. However, if we consider the costs that are incurred in sending people to prison, we see that there is scope for spending money differently and, in my view, more effectively. Figures from 2002-03 show that the average cost of a six-month prison place is approximately £15,000. That compares with just over £1,000 for a six-month probation order and just under £1,400 for a six-month community service order. More community places mean more expense and burden on the community. However, with fewer prison places, we would arguably have a more effective and efficient system.

We are looking at the operation of the criminal justice plan over the past year. Understandably, there has been much comment on the crime figures this year, as there is in most years. Miss Goldie relayed statistics that suited her argument, but people can find statistics to suit most other arguments. I am sure that most members have read the latest annual report of Her Majesty's chief inspector of constabulary, in which he places an important health warning on any published figures. He states that the new Scottish crime recording standard, introduced in April 2004, is based on the victim-oriented approach of the national crime recording standard, which was introduced in England and Wales in 2003. In practice, it means that no corroborative evidence is required initially to record a crime-related incident as a crime. If the incident is perceived as such by the victim or another person, it is recorded.

We should all welcome the more victim-oriented approach. The introduction of the new recording standard was expected to increase the number of minor crimes recorded by the police, such as minor crimes of vandalism and petty thefts. The total number of crimes recorded in Scotland in 2004-05 was the equivalent of 86.3 crimes per 1,000 of the population. If I went outside the chamber today and asked people how many crimes they believed were committed in Scotland per 1,000 people over a year, they would give much higher figures. Regrettably, the fear of violent crime and crime involving firearms is also greater than the reality of such crime.

The inspector's report provides another good example of why we must examine the figures closely, instead of using them glibly. The number of crimes and offences involving the alleged use of firearms rose by 20 per cent, from 974 in 2003-04

to 1,165 in 2004-05—hence the shock, horror from many members. Nevertheless, the figure is 34 per cent lower than that for 1995-96 and is equivalent to about 0.1 per cent of all recorded crimes and offences.

The plan that the minister set out is ambitious and impressive as a single document that outlines the work of the Executive. By and large, it received support across the chamber. It does not start afresh, but builds on work that the Executive has done previously. However, given that this is the anniversary of the plan, there is no doubt that we must make more progress in Scotland. There is no dispute that we have record numbers of police officers and that they are being ambitious. Eighty-four criminal networks have been broken. We are putting in place new structures in community justice authorities—I hope that they will make a real difference in co-ordinating the kind of work that needs to be done in our communities, with more community disposals and reviews of sentences, which will be more effective in the future.

09:59

Bill Butler (Glasgow Anniesland) (Lab): A year after the publication by the Executive of Scotland's criminal justice plan, it is fitting that the Parliament should take stock. The direction of travel was clearly stated by Cathy Jamieson in her foreword to the document:

"to protect communities and prevent crime, tackle drug addiction, reform our courts, deliver effective interventions and sentences which fit the crime and build integrated services to manage sentenced offenders."

That is no easy task; it is a huge challenge. As the minister indicated in her speech, there is no short cut on this journey and there are no quick fixes.

In our discussion this morning, as we engage across the chamber, we need to judge how far we have come and to map out clearly how far we still have to go to arrive at a Scotland of safer, stronger communities. I would like to concentrate on two of the plan's five areas: first, the development of integrated services for managing offenders; and, secondly, the protection of our communities and prevention of crime.

As a member of the Justice 2 Committee, I took part in the interrogation of the Management of Offenders etc (Scotland) Bill, which was passed by the chamber four weeks ago. I believe that the legislation will help both to improve the management of offenders, through greater integration of the work of the criminal justice agencies, and to reduce the level of reoffending. In particular, the creation under section 11 of the bill of a new discretionary power for the Scottish Prison Service to release certain prisoners on

home detention curfew has real merit. Most of the evidence taken by the committee supported the creation of home detention curfews for certain low-risk prisoners. I repeat that for the benefit of Miss Goldie—low-risk prisoners. The police were generally supportive of HDCs as clearly specified in the bill. HDCs are one means of assisting the process of planned integration of specific categories of prisoners. They will play a part in reducing the level of reoffending, without putting at risk the safety of communities throughout Scotland.

I repeat for the sake of the Conservatives that only certain types of low-risk prisoners will be eligible. Sex offenders who are subject to notification requirements, prisoners who are subject to extended sentences and those who have a history of domestic violence will rightly be excluded. All releases on licence will be monitored remotely and time on HDC cannot be more than 135 days. HDCs are not a panacea. The Management of Offenders etc (Scotland) Bill is not the answer, but it is part of a solution to reoffending.

I know that the Conservatives cited HDCs as one of the “two principled grounds”—I quote from Miss Goldie’s speech in the stage 3 debate on the Management of Offenders etc (Scotland) Bill—for their inability to support enactment of the bill. Unlike Miss Goldie, who questioned the sincerity of the Executive today, I do not question the sincerity of the Conservatives’ position. Sadly, I can only describe her speech today as a bout of Punch-and-Judy politics. The issue is too serious for that—Miss Goldie will have to raise her game. I hope that, if HDCs are successful, Conservative members will have the good grace to support them in due course.

Margaret Mitchell (Central Scotland) (Con): Does the member accept that, with the introduction of home detention curfews, we are eliminating the possibility of continuing effective rehabilitation work in prison?

Bill Butler: I do not. If I had more time, I would explain to the member why.

HDCs and the drive to cut levels of reoffending must never compromise public safety—that is a given. Public safety is the Parliament’s prime concern, along with the economy. Our priority is to create the communities in Scotland that we want to see, in which crime is cut and a civilised society is able to grow.

One aspect of offending that causes concern among members from all parties and throughout the country is the high incidence of violent crime involving the use of knives and other offensive weapons. Statistics show that knives and other sharp instruments continue to be the most

common method of killing in our country. That alarming trend is most apparent in Glasgow and the west of Scotland, but it touches every part of Scotland. I was pleased to hear the minister pledge today to roll out the work of the Strathclyde police violence reduction unit, so that it becomes a national centre of expertise. That is a good move.

The minister will be aware that at a recent meeting the Justice 2 Committee took evidence from Detective Chief Superintendent Carnochan of the unit. He spoke with the eloquence of those on the front line. When asked about the likely impact of the proposals in the Police, Public Order and Criminal Justice (Scotland) Bill regarding knife crime, he said:

“If we prevent one family from having to visit a grave and another family from having to go to Barlinnie or Polmont for the next 10 years to visit their teenage son, the bill will have been a success. The Parliament will not pass many pieces of legislation that will save a life, but this bill has the potential to do that.”—[*Official Report, Justice 2 Committee*, 22 November 2005; c 1854.]

We should take real account of those words. I say to the minister that although Strathclyde police and police throughout Scotland do good work in this area, the challenge of knife crime and its attendant culture remains highly difficult.

My constituents support the police taking visible deterrent action. There is a general welcome for the proposals in the Police, Public Order and Criminal Justice (Scotland) Bill to strengthen the police’s stop-and-search powers. There is widespread agreement that punishment must be severe. I know that ministers are not convinced about mandatory sentences because of their inflexibility and I tend to agree with that. However, although I wholly acknowledge the independence of the judiciary, I urge, as my constituents would, the fullest use of the powers available to sentencers in the appropriate circumstances.

Condign punishment is not enough; it is important, but so is education. I mention—in a cross-party rather than a Punch-and-Judy way—Tommy Sheridan’s imaginative suggestion that reformed offenders could play an important role in that education, alongside the research and educational work that the Executive has already set in train.

Members of the Scottish Parliament have legitimate differences of opinion about the means of dealing with criminal justice matters. However, there is broad agreement about the end that we seek: a safer Scotland where fewer people go to prison, where reoffending is cut and where the criminal justice system is resilient enough to punish where necessary and to rehabilitate where possible. We seek to create, in the words of the Executive—they should be the words of the Parliament, too—a safer, stronger Scotland.

10:06

Mr John Swinney (North Tayside) (SNP): Mr MacAskill wondered whether, in our speeches, we would see the glass as being half full or half empty. In that spirit, I will try to make my speech about the glass being half full.

I applaud the Government for the many good criminal justice measures that it has introduced and for the practical steps that it has taken to try to ease the concerns of all our constituents, whether in urban or rural Scotland. However, the generalities of the debate that the minister initiated have to be challenged by the realities of life in our communities—I listened with care to what Mr Purvis said about that. It is important that, in this debate, we should test whether the reforms that the Government undertakes are matched by what happens in our communities. I will draw on an example from my constituency to illustrate that the Government has a lot more to do, as the minister said in her speech.

The minister said that her objective was to create stronger and safer communities. I entirely support that. She said that the Executive is on the side of people in our communities, but my example is of where the system is falling down. Earlier this year, in one of the many rural towns that I represent in Perthshire, a 16-year-old man who was behaving entirely innocently was assaulted in the street. He was forced to the ground and an attempt was made to jump on his head in a very dangerous fashion. Luckily, he was able to escape with his friends. The person who attempted to stamp on his head had received an 18-month sentence for the serious assault of a man in exactly the same location some time before. He had been let out on licence after completing six months of that sentence and, on the very day of his release from prison, he stamped on my constituent's head.

That tells us that the system does not in any way address the practical realities of people's experiences. A court date was set for the trial in the summer. Between the time of the assault on my constituent and the appearance in court, the individual who was charged with that assault assaulted a police officer into the bargain. He pleaded and was found guilty of those offences, sparing my constituent the obligation to go to court, which I welcome.

While the man was on remand waiting to be sentenced, he appealed for bail to attend his cousin's funeral. He was let out unsupervised two days before he was due in court. Members will never believe what happened—he absconded. He was let out unsupervised after pleading guilty to committing serious assaults, including an assault on a police officer.

The man was finally apprehended, returned to court, where he pleaded guilty, and given 18 months' probation with a requirement to undertake alcohol counselling, which I think was a good idea, and 120 hours' community service. I would have thought that an appropriate disposal in that case, if it had to be probation, would be that he should have had to undertake some form of counselling to challenge his aggressive violent behaviour. I am dumbfounded by the sentence that he was given by the judicial system.

The young man who perpetrated the assault on my constituent has a history of 17 convictions since the age of 16—he is now 19. The case of my constituent poses the question what damage is to be done in the communities that I represent before the system more effectively challenges the behaviour of individuals such as that young offender. I cannot believe that a sheriff who has full capacity in a court can make such a lenient decision given the conduct of that individual.

As a result, the victim of the assault is now terrified to walk the streets of the town—no wonder. I raised the issue with the minister, who, as always, dealt thoroughly with my correspondence.

Mike Pringle (Edinburgh South) (LD): I accept that the case that John Swinney describes is tragic, but is he suggesting that the Executive should lay down guidelines to sheriffs enforcing exactly what sentences they should impose, or do we still feel that sheriffs should be independent? Perhaps in the case that he described the sheriff was particularly lax, but sheriffs must have their independence.

Mr Swinney: The minister made the point in her letter to me that the judiciary is independent, that it must make its own decisions and that the Government gives sheriffs guidance on suitable penalties. However, there must be a culture change in the judicial system. Although the issue is not all to do with the Executive, it is not good enough for the Executive to say, "We're doing our bit, it's the judiciary that's letting us all down." The whole system has to deal adequately with the problems that I have highlighted.

I agree that the judiciary must be independent, but it is important that the Government gives the right signals about what it expects the judiciary to do. Into the bargain, the Government must also make it clear that wider disposals are available. That is why I welcome what the minister said about the Strathclyde police violence reduction unit and the importance of challenging more assertively the behaviour of individuals who are guilty of violent crimes.

I do not take the view, as the Conservatives do, that everybody should be locked up for ever to

take account of their crimes. However, I believe that everybody who is found guilty of a crime must have their behaviour challenged. That is where my criticism of the Executive rests. I do not believe that the Executive has challenged effectively and assertively the conduct of individuals who are guilty of serious assaults. Until it does, I suspect that young individuals will continue to have to endure the same kind of pain and suffering as did the constituent whose case I brought to the Parliament today.

10:13

Bill Aitken (Glasgow) (Con): As one whose political style is very much Punch as opposed to Judy, I start by acknowledging certain aspects of the criminal justice reforms that have been effective.

I concede that the minister is correct in saying that there are now more police officers in post. However, where things have gone rather awry is that not many of those officers are out patrolling the streets. The minister's department and the Parliament have imposed wider responsibilities on police officers under a number of headings. Although there has been an increase in the number of officers, the volume of work that has been created diminishes the effect of any significant increase and that has to be recognised.

I wonder how much patrol time is now available to police officers. It appears that they spend their shifts going from call to call on the basis of telephone reports, which is a highly unsatisfactory situation. Officers are answering calls all the time and there is no patrol time whatsoever.

Cathy Jamieson: Surely Bill Aitken is not suggesting that the police should not respond to calls from the public.

Bill Aitken: Absolutely not. I am suggesting that there are not enough police officers. The officers who are on duty are answering calls all the time, with the result that they are not out patrolling the streets, deterring and preventing crime. That is a marked issue and the minister should be making inquiries into whether what I am saying is the case. She has passed a plethora of legislation, not all of which has been bad. However, a great deal of it has been unnecessary, because if she had used the existing law she could have achieved the results that she was seeking to achieve.

Some of the measures that have been introduced have greatly diminished the effectiveness of the summary courts. As the minister recognised in her speech, a first offender who is dealt with adequately might not become a repeat offender and might not carry out a much more serious crime. However, let us consider the position. The summary criminal courts impose

fines, but fines are frequently not paid. They impose community service orders, but community service is frequently not done. There is still a question mark over the enforceability of fiscal fines, and there are discounted sentences and early-release schemes.

The maximum sentence on a summary complaint when there has been no analogous offence is three months' imprisonment. If we discount a third for a plea, that brings it down to 60 days, and with automatic early release it comes down to 30 days. Will that deter anyone? The short, simple answer is no. What is the solution to the problem? I always believe in being constructive in parliamentary debates, and surely the answer must be to deduct fines from wages and benefits in order to ensure that they are paid, that there is a deterrent and that we do not have the ludicrous situation, which Stewart Stevenson quite correctly highlighted, of people going to jail in lieu of payment of fines.

We must have a much more robust approach to community service, which is often not used by sentencers because they have no confidence in the system. Community service is often not done. Community service orders are frequently breached, but the breaches are never reported. That is the reality of the situation.

With regard to the early-release scheme, one of the issues is that many of the courts do not use the powers to order an accused person to serve the unexpired portion of a sentence when early release has been granted. I detect some straws in the wind and I hope that the minister is finally realising that the early-release farce must be examined. We shall see what emerges from the Sentencing Commission for Scotland, and if early release is to end we shall most certainly support that.

Bill Butler: Are the Conservatives saying that they are against conditional early release?

Bill Aitken: I think that our views on the matter are well known. In fact, Mr Butler will recall that he voted against us twice, quite enthusiastically, when we tried to amend legislation in order to deal with that.

There is a case for early release in certain instances, but it should certainly not be 50 per cent of a sentence of four years or less. We have made that clear in the past. I felt some fear when I saw a report in today's paper headed, "Jamieson backs plans for offenders to serve split sentence: prison term and work in community". There is a clear case for community service, which we have always supported, but there is also a clear case for deterrence, and split sentences are not likely to bring about deterrence. That is our concern.

John Swinney mentioned a constituency case in which the sentence appears, on the face of it, not to have been appropriate. I am surprised that the Crown did not utilise the powers that were granted by the Conservative Government to appeal an unduly lenient sentence. That, surely, would have been the way round the problem, but I do not think that we should comment further on individual cases in Parliament today.

Until there is a real deterrent, we will not get a fall in criminality.

Jeremy Purvis: With regard to community sentencing and the proper co-ordination of sentences and community disposals at local level, so that the judiciary has more faith in them, why did not the Conservative party support the establishment of the community justice authorities, which will place a duty on local authorities to co-operate and to work together? In fact, I recall Mrs Mitchell saying that the community justice authorities were too tough.

Bill Aitken: The practicalities of that scheme were questionable. However, Mr Purvis himself states that he does not want sentences of less than three months. In preparation for a recent debate, I looked at sentences that I had imposed as a district court justice. Is he suggesting that someone who urinates on an elderly woman travelling home on a bus late at night, sings sectarian songs and then threatens that woman as she is being led away, should not get jail, or that someone who charges around the 14th floor of a multistorey block of flats, hammering on doors with a hatchet at 3 o'clock in the morning—both offenders having a fair schedule of convictions—should not be locked up? Surely not. There must be realism, and there is room for an awful lot more of it in the criminal justice plan.

10:21

Karen Whitefield (Airdrie and Shotts) (Lab): I apologise for being a few minutes late this morning, due to some technical difficulties with my computer.

Scotland's criminal justice plan set out a comprehensive approach to reforming our criminal justice system and making our communities safer. It recognised and promoted the value of community regeneration and the process of reducing crime. It set out the Executive's ambition to make respect, both for the individual and for our communities, the central theme of its reform of the criminal justice system.

I want to focus on the important part that community regeneration can play in reducing both crime and the fear of crime. I shall also speak briefly about the impact of antisocial behaviour orders and initiatives such as the youth court. The

criminal justice plan recognises the link between crime and disadvantage, and I welcome an approach that views the Executive's community regeneration funding as a central part of the effort to reduce crime in our communities.

As members may recall from my members' business debate on the just youth intergenerational DVD, providing relatively low-level funding for youth work can have a positive impact in our communities. Efforts to reduce unemployment, to improve access to education and to build stronger communities can have only a positive impact on crime levels in our communities. Community wardens and similar initiatives are beginning to make an impact on the communities that I represent. The wardens who patrol Craigneuk and Petersburn in Airdrie are building strong links with the community. In fact, they have even recruited some school children from the local community school to become junior wardens, who are involved in basic duties such as tidying up the local park and reporting any vandalism that has taken place. That is an excellent example of community involvement, encouraging young people to have a sense of responsibility for their neighbourhood and the resources in it.

In North Lanarkshire, the Executive's community regeneration funding is helping to provide additional youth work at non-traditional times, such as at the weekends, thereby providing positive alternatives to antisocial and criminal activities. Another service that is provided by North Lanarkshire Council is the antisocial task force, which is headed up by Matt Costello. That is an excellent example of what can be achieved by local authorities using some of the increased powers that have been provided by the Scottish Parliament. North Lanarkshire Council has been criticised in some quarters for the number of antisocial behaviour orders that it has issued, but I would like to ask those critics to explain their concerns to my constituents, whose lives have been made a misery by the thoughtless and destructive actions of a small minority. I know that they all value the work that has been done and the action that has been taken by the antisocial task force.

Interestingly, although North Lanarkshire may issue more ASBOs than any other local authority, it has one of the lowest levels of evictions related to ASBO breaches. Matt Costello is firmly of the opinion that ASBOs are helping to modify and reduce antisocial behaviour, so helping to reduce the need for evictions.

As the criminal justice plan states, reconviction rates in Scotland compare badly with those of our European neighbours. We must find new and

innovative ways of breaking the cycle of offending that too many young men, in particular, fall into.

Evidence suggests that community-based sentences can help to reduce recidivism. I highlight the approach that has been taken by the youth courts in both Airdrie and Hamilton. The primary aim of the youth court is to fast track the criminal justice system for young people in order to break the cycle of offending before it has time to begin. Prior to the introduction of the youth courts, too many young people reoffended a number of times before they went to court. The youth court ensures that much less time passes between a suspect being charged and going to court. By challenging criminal behaviour at an early stage, we are much more likely to reduce reoffending rates.

The other key aspect of the youth court is that it ensures that a co-ordinated approach is taken by the courts, the police and social services, and that community and restorative disposals are used where appropriate.

The lessons that have been learned in the youth courts in Lanarkshire could and should be translated to courts throughout Scotland. Those lessons include the need for a co-ordinated interagency approach to criminal justice work and the benefits of a flexible and responsive system. Above all, we must remain open to any initiatives that can help in the battle to reduce reoffending. That is, of course, the central theme of the criminal justice plan.

I congratulate the Executive on the steps that it has taken to make our communities safer and to create a criminal justice system that is fit for the 21st century. I hope that we can all welcome the initiatives to protect vulnerable witnesses and to support witnesses and victims. I hope that we can continue to work together to develop legislation that responds to the concerns of ordinary people in our communities. That is what the Executive has attempted to do so far. I believe that we have made a good start. We will continue to meet the challenges that lie ahead.

10:27

Patrick Harvie (Glasgow) (Green): Like Karen Whitefield, I apologise for being a touch late and missing some of the minister's speech. In my case, that was due to a slight technical difficulty with my colleagues, but I will move on.

The Scottish National Party began its contribution to the debate by saying, legitimately, that it wanted to see the glass half full rather than half empty. I have tended to begin my speeches in justice debates by praising the Executive's good intentions but lamenting the gap between aspirations and reality. I regret to say that, on the

issue of rising prison populations, the question of half full or half empty does not arise. Year after year, we hear members—not only ministers, but Opposition politicians—agree that we lock up too many people who do not need to be in prison, yet the number of people in prison continues to rise.

Like Jeremy Purvis, I feel that short-term sentences, in particular, are increasingly difficult to justify. Can we justify them on grounds of protection? If society needs to be protected from someone because they pose a genuine threat, is a short-term sentence of any use? Is it a real deterrent? Many people on all sides would probably question that. A short-term sentence is not sufficient to enable time to be spent on doing anything meaningful to challenge or change behaviour or on rehabilitation work. Punishment alone is valueless when those three objectives are not achieved. We should look to another option if a particular form of punishment does not achieve those objectives.

Margaret Mitchell: Does the member accept the findings of the recent Justice 1 Committee report, which considered short-term sentences and discovered that they provide an opportunity for meaningful rehabilitation work to be undertaken and for literacy and numeracy problems to be identified? That could help the offender when they are released from prison. Rather than being meaningless, the time that is spent in prison is crucial.

Patrick Harvie: The period of the sentence may be sufficient to enable identification of some problems. However, I have seen the report and spoken to people who work in the prison system and, on balance, I believe that the opportunities for rehabilitation are not being realised.

I welcome the report in *The Herald* today about the idea of splitting sentences between prison and community work. If that proposal is a stepping stone that will act as a way of increasing the uptake of community sentences, I welcome it.

Recently, I attended a seminar that was organised by the Glasgow centre for the study of violence. Annabel Goldie, who has left the chamber, was also there and both of us felt that the seminar was very interesting. The co-director of the centre stated in a recent speech:

"I am concerned that criminal justice is becoming too much a surrogate for effective social policy and that, as a consequence, the shortcomings of ... government are being visited on already multiply disadvantaged people in the form of punishment."

The essential message of the seminar was that if we look at the geography of punishment—not where offences are committed, but where the people come from who are imprisoned—we see that very small areas receive vast amounts of

money in the form of spending on imprisonment, on which huge amounts of Government money are spent. Those small areas, however, are also the recipients of disproportionately large amounts of money on other services, including benefits, free school meals and social work case loads. Vast amounts of money are poured into those areas, but no strategic view is formed of how the money affects the area. In fact, although each service may act rationally on its own terms, some of the services may work against the overall objectives of others. In the long run, perhaps we must consider whether, in effect, we have a policy of removals and return: X number of young men are taken out of and put back into the same communities. That has a negative impact in the long run.

Bill Butler said that sentencing must never compromise public safety. He is right, of course, but at some point we must ask whether prison compromises public safety. Again, I quote the co-director of the Glasgow centre for the study of violence, who states:

"it is misleading to suggest that by placing someone in prison, you are protecting the public in the long run. You are harming the individual and you are lowering the probability of their surviving legitimately in the community."

John Swinney said that he wants to see offenders' behaviour being challenged effectively. I was pleased that he ended his speech with that sentiment, because it would be far too easy simply to call for longer sentences. I hope that he agrees that if the first 18-month sentence had been served in full, the offender that he mentioned may have been no less likely to go out and commit another offence simply because they had served more time in prison. As John Swinney said, we must ensure that the sentences that we hand out challenge behaviour effectively.

Mr Swinney: That is my point. We all see individuals who are no more rehabilitated when they come out of prison than they were when they went in. That is the challenge—it is their conduct that must be challenged. Unless we do that, I suspect that the circumstances that I outlined will, regrettably, become ever more commonplace.

Patrick Harvie: We are singing from the same hymn sheet.

I praise the Executive's decision to fund the Miscarriages of Justice Organisation, which the minister mentioned. Can we also try to reduce the worst aspects of the impact of miscarriage of justice on its victims? I have spoken to some victims of miscarriage of justice and to senior representatives of the SPS. One of the issues that they told me about, from their different perspectives, is that prisoners who assert their innocence are—or feel that they are—less able to access support and education services; they may even feel that they are being punished for doing

so. Of course, not all those who claim that they are innocent are innocent, but surely the system must acknowledge that a few of them are.

I would like to comment on and agree with much that was in Jeremy Purvis's speech, but I do not have time to do so.

10:34

Pauline McNeill (Glasgow Kelvin) (Lab): I welcome the opportunity to speak on the first anniversary of the criminal justice plan. There can be no doubt that steady and real progress has been made towards tackling crime through radical reform, concentration of resources and imaginative ideas. Work has been done to join up parts of the system and to make them work more closely together. There has always been a great deal of consensus in the chamber about the areas of the system that require reform, but I am sure that there will continue to be disagreement and debate.

There is consensus among the parties about the action that needs to be taken on women's offending. Most of us agree that too many women are in custody, which does little to advance their lives. We need alternatives to prison in the community, and we need to make faster progress. I commend the Executive for taking the bold step of setting up the time-out centre in my constituency at 218 Bath Street. I expressed concern recently that the centre was not dealing with the women whom it was designed to serve—women who otherwise would have received a custodial sentence. I am pleased to report that that situation has changed as a result of the hard work of the team at 218 working closely with Glasgow sheriffs and showing them that there are alternatives to prison that can make a significant difference. The service is making a difference to the lives of women who have become offenders because of their drug dependency. That is where the hard work lies.

I had the good fortune to examine the case studies of some women at the time-out centre. Obviously, the women will remain anonymous, but I draw to members' attention a case that is not untypical. A woman who was addicted to heroin, cocaine and Valium developed mental health problems and became an offender because of her drug addiction. She was referred to the time-out centre, where she was assessed and received medical treatment. She has a community addiction worker and is now on methadone to take her off her drug habit. For the first time, she is complying with her bail conditions. She is beginning to put her life back together and is maintaining her tenancy. For women offenders, such steps are small but significant. It is important to recognise

that hard work and dedicated resources can turn the problem round.

I hope that Trish Godman, who was presiding at the time, will forgive me for getting to my feet when Kenny MacAskill talked about rendition flights, but I was incensed by his suggestion that members in other parties do not condemn torture and do not support the convention on it. The Lord Advocate made it clear in the chamber last week that it is for him, not the Scottish Government, to act when he suspects that crimes are being committed on Scottish soil. If the Lord Advocate has such suspicions, I urge him to act on them. I am not alone in saying that. I commend Menzies Campbell MP for the work that he is doing on rendition flights.

Mr MacAskill: Will the member give way?

Pauline McNeill: Kenny MacAskill did not take an intervention from me, but I will be gracious and let him in.

Mr MacAskill: I am happy to accept that Ms McNeill is sincere in her opposition, as are others. However, there comes a time when it is the job of the Government, not just the law officers, to say that some things are unacceptable. I fully accept her sincerity, but does she agree that, ultimately, the Executive must make it clear to the UK Government that rendition flights are unacceptable and that the police will act on its behalf?

The Deputy Presiding Officer (Murray Tosh): I will compensate for the length of that intervention.

Pauline McNeill: I am obliged, Presiding Officer.

Mr MacAskill suggests that it is the job of the Government to inquire into crimes of torture. A distinction must be drawn. I am sure that if Cathy Jamieson got to her feet, she would say the same as me: she would condemn the suggestion that Scotland would be complicit in any way in flights landing on Scottish soil to assist in the torture of individuals. I am sure that that would be the case, although I am sure that the minister will speak for herself.

Another aspect of the criminal justice plan is the Bonomy reforms. It is difficult to get witnesses and victims to speak up in Scottish courts, because they are frightened, they do not know what to expect, and they have to give up their free time and put themselves on the line. When they have spoken up in the past, witnesses have encountered constant adjournments, which have required them to hang around courts where the facilities are not welcoming. That is why the Bonomy reforms are crucial to the reform of our criminal justice system. Preliminary hearings force the prosecution and defence to prepare their cases and agree points where they can. The hard

work of the judge, the prosecution and the defence ensures that witnesses are not needed at that point in the trial. That is a key effect of the reforms. The reforms also require judges to consider discounts in sentencing, resulting in a large number of early pleas, which means that witnesses are not required.

That is not to say that our work is finished, because there are outstanding issues. It is important that the general public understand how sentencing works. Honesty in sentencing is the key, because through that the general public will have more confidence. I commend the work of the Sentencing Commission for Scotland. Having experts examine the problem of sentencing, starting with the work that is required on bail and supervision, is a good idea. As I have said in the chamber before, if someone breaches their bail conditions it should be one strike and they are out. We should be tougher.

We need to examine the work in the lower courts, because that is where most people are dealt with. I look forward to the work that will be done in the Parliament on reforming district and sheriff courts. I hope that next year we will turn our attention once again to making more progress on alternatives to custody, modernising our court system, building modern prisons with humane conditions and further reducing crime.

10:41

Alex Neil (Central Scotland) (SNP): I will concentrate on the criminal justice plan but, before I do, I will talk about rendition flights. Everyone in all parties condemns torture and any suggestion that this country would be used for rendition flights. Indeed, a Westminster cross-party group on rendition flights is chaired by a Tory, which emphasises the cross-party approach to the matter. However, the practical issue arises of what we can and should do. Kenny MacAskill made a sensible, practical suggestion, based on the historic precedent that was set by the New Zealand Government. We should say to planes that come to Scotland that if they want permission to land at our airports, they must confirm or deny that they are on a rendition flight with someone on board who is en route to a country where they could be tortured. That is a perfectly sensible and practical way forward. I hope that it will be taken up by the Executive and the Government and pursued accordingly.

I turn my attention to criminal justice issues. It is not often that I speak in criminal justice debates; I tend to confine myself to matters economic. However, there is widespread concern in the community about our criminal justice system. Despite all the legislation that has been passed in this place and in the House of Commons,

confidence in the criminal justice system is decreasing out there on the street. Indeed, confidence in a number of the institutions on which we rely to deliver the criminal justice system is decreasing. I will mention a number of those institutions and I will do so proportionately and in context.

First, I will talk about the police. As someone who is married to a former police officer, I have the greatest respect for, and totally support, the police force—I have to. However, when my son was the victim of a serious assault in Ayr last boxing day, I was taken aback by how poor the police response was to that incident. I deliberately did not highlight the fact that his father was an MSP or use my position in any way, but eventually the poor level of service, the lack of interest, the lack of response and the broken promises about being contacted were such that I was forced to write to the chief constable to complain. Of course, the minute I wrote to the chief constable, I had five different senior officers from Ayrshire on the phone to me, but it was far too late by then, because the damage had been done.

I was struck not just by the poor service that we received from the police on that occasion but by the low level of police morale, not just in that part of Ayrshire. I believe that that is affecting the effectiveness of the police service. The decrease in police morale is primarily due to two factors. The first of those is the daft sentencing that is sometimes handed down by the courts. John Swinney mentioned a good example of that earlier. It must be demoralising for our police officers to chase the criminals, catch them and get them convicted only for them to be given light sentences for relatively serious crimes. We have a major problem with the judiciary, which has to be sorted out, without undermining its political independence.

Secondly, I was struck by the follow-up, in particular by the time taken to get criminal injuries compensation, which is beyond belief. My son received an offer, but I advised him to turn it down. I had heard through the grapevine that the Criminal Injuries Compensation Authority deliberately undervalues the amount in the first offer. I told my son to appeal and to appeal again. Within two or three days, the initial offer was doubled. I wonder how many genuine cases there are of people who have been desperate for the money and have accepted the initial offer, although they could have done with the extra money that would have been on offer had they gone through the appeal system. I have dealt with one or two such cases as an MSP, despite the fact that the authority for such matters is reserved.

The Deputy Presiding Officer: You have one minute left.

Alex Neil: There is a real problem there.

There is also a problem with the Scottish Prison Service and the attitude of its chief executive. Every time a member asks the minister a question about the Scottish Prison Service, the minister never replies, other than—

Cathy Jamieson: Will the member take an intervention on that point?

Alex Neil: I am sorry—I am in my last minute, unfortunately. The minister never replies, other than to say that she will refer the matter to the chief executive of the Scottish Prison Service. I find that totally unacceptable, as I know do other members. The minister is directly responsible to the Parliament for the Prison Service and she should answer to members of the Parliament for the Prison Service and its many failings.

10:48

Colin Fox (Lothians) (SSP): This has been a wide-ranging debate and I must confess that I am tempted to speak about a couple of matters that have come up in the course of it, in particular the extraordinary rendition flights and the work of the Scottish Criminal Cases Review Commission. The Parliament would be better served by holding separate debates on those matters, although I put on record that I welcome the minister's announcement of support for the Miscarriages of Justice Organisation Scotland.

Having listened to the minister's speech and reread the criminal justice plan, as I did yesterday, I endorse what the minister has said about the efforts of those who work in the criminal justice service. In her foreword to the plan, the minister wrote:

"I have been privileged to meet some of the thousands of dedicated people who work hard every day throughout Scotland's criminal justice services, often in very demanding settings."

I am sure that any member who is especially involved in justice matters in the Parliament—unlike Alex Neil—will concur with that sentiment. I have visited about half a dozen prisons in the last year; I have been taken round the premises of the Crown Office and Procurator Fiscal Service in Edinburgh; I have sat in seminars with criminal justice social workers; I have met an abundance of children's panel members, who never fail to impress me with their exemplary attitude and who give so generously of their time and experience; and I have been guided by police officers along Lothian Road late on a Friday night—examining the licensing laws, rather than pursuing any recreational activity. The Scottish criminal justice system is fortunate to have many dedicated professionals, who are all trying their best to make

progress and to make a difference. Sometimes, they do not get the recognition that they deserve.

Undoubtedly, there are some thorny issues confronting the criminal justice system, some of which have been highlighted in the debate. For me, none is more thorny than the pattern of repeat offending and the cycle of despair that the criminal justice plan discusses. I believe that the Scottish Executive is genuine in its desire to address that and to make meaningful improvements. I welcome that. The Executive has been inclusive in welcoming contributions from across the political spectrum in the Parliament and in seeking solutions that will work. The question that confronts us in the debate, once again, is why we are making no headway in diverting so many of our young men—it is young men especially who are involved—from offending behaviour and in channelling them towards a law-abiding life, respecting themselves, first of all, and respecting others.

Part of the reason why we are making so little headway is the intractable nature of the problem. We must first appreciate who it is that we are trying to impress and whose ways we are trying to change: it is young men, in the main, from the poorest and most socially deprived backgrounds in Scotland. When we talk about fairness, both in the debate and in the justice plan, we must acknowledge that we are not starting with a clean piece of paper. We must acknowledge the need to be fairer to some than to others, in that some people have had a lower share of the fairness that has so far been distributed. They have had a poor schooling and poor employment chances. They have been failed by various authorities for a long time. They have had poorer physical health and, often, poorer mental health. They have had society's sneering attitude towards them to contend with. Most of those young men act like outsiders because they feel like outsiders and we in society have got to find a place for them.

The criminal justice plan readily admits:

"Crime and disadvantage are linked."

Frankly, I think that the plan would have no credibility if it did not say that. If we spend two minutes in any courtroom or prison in the country, what hits us right away is the backgrounds of so many of the people we come in contact with.

I am not defending what those young men do, in the main, neither am I saying that what they often do is not heinous, or that their victims do not deserve our support, sympathy and, above all, justice, but it is worth pointing out that many of the victims are themselves young men. That is the nature of the culture. I refuse to ignore the realities, to condemn them or to wash my hands of them.

My experience at Low Moss prison this year was salutary. The governor asked me what we politicians expect, sending young men back to prisons such as Low Moss time and again, to squalid and dehumanising prisons, where very little comes of their sentence, and then releasing them back into the very circumstances that they came from, in Possil, Pilton, Ferguslie Park and elsewhere. "What do you expect?" he asked. That question confronts us.

I will touch now on the question of drugs and addiction. It is not long since the sad death of George Best, following his highly publicised defeat at the hands of alcohol addiction. That example of a man defeated by alcohol brings to light how difficult it can be to fight those demons. It is clear to me that putting people in prison to deal with alcohol or drug addictions is entirely the wrong approach. Our prisons are full of people who should not be there and it is entirely inappropriate for society to expect the Scottish Prison Service to deal with them. We need to move on to address that question.

I concur with the points that Bill Butler made about knife crime. That is another intractable problem, which time does not allow me to explore. It is an appalling blight on Scottish society. I welcome an examination of what we can do about it. I am not greatly confident that doubling sentences and banning knives will change behaviour. We must remember that knives are carried in an underground context. I agree with Bill Butler, Tommy Sheridan and others who suggest that the answer will come through getting inside the minds of the young men who carry the knives, explaining the issues to them and undermining the attraction of carrying a blade, emphasising that it is not big and is not the right way to sort out disagreements. I think that the best way to do that is to use peer pressure and the people whom young men look up to so that they consider that they are small by carrying knives and are dissuaded from doing so. It is a matter of influencing them through their role models and peers.

10:55

Alex Johnstone (North East Scotland) (Con):

I am not usually part of the community in the Parliament that chooses to become involved in justice debates. However, we have seen some new faces today—Alex Neil being one of them—and there is a lot to be said for taking a fresh look, which I hope I will be able to do. My experience is that although an awful lot of people in the community are largely untouched by justice issues, there is a fear building among them that those issues are not being addressed properly and, consequently, the fear of crime is greater

than the possibility of being touched by it directly. That is one of the reasons why we have to address the points raised by the uninitiated.

Members will not be surprised that the first issue I will raise is what is happening because of automatic early release. As a member of the Parliament, I have visited my local prison, Aberdeen, many times over the past six or seven years. In that time amazing steps forward have been taken. The inmates were not quite sewing mail bags the first time I visited, but I saw someone making a fishing net in one part of the prison. During my most recent visit, I saw that that part of the prison has now been completely redeveloped, so the prison can begin to work on some of the problems associated with drink and drug abuse and, in particular, can assist people to get back into work.

The problem is that, too often, people go into Aberdeen prison, begin the programmes and are then released under the automatic early-release scheme. Not having completed the programme successfully, they find themselves back in prison in three or six months' time for committing a similar crime to the one that they committed previously. Members have raised concerns about that already, but I draw slightly different conclusions. First, quite often, early release is of no benefit to the individual concerned, particularly if they have been involved in a programme that might have dealt them serious advantages had they been able to complete it, which is not always possible.

As Kenny MacAskill said, 77 per cent of prison admissions are drink or drug associated. My experience of visiting Aberdeen prison does nothing to indicate anything different. If we are to use custodial sentences, we have to ensure that more of them are served in order to give people a genuine opportunity and achieve all the aims of imprisonment.

Cathy Jamieson: Does the member accept that rather than simply having people spend longer in prison without dealing adequately with their transition back into the community, we have to ensure that they are able to deal with their addiction and other problems back in the community? That is the key to trying to ensure that people do not reoffend.

Alex Johnstone: Indeed I agree. However, we have to remember cases such as the one that John Swinney highlighted. My researchers looked through a list of high-profile crimes committed in the past two years and found 10 cases of major assaults or murders that were known at the time to be associated with individuals who had been released under the automatic early-release programme. We have to take such cases into account, because they raise public fears.

The Conservatives have argued consistently for greater police visibility on our streets. The minister has told us time and again that police numbers are going up. We accept that, because the statistics prove it. However, the problem that we have to deal with is the fear that is instilled in individuals.

Another activity in which I have engaged as a member of the Parliament—I know that many colleagues have done the same—is to go out on a weekend evening with a police officer to observe what is going on. I remember being out with a police officer at the shops and the late-night off-licence in Westhill, which is in effect a well-off suburb of Aberdeen. I saw kids of about 12 to 14, or perhaps 16, hanging around outside the shops. They were doing nothing that I felt intimidated by—indeed I took the opportunity to speak to them—but the people who were using the shops felt intimidated. Although there was no justification for the police taking direct action, the fact that there was contempt for the police when they showed up in the area was an example of how difficult it is for the police to have the effect that we want them to have.

I suggest that part of the reason why we see apparent misbehaviour and petty crime is that, too often, young people behave in that way simply because they do not believe that they will be seen or caught, because there are simply not enough police officers on our streets to see them.

Although there is a community in the Parliament that deals with the intricacies and minutiae of justice policy, we must remember that, among ordinary people, there is genuine fear. That fear is perhaps uninformed, but we must be prepared to deal with it and its causes.

11:01

Mrs Mary Mulligan (Linlithgow) (Lab): I am grateful for the opportunity to speak in the debate. It is important that, a year on from the launch of the criminal justice plan, we take time to consider the progress that has been made and commit to further improvements.

To follow on from a topic that Alex Johnstone and others have discussed, it is the case that few people will be involved in serious crime but, unfortunately, a significant number might be affected by low-level crime. Too often, the perception is that many of us are vulnerable to serious crime. That perception needs to be addressed, because we need to give individuals and communities confidence in the justice system. By showing them what is happening to make the justice system more effective in reducing crime and dealing with the perpetrators of crime, we can re-establish individual and community confidence.

The minister talked about building respect. Re-establishing confidence runs alongside that. She also talked about the record numbers of police and the more efficient use of their time, which is important. It will help to reassure communities that we are responding.

In my constituency of Linlithgow in West Lothian, the use of dedicated community cops is one way in which the relationship between the police and the community is being re-established. Only last week I was told, yet again, how important that relationship is in assisting the police to detect crime. Without the public's information, the police's job would be much harder. Respect, confidence and partnership are central to making the criminal justice system more responsive and more effective.

I will go on to talk about changes to the criminal justice system that have helped victims and witnesses but, before I leave the subject of communities, I must comment on the implementation of the Antisocial Behaviour etc (Scotland) Act 2004, which I am sure members will understand is close to my heart. As I said earlier, too many people are at risk of low-level crime and the kind of antisocial behaviour that, over time, can destroy the quality of life for individuals and communities.

Having spoken to my colleague Bristow Muldoon, who is MSP for Livingston, I am sure that he will not mind my referring, as Kenny MacAskill did, to the imposition of a dispersal order in his constituency, covering the whole village of Mid Calder. As a fellow member for West Lothian, I work with the police, councillors and officials who have sought the order. They are reasonable people who are responding to a community of people who felt that their lives were being restricted by youths from other areas appearing in Mid Calder looking for trouble. The police were concerned about incidents of assault, vandalism and intimidation and will now have the right, through the dispersal order, to disperse groups of two or more people hanging around between key hours.

I know that, when we discussed the Antisocial Behaviour etc (Scotland) Bill, there were people who had reservations about including dispersal powers in the bill. However, the comments of the superintendent who is overseeing the dispersal order should reassure them that those who supported the inclusion of those powers were right to do so. He clearly said that the dispersal order was not about preventing people, including the young people, from going about their everyday business in the village, but that the power would be available to the police to use if people behaved unlawfully. Such comments confirm my view that we should trust the police to use the law

appropriately. The people of Mid Calder have welcomed the fact that the police have that power.

I want to talk about the improvement of the experience of victims and witnesses in our criminal justice system. The minister mentioned the reduction in the number of people having to appear as witnesses due to court reform. There is no doubt that, for some witnesses, the prospect of giving evidence in a court can make upsetting circumstances even more traumatic, preventing them from giving their evidence effectively and undermining justice.

The needs of victims and witnesses have been recognised, particularly in the Scottish strategy for victims, which was a recognition of the importance of victims and the need to give them practical and emotional support and provide them with an explanation of the criminal justice system and information on the progress of their case. Victims are interested in their case and should have a voice at all stages of the process. The strategy has been followed by legislation. All the associated initiatives show action that will give victims and witnesses practical and emotional support and access to the relevant information that they seek.

One area that is challenging relates to sexual offences, victims of which are still reluctant to come forward. I urge the minister to continue to do all that she can, in partnership with the police and the courts, to address the way in which such crimes are processed so that more victims can be encouraged to come forward.

I am clear that we all want to live in a safer Scotland, free from the fear of crime. Much has been done to realise that aspiration. I commend the people who work in the police force, the courts and our prisons for the way in which they are rising to that challenge. In particular, I commend the ministers, Cathy Jamieson and Hugh Henry, on their energy and determination to have a criminal justice system that is fit for the 21st century. We have listened to people and communities and we have acted. However, as the minister said, there are no quick fixes and there is still much to do.

11:07

Mike Pringle (Edinburgh South) (LD): It is right that, on the first anniversary of the criminal justice plan, we should consider what progress has been made. The plan covers many different topics but, rightly, focuses on reducing reoffending. It is a national disgrace that, over the past 30 years and through successive Governments, we have got to a state in which 70 per cent of people in prison have had a previous custodial sentence. The criminal justice plan rightly puts the need to

address that shocking statistic at the heart of the Executive's legislative programme for this session.

One year ago, I was glad to hear the minister say:

"I am clear that locking up offenders for short periods of time, and releasing them back into the community without action to address their behaviour, is not the answer."

Creating a safer Scotland cannot be done solely by strong, visible front-line policing or through the deterrent of prison.

The minister, Kenny MacAskill, Colin Fox and others have referred to knife crime. Bill Butler talked about knife crime in the west of Scotland, but I have to say that there is a considerable difference between the west of Scotland and my experience in the east of Scotland.

There is a lot of ignorance about the type of knives that can be carried. Recently, I arranged for a group of young male students to visit the Parliament. Sadly, one of them had a knife in his bag, which was searched when he came to the debating chamber. The knife had a 6in-long blade—as sharp as a razor—and a saw at the other end. Both blades were absolutely lethal. When the parliamentary police asked for the knife, he said, "What is wrong with my penknife?" They said that it was not a penknife and took it from him. Later, he contacted me and asked me to recover the penknife. However, when I spoke to the police, they told me that it was a good job that he was visiting the Parliament when the knife was found because, if they had stopped him on the street and found it, he would have been arrested, put in prison overnight and charged the following day with carrying an offensive weapon.

I give that example to demonstrate that people are ignorant about the carrying of knives, which is extremely dangerous. We need to do more to send out that message. Colin Fox mentioned the fact that knife carrying is something that happens in young male culture. I agree with him on that point. We need to get the message across to young men that they cannot afford to carry such knives.

Patrick Harvie: I am a little confused. Is Mike Pringle saying that the young man in question should have been arrested, charged and detained overnight? Surely he is not suggesting that more visits to Parliament are the solution to the problem.

Mike Pringle: I am definitely not saying that. In that particular instance, the police used their discretion, which is what they should do on all such occasions. I am illustrating that there is ignorance among people about the sort of knives that may be carried. The 129 MSPs in this Parliament, the police and all the other agencies have to put across the message that carrying such weapons is not acceptable.

What we have achieved over the past year has set us on our way to reducing reoffending. The Management of Offenders etc (Scotland) Bill will establish a home detention curfew scheme for low-risk prisoners. Many members have talked about either keeping offenders in prison or keeping them out of prison. I suggest that we should do as much as possible to keep some of the young men—the people in question usually are young men—about whom we are talking out of prison. One thing is for certain: if we can keep someone out of prison, we are doing them a big favour, because there is no doubt that prison teaches people how to become better criminals.

New arrangements are being put in place to manage the risk from sex offenders, and community justice authorities have been set up to deal with the situation locally to ensure that there is cross-working between local authorities.

In her speech today, the minister said that a year is a long time for people who suffer from antisocial behaviour. Kenny MacAskill illustrated a serious problem in Mid Calder. Of course, as he suggested, solving the problem in Mid Calder might simply move the problem outside that area.

I am not sure why but, this year, there seems to have been an escalation in antisocial behaviour in certain parts of my constituency. Like others, I have said this before but I will say it again: the young people who are involved in antisocial behaviour are an extremely small minority. Most young people in our communities are well behaved and are contributing greatly. However, we have to address those who cause problems. In my constituency, the police have set up a special unit between now and Christmas to try to get the problem under control. I can give an example of the problem in the area. The wife of someone who works in the Parliament went to Gracemount leisure centre to collect her young daughters, but hastily got back into her car when a group of about 15 or 16 people—most of whom were under 16—started stoning the car.

The Deputy Presiding Officer: One minute.

Mike Pringle: The first anniversary of the plan should be about looking forward rather than back. In this session, the proposed sentencing bill will, I hope, introduce a new regime for the release and supervision of offenders.

Jeremy Purvis, Patrick Harvie and others talked about prison sentences and the fact that 21 per cent of those in prison serve sentences of fewer than 60 days. Large numbers of women are in Cornton Vale prison for fine default. Pauline McNeill mentioned a group in her constituency that deals with women and offending. That sounds like a good example that could be rolled out elsewhere.

Another key problem in the system is the role that drugs play. The Liberal Democrats welcome the 23 per cent extra funding for rehabilitation and drug testing and treatment orders in the period up to 2007, but we need to ensure that each person gets the help that they need.

The Police, Public Order and Criminal Justice (Scotland) Bill will introduce mandatory drug testing and referral for those who are arrested for drug-related offences. What we do not need is the knee-jerk reaction of the Tories, who play their zero tolerance approach in Scotland while their new leader supports the downgrading of cannabis.

11:15

Margaret Mitchell (Central Scotland) (Con): This has been an interesting debate. Mr Purvis made by far the most memorable comment when he asked members to believe that, as a Liberal Democrat, he is not soft on crime.

Despite the upbeat comments from the Minister for Justice, the sad truth is that, one year on from the publication of the criminal justice plan, it has been tested and found wanting. The potential shortcomings and problems with each of its five chapters were highlighted a year ago, but they have not been addressed.

Chapter 1 of the plan is on protecting communities and preventing crime. Although the minister confirmed that there has been additional funding and an increase of 434 police officers in Scotland, the pressure and the expanded workload that result from, for example, the application of the European convention on human rights, the Macpherson report and the threat of terrorism mean that there are still only 145 police officers on our streets at any time. That is a worrying and totally unacceptable situation, which the Executive has failed to rectify.

Cathy Jamieson: I understand the difficulties and pressures that the police face, but it is simply not good enough for the Conservatives to continue to use figures that are not accurate. We know that the figure that Margaret Mitchell gave is a crude misinterpretation of figures that were given in a report by Her Majesty's inspectorate of constabulary for Scotland in March 2002. Those figures ignore police who are on patrol in cars and intelligence officers who direct operations. The report also made it clear that some 30 per cent of police officers were operational in divisions and in uniform in the previous 24 hours. A recent—*[Interruption.]* I am sorry, Presiding Officer, I realise that I am perhaps making a speech. I have a couple of other points that I wish to make, but perhaps the deputy minister can make them when he sums up.

The Deputy Presiding Officer: Indeed. That would be helpful. I will compensate Mrs Mitchell for the time taken.

Margaret Mitchell: The minister's long-winded explanation simply confirms that there are not enough police on our streets at any given time. That is all that she has told us today.

It is little wonder that, in the west of Scotland and elsewhere, knife crime has reached epidemic proportions. The much-heralded intention to get to grips with the problem, which has correctly been described as a cancer in society, has been watered down. We are one year on, but the five-point action plan has still not been fully implemented and, in reality, the tough new four-year maximum sentence for possession has become a two-year sentence because the Executive—aided and abetted, it has to be said, by the other main parties in the Parliament—has refused on four separate occasions to end automatic early release.

Furthermore, even though there have been 11 publications on alcohol misuse in Scotland since the criminal justice plan was published, the Executive still does not have a comprehensive alcohol strategy in place.

Chapter 2 of the criminal justice plan is on tackling drugs in our communities, but I am afraid that progress in that area is no more encouraging. The First Minister admits that we have no idea how many rehabilitation places there are in Scotland, yet the criminal justice plan states that the Executive will

"Implement the comprehensive range of actions within the Drug Treatment and Rehabilitation Review."

Worse still, we know that the number of methadone scripts have reached an all-time high.

Jeremy Purvis: Will the member take an intervention on that point?

Margaret Mitchell: If the member does not mind, I will press on. *[Interruption.]* I will not take an intervention from Mr Purvis.

Surely we should give long-overdue priority to moving the estimated 19,000 drug addicts who are parked on methadone away from their dependence on methadone, via the harm reduction programme, to rehabilitation programmes that are designed to achieve total abstinence. Quite simply, every pound of the £11 million that is spent on methadone beyond the legitimate and necessary six-month stabilisation period is a pound that could and should have been spent on rehabilitation programmes and places.

Jeremy Purvis: Will the member take an intervention?

Margaret Mitchell: I have said that I will not take an intervention.

I turn to the final three chapters of the criminal justice plan. Chapter 3 is on the reform of Scotland's courts. It may be too soon properly to judge whether the Bonomy reforms are delivering more efficient, faster and more visible justice but, as Pauline McNeill pointed out, the early indications are encouraging. However, the progress of some aspects of the Vulnerable Witnesses (Scotland) Act 2004 is less clear. It is worrying and frankly unacceptable that it was only after the act was passed that it was discovered that special measures involving a commissioner taking evidence from certain witnesses might not be covered by the special protections that are provided for under the Criminal Procedure (Scotland) Act 1995. We must ask why that was not pointed out during the passage of the 2004 act.

Chapter 4 is on effective interventions and sentences that fit the crime. I do not agree with Bill Butler. I find it difficult to understand how prioritisation of the introduction of home detention curfews will do anything to aid early intervention or to ensure that the sentence that is dished out fits the crime. In fact, the reverse is almost certain to be the outcome of this ill-conceived measure, which, rather than aiding early intervention to cut crime, detracts from the opportunity to deliver effective rehabilitation programmes in prisons and eliminates that opportunity when the individual is confined to home.

Chapter 5 is on the delivery of integrated services for managing offenders. Rather than concentrating on new structures, the Executive's priority should have been to ensure that adequate resources are in place to deliver continuity of service in rehabilitation programmes. That crucial objective will be effectively achieved in Scottish prisons only if contingency plans are put in place to cover staff shortages.

In conclusion, with the 2004-05 statistics showing a record number of crimes and offences in Scotland, and with a crime being committed every 29 seconds, there is no room for complacency.

11:22

Stewart Stevenson (Banff and Buchan) (SNP): I will focus on Scotland's drug abuse problem. At the outset, I emphasise the obvious fact that I do not bring an eight-minute solution. My speech cannot deliver that, just as the minister said in her speech that the plan is very much a work in progress and that, after 12 months, it is far from complete. The most complex problems—which are precisely what we have in the criminal

justice system—cannot be solved by quick fixes, simplistic solutions or political knee-jerk actions.

I welcome the fact that the Solicitor General has done us the courtesy of being with us throughout the debate and listening to what we have said. I know that members who addressed issues about the court system will welcome the fact that the Solicitor General was in the chamber to hear their remarks.

I see that Miss Goldie has, at last, returned and I welcome her back to justice debates and engagement with justice policy. I note that since the beginning of the summer recess she has asked only two questions on criminal justice, compared with 25 questions from her justice spokesperson. My colleague Kenny MacAskill has asked 26 and I have asked 67, so we know where the real action on criminal justice is taking place. Indeed, the minister has answered more than 360 questions on criminal justice during that period. The issue of criminal justice engages people throughout the Parliament—even Tommy Sheridan has asked two questions on it during that period, and his colleague Rosemary Byrne has asked six.

There is much with which we agree in chapter 2 of the criminal justice plan, which was published more than a year ago. There are little chinks of light here and there. Paragraph 2.2 of the plan reported that there were 56,000 injecting heroin users. After a year, that appears to have reduced to 51,000. However, that is perhaps one area in which we seem to have some understanding in a near-vacuum of knowledge in the field. The minister said that the plan was not a 12-month plan and that we should judge the Executive by its actions.

On rebuilding respect and confidence, 84 drugs networks were smashed, which is excellent because it strengthens the Scottish Drug Enforcement Agency. The minister deserves two gold stars; it is exactly the right thing to be doing.

On the Proceeds of Crime Act 2002, it is always welcome to get a penny out of a drug baron's pocket, but I have compared the amount that is being recovered and found that it is less than the fines that have been levied by Aberdeen sheriff court alone, which puts our modest achievements in context. Recovering that money is difficult and more effort is required. More resources for the SDEA will be very welcome and we in the SNP will support that.

In my questions during the past few months, I have asked about a number of issues about which we have a disturbing knowledge vacuum. I will compare and contrast what the Executive says with—it is unusual for me to commend this source—what is coming out of the strategy unit at

10 Downing Street. The strategy unit publishes an annual report of more than 100 pages that explains the situation south of the border and makes some tangential reference to what happens in Scotland.

There is some good news in the answers to my questions. The Executive is, through the Home Office drugs strategy delivery group, working to involve foreign Governments and other organisations to identify ways in which we can reduce the supply of illegal drugs. That is very welcome, difficult, long-term action that illustrates perfectly that drug problems in Scotland do not stand apart from those in the wider world.

Jeremy Purvis: I am sure that the member has seen the HMIC report. Table 12 on page 96 of that report shows the positive effect. In 1996-97, the police recorded 39 offences of illegal importation. In 2004-05, there was one offence.

Stewart Stevenson: Of course that is what the table shows. However, the strategy unit's 2003 estimates show that the annual profits of an importer are, on average, £2.5 million. A distributor will earn £1 million and so it goes on. We can therefore see that there is a very significant problem.

It is estimated that 34 tonnes of heroin and about 30 tonnes of cocaine are brought into the UK annually. According to the strategy unit, seizures in the UK are at around 10 per cent.

Let us consider the profit margins in the drugs sector. Gucci, a hugely high-margin retailer, has a profit margin of 30 per cent. The strategy unit estimates the profit margin of the drugs industry to be at around 58 per cent.

When compared to the strategy unit's information, the information that we have in Scotland is extremely modest. I asked the Scottish Executive whether it had been contacted by people who are willing to conduct research on the drugs trade. When it came down to it, the answer was "Mebbe aye, but we're nae doin' it."

I asked what contacts we had had with the Home Office to determine the size of the UK drug trade. The answer was, "Yes, it has been in touch," but that was about it.

I asked for an estimate of the size of the illegal drugs trade in Scotland, but there are no current plans to compile one. However, the strategy unit south of the border provides precisely such an estimate: it is approximately £16 billion—the range is £12 billion to £20 billion. In such an information vacuum, we are unlikely to raise the issue up the agenda in the way that is required. It must rise up the agenda.

We recognise that about 1,200 youngsters in Scotland are at the root of the antisocial behaviour

on which this Parliament has spent so much time. Sceptical as we in the SNP were, we supported the bill on that subject. However, the reality is that there are 50,000 drug users across Scotland, and they are responsible for three quarters of crime. Let us put the drug problem into context. It is much bigger than the problem of antisocial behaviour and touches every community. The size of the industry makes it comparable to, if slightly smaller than, the size of the tourism industry in Scotland. I hope that, over the coming year, we will see someone really engage with that. I say that in an entirely non-partisan way. We will work with the minister. She knows that I can work with her on subjects in which we have a common interest. Everyone in the chamber and everyone in Scotland has a common interest in this subject and we must work together to remove the problem.

11:31

The Deputy Minister for Justice (Hugh Henry): The debate has been interesting, if strange in some ways. There have been some excellent speeches and some that had very little relevance to the subject that we are discussing this morning. However, most people would agree that it is right to try to set out some kind of strategic framework for how we intend to proceed, to reflect from time to time on what we have done and to look forward to what more needs to be done.

It is also right to put into context what we are trying to achieve. We know that there are social problems in Scotland—they have been discussed in many debates. We know about some of those problems and we acknowledge that low-level antisocial behaviour is a real problem in many communities. We also acknowledge that serious crime is a problem in far too many areas. It is right that we should take a comprehensive approach to that.

It is right that we should look at what our court system is doing and at what we do in our prisons. It is right that we should ask who should be going to prison and what happens when people come out of prison. It is also right to consider the broad issues that are associated with drug taking and misuse. We should not just be tackling criminality, but dealing with the human problems.

It is therefore right that we should take the widest possible look at structures, systems, resources and then policies. That is what we are trying to do in reflecting on the past and looking forward. We are very clear that we want to support the decent people in Scotland who are working hard to protect their families and to bring up their children as decent people in a decent community. We want young people to be able to avoid being

drawn into criminality. We therefore have to make sure that the social structures are available to support people and that the mechanisms exist that can deal with people as and when the need arises.

In a sense, we would argue that it is not a choice between dealing with crime and dealing with the underlying causes of crime; it is a question of doing both. We know that, tragically, notwithstanding some of the statistics and the examples that we have heard this morning, although crime can happen in the most affluent communities in Scotland, the vast proportion of crime and antisocial behaviour weighs heavily on our most disadvantaged communities. Being tough on crime should also mean looking at what we do to improve not just the quality of life of people who live in those communities, but the life chances of those who do not have an opportunity to realise their full potential. The Executive acknowledges that it has a leadership role and that, notwithstanding the fact that there will be some specific areas of disagreement, there is broad support for us.

I will touch on some of the speeches that members gave this morning. There was probably very little with which I could disagree in about three quarters of Kenny MacAskill's speech, which was well constructed. However, I must address two issues that he raised at the end of it. I will not go into a huge amount of detail on the issue of air weapons, although I note that he said that the SNP's view is quite clear. Does it want a ban? Well, I do not think so. Does it want registration? Well, maybe. Does it want licensing? Well, possibly. Yes, it certainly looks as if the SNP's view on the issue is absolutely clear.

Mr MacAskill: Will the minister give way?

Hugh Henry: No, because I have to address other issues that the member will no doubt want to comment on.

Kenny MacAskill then touched on rendition flights. For most of his speech, he concentrated on the criminal justice plan; however, at the very end, he felt that he had to be politically opportunistic and get in a soundbite for the press release or the headlines on a matter that has nothing to do with what we are discussing today. He made a number of very serious allegations, some of which Pauline McNeill has addressed.

It is right that we put on record a number of points. First, the Minister for Justice, the First Minister and the Executive have explicitly stated that we find torture abhorrent and do not support it in any shape or form. If there is evidence that torture has taken place, it should be—and must be—dealt with as soon as possible in the most vigorous manner.

Secondly, the Lord Advocate has explicitly stated that there is no role for Scottish ministers in

dealing with these matters. However, any evidence of criminality should be reported to the police. It is up to them and, in the final analysis, the Lord Advocate to determine whether a serious crime has been committed.

Kenny MacAskill said that he wanted action. However, as I listened to him, it became clear that he did not want action from us, because much of what he talked about related to reserved matters and has nothing to do with the Executive. He was asking purely for words. I suggest that there is a huge amount of posturing in that.

Mr MacAskill: The minister's remarks on air weapons were flippant and, frankly, scandalous. Our position on the matter is quite clear. However, I will not waste any more words on that point.

On rendition flights, I made it clear that a chief constable would need to be brave to investigate such incidents. However, if we are to uphold our values and legal system, we should say to the Americans that, if they do not assure us that American planes are not carrying those people when they come to Scotland, the Executive will fully support chief police officers in carrying out their lawful duty. At the same time, the Executive must tell the UK Government that we find the situation entirely unacceptable and that if American planes come here they will face boarding and investigation.

Hugh Henry: I will make my position and the position of the Executive very clear. Chief constables who act independently will have our full support in continuing to do so. We will not attempt to interfere politically with their operational decision making. If they believe that a crime has been committed, they will have our full support in investigating that crime. It will then be a matter for the prosecuting authorities to take things forward. As Cathy Jamieson has said more than once, if Kenny MacAskill or anyone else has evidence that a crime has been committed, they should bring that evidence forward at the earliest opportunity and the appropriate authorities will deal with it. We are quite clear that, whatever happens, torture has no place in a modern country. The UK Government and others have raised—and I am sure will continue to raise—many of these issues with the US Government.

On the antisocial behaviour issues that Kenny MacAskill and others raised, the Executive's record is well documented. As Mary Mulligan has said, we were right to act on the matter.

I do not have the time to go into any detail on the comments made by Annabel Goldie and the Tories but, frankly, they sounded like a worn old record and had nothing new to contribute to the debate. Cathy Jamieson has made it very clear that the numbers of police on patrol are not what

the Tories have claimed. I should also point out that they seemed to want us to direct chief constables on how they should use the record numbers of police. However, chief constables must exercise their operational independence on the matter. Moreover, the Tories' proposal to have directly elected conveners of police boards is bizarre; in fact, it is nonsense and will never work. It is probably one of the most peculiar of the many peculiar ideas that they have come up with.

I am sorry that I have no time to address some of the other issues that members have raised. We are on track with what we are doing. We have established a proper framework in that respect; however, as Cathy Jamieson has said, although we acknowledge some of our successes, we must admit that there is still much more to do.

Question Time

SCOTTISH EXECUTIVE

General Questions

11:40

Freight Subsidy (Western Isles)

1. Mr Alasdair Morrison (Western Isles) (Lab):

To ask the Scottish Executive whether it will provide an update on progress being made on securing an agreement from the European Commission that would allow Comhairle nan Eilean Siar and Highlands and Islands Enterprise to introduce a subsidy for freight transported on the Sound of Harris and Sound of Barra. (S2O-8398)

The Minister for Transport and Telecommunications (Tavish Scott): The Executive's maritime transport division and its state-aid unit have been offering advice to Western Isles Council on its proposal to provide a freight transport subsidy. The council is currently considering its next steps. There has been no contact with the European Commission, but that is a matter for the council to pursue.

Mr Morrison: Given the important on-going discussions on the development and continuation of our Caledonian MacBrayne ferry services, does the minister consider it to be advisable for the council and HIE to examine the possibility of including the freight subsidy in the current tender document discussions? How can we be assured that, when a scheme is implemented, customers will see an appreciable reduction in the cost of transporting goods between islands and to and from the mainland?

Tavish Scott: First, I acknowledge Alasdair Morrison's role in the matter, work on which began, I believe, a couple of years ago. Reduction of tariffs on the routes across the Sounds of Harris and Barra could be included in the service specification for tendering on the Clyde and Hebrides ferry services. Of course, we are considering such matters in the consultation on the specification of the Clyde and Hebrides routes.

I agree with Mr Morrison's final point. It is essential that affected customers and businesses rather than just the hauliers themselves receive the benefit of any tariff alterations that we make through a contract or in any other way.

Jim Mather (Highlands and Islands) (SNP): I thank the minister for his response and Alasdair Morrison for his proper focus on benefits to customers. To what extent has a case been made

to the Commission on the grounds of underemployment? Surely the EC must take such factors into account. After all, there has been such a marked pattern of migration from the Western Isles that, as Harris Development Limited has reported, the local working-age population is calculated on the basis of the number of people between 16 and 75 who are self-employed or are in employment. Has that issue been raised to make this urgent case even more critical?

Tavish Scott: That aspect of what is a transport issue would be highlighted by the enterprise company and by other appropriate employment and investment organisations in the case that Western Isles Council is putting together. I am sure that the council is considering such issues. Moreover, I have no doubt that, in the council's discussions with the European Commission, the wider its argument the stronger its case will be. After all, for the Commission, it is a specific transport state-aid issue, but it can be widened out in the context of the points that have been raised.

Mr Jamie McGrigor (Highlands and Islands) (Con): Is the minister aware that Western Isles Council has bent over backwards and, indeed, has allocated £75,000 to reduce fares by a third on the CalMac routes on the Sound of Harris and the Sound of Barra? However, CalMac cannot lower those fares, apparently because of Scottish Executive policy. Even the minister's Westminster counterpart, Alistair Darling, has said that he sees no problem with lowering the fares. Will the minister reconsider his position and help the businesses in the Western Isles?

Tavish Scott: The problem with Mr McGrigor is that he reads out a question that he wrote some months ago, but does not listen to the earlier exchanges. He just does not understand the issue. The fact is that we have state-aid rules. He might choose blindly to ignore them, but that option is open neither to the council, as Alasdair Morrison asked about earlier, nor to any Scottish Executive minister. If and when we deal with state-aid issues, which are the council's responsibility in this respect, we will see what we can do in policy terms. However, it is absolutely not the case that, as Mr McGrigor said, the policy of Scottish Executive ministers is to hold things back or to stop them happening.

Commonwealth Games 2014

2. Bill Aitken (Glasgow) (Con): To ask the Scottish Executive what progress has been made with regard to Glasgow's bid for the Commonwealth games in 2014 in respect of the involvement of the private sector. (S2O-8346)

The Minister for Tourism, Culture and Sport (Patricia Ferguson): Support for the bid from all sectors is important. We plan to involve the private

sector in as many aspects of the bid as we can. Glasgow City Council has already held preliminary discussions with Glasgow Chamber of Commerce about how best to maximise the opportunities for business in Scotland. Scottish Enterprise is focused on co-ordinating the benefits to business of Scotland's bid and those of the London Olympics and Paralympics in 2012.

Bill Aitken: I know that the minister shares my enthusiasm for the project, which could have a tremendous impact on Glasgow's economy. However, given that the bidding process will inevitably be highly competitive, will she ensure that the best possible marketing advice is taken in connection with the bid to ensure that we get the result that we all want?

Patricia Ferguson: I am grateful for Mr Aitken's whole-hearted support for the bid. We will obviously take the best advice about every aspect of the work that we do on the bid, including marketing.

Forth Road Bridge Tolls

3. Marilyn Livingstone (Kirkcaldy) (Lab): To ask the Scottish Executive what discussions it has had with the Forth Estuary Transport Authority regarding its recent proposals to increase charging on the Forth road bridge to up to £4 in peak periods. (S2O-8388)

The Minister for Transport and Telecommunications (Tavish Scott): Officials from the Scottish Executive have had discussions with officials from FETA and its advisers on the process that is involved in submitting the proposals.

Marilyn Livingstone: Does the minister agree that implementation of such a policy would have a catastrophic effect on the social and economic well-being of Fife, Dundee and the north of Scotland? Is he concerned that such an important policy proposal was introduced on the casting vote of the chair of FETA's board? In the light of that, will he oppose the proposal, which is totally unacceptable to my community, and review FETA's policy-making process?

Tavish Scott: The issue is a serious one for Marilyn Livingstone and other Fife members of whatever party, and for many Edinburgh members who have concerns about congestion in the city. The FETA board's toll proposals must be considered in the context of the emerging findings on the integrity of the Forth road bridge and the tolled bridges review that is under way. Congestion is a significant issue, so it is important to consider the proposals that have emerged from the FETA board in recent weeks. Should ministers approve the application, further opportunities for comment will be available as work progresses,

including a three-month statutory consultation period, a one-month objection period and a likely inquiry. Considerable opportunities will be available but, at this stage, ministers have not reached a decision on the proposals.

Tricia Marwick (Mid Scotland and Fife) (SNP): I associate myself with Marilyn Livingstone's comments. The minister recognises that the proposals are for a back-door congestion charge and that they have been bludgeoned through on the casting vote of an Edinburgh councillor. Does the minister agree that, before he decides whether to approve the increased toll tax, he should consult, perhaps by referendum, the businesses and commuters that use the bridge? Will he accept that it would be unacceptable to the east of Scotland if the conclusion of the tolled bridges review was to remove tolls from every bridge apart from the Forth and Tay bridges, and he then allowed increased tolls on the Forth bridge?

Tavish Scott: I hope that Tricia Marwick realises that the chair of the FETA board rotates and that, not so long ago, the chair was a member of Fife Council, at which time the board had a different policy on the issue. I make the observation that the situation changes depending on which side of the Firth of Forth the chair comes from. She also fell into the Jamie McGrigor trap of preparing her question before she listened to the answer. I will say it again for her benefit: should ministers approve the application, there will be further opportunities to comment as work progresses, including a three-month statutory consultation period, a one-month objection period and a likely inquiry. I hope that the member accepts that there will be considerable opportunities to comment on the proposals.

Mr Jamie McGrigor (Highlands and Islands) (Con): On a point of order, Presiding Officer. The minister has misled Parliament—I prepared my question this morning.

The Presiding Officer (Mr George Reid): That is clearly not a point for me.

Mr Mark Ruskell (Mid Scotland and Fife) (Green): When the minister is discussing—*[Interruption.]* Hello? Minister?

When the minister is discussing the consultation and the order for the £4 charge, will he ensure that FETA takes seriously the need to invest the revenue from the charge in public transport alternatives, including developing workplace car-sharing schemes for major west Edinburgh employers? Will he join me in welcoming the launch yesterday of the TravelShare website, to encourage multiple-occupancy vehicle use across the Forth?

Tavish Scott: Sorry—I was hoping that we would get another Mr McGrigor question rather than a Mr Ruskell question.

Those are serious issues. I recognise that the proposals are based on FETA's local transport strategy, which has been pulled together in discussions between the relevant local authorities on both sides of the Firth of Forth. That is how progress is being made on those matters. I will consider those further points from Mr Ruskell.

Marlyn Glen (North East Scotland) (Lab): Although I accept the difficulties of congestion in Edinburgh and I hear what the minister is saying about consultation opportunities, I urge him to take into consideration the impact of the proposals for the Forth road bridge on Dundee and the surrounding areas in the north-east.

Tavish Scott: I accept Marlyn Glen's observations about the potential impact of the proposals and I am sure that she and many others will make representations on those matters, both in relation to ministers' decision-making responsibilities and in the on-going consultation that I mentioned earlier.

Mr David Davidson (North East Scotland) (Con): Will the minister assure us that any increases in congestion charges on the Forth road bridge will not be used to fund a new crossing?

Tavish Scott: That is why I gave the earlier answer to Marilyn Livingstone. We must bring together the emerging findings on the existing Forth bridge, the tolled bridges review and FETA's proposals to Scottish ministers in relation to a tolling regime. I hope that Mr Davidson will accept that it is logical to bring those matters together and to consider them in their entirety.

Scottish Criminal Record Office (Staff)

4. Mr Kenneth Macintosh (Eastwood) (Lab): To ask the Scottish Executive what action it is taking to protect and support staff of the Scottish Criminal Record Office fingerprint bureau. (S20-8393)

The Minister for Justice (Cathy Jamieson): Fingerprint bureau staff are employees of joint police boards. Their employers have a duty of care to them and they are protected by the terms and conditions of their employment. Senior managers at the Scottish Criminal Record Office provide support, advice and guidance to all staff.

Mr Macintosh: Is the minister aware of the damage that has been done to the lives and careers of three of my constituents who work for the fingerprint bureau and who were involved in the original identification in the Marion Ross murder trial and subsequent trial for perjury of Shirley McKie? Is she aware that my constituents

have remained silent, as ordered by their employers, and have observed the rules of sub judice throughout that long-running case—seemingly the only groups or individuals to do so—and have suffered as a consequence? Does the minister recognise that if public servants are not allowed to defend their honesty and integrity in the face of aggressive misinformation and inaccuracy, it is her duty to stand up for their interests and to defend the interests of all public servants who work diligently in the service of this country?

Cathy Jamieson: As Mr Macintosh observes, there are rules in relation to matters that may come before the courts, which I and others in Parliament must recognise. What I am able to say about any particular situation is therefore limited. I know that Ken Macintosh and, indeed, Des McNulty have been diligent in taking up issues in that regard, as indeed has the trade union Unison. All I am able to say at this point is that it would not be appropriate for me to disclose details of cases that are currently the subject of discussion between trade unions and employers. However, I am happy to ensure that Mr Macintosh receives appropriate information.

Aberdeen Airport

5. Richard Baker (North East Scotland) (Lab): To ask the Scottish Executive how it will support Aberdeen airport in achieving the goals set out in its new 25-year master plan. (S2O-8374)

The Minister for Transport and Telecommunications (Tavish Scott): The Scottish Executive will work on issues for which it is responsible, with BAA plc Scotland, on the sustainable development of Aberdeen airport.

Richard Baker: Does the minister agree that the Executive should actively support progressing the master plan for Aberdeen airport, as it is crucial to building on its success as Scotland's fastest-growing airport? In particular, what can the Executive do to assist development of improved surface-transport links to the airport, as it is rightly doing in other parts of Scotland?

Tavish Scott: I recognise the growth of Aberdeen airport, which Mr Baker has mentioned. I use the airport frequently and I look forward to the terminal improvements, which will greatly improve the service for passengers.

The Executive's decision to construct the Aberdeen western peripheral route will be of particular importance to the surface links. There are some specific issues concerning the junction that is closest to Aberdeen airport, and discussions are continuing to move matters forward. We also recognise the importance of public transport links between Dyce station and

the airport, and we are addressing that issue with the relevant agencies and Aberdeen City Council.

Brian Adam (Aberdeen North) (SNP): We welcome the announcement this week of new scheduled low-cost flights from Edinburgh to Poland—there are many Polish workers in the north and north-east. What steps will the minister take to encourage more direct scheduled flights from Aberdeen airport to Europe and beyond, similar to those that have been announced from Edinburgh to Poland?

Tavish Scott: Mr Adam makes a fair point about the success of the Executive's route development fund, and I am grateful for his support in that matter. He is correct in saying that additional services from Edinburgh airport have been announced this week. He will also know that six routes from Aberdeen airport currently benefit from route development fund assistance. I strongly hope that that will continue. As Mr Adam knows, we work closely with BAA, through Scottish Enterprise, to encourage that. I take his point about the number of Poles who are working in a variety of businesses in the north-east, including fish processing businesses, and I hope that they will add to the commercial logic of improving international links.

Tartan Day

6. Mr Andrew Welsh (Angus) (SNP): To ask the Scottish Executive what action it has taken to promote tartan day in Europe and in Scotland. (S2O-8333)

The Minister for Tourism, Culture and Sport (Patricia Ferguson): Tartan day is a celebration of Scottish influence and heritage that was originally conceived in Canada and is focused mainly in north America. The Scottish Executive works in partnership with VisitScotland, Scottish Development International and local authorities to make the celebrations a showcase for Scotland.

Mr Welsh: I declare an interest as the convener of the cross-party group on tartan day. I thank and give due credit to the Executive and Parliament for their work in promoting tartan day internationally. Will the minister encourage and assist every Scottish local authority and local partnership to showcase Scottish innovation, quality and creativity at European level and in Scotland? Where the tartan goes, trade and other benefits follow.

Patricia Ferguson: I am aware of Mr Welsh's personal interest in tartan day in Angus and the appropriateness of that, given the situation of Arbroath. The work that is being done by Angus Council is entirely appropriate to its area. If that proves to be a success, we may well find that the interest that has been sparked in other local

authority areas by that work and by the work that Parliament and the Executive have done will spread throughout the rest of the country and, perhaps, further afield. However, we must be careful to focus our attention where it is most needed. At the moment, that remains—for the time being, at least—mainly in north America.

National Qualification Courses

7. Mrs Mary Mulligan (Linlithgow) (Lab): To ask the Scottish Executive whether it will review the operation of national qualification courses. (S2O-8400)

The Minister for Education and Young People (Peter Peacock): “Ambitious, Excellent Schools” explained the need to review the link between standard grade and the national qualifications in order to simplify the structure, widen opportunities and improve progression. Individual national qualifications are kept under regular review.

Mrs Mulligan: The issue was brought to my attention by people who work in further education, in relation to employers’ lack of understanding of NQs and, hence, students’ lack of confidence in those qualifications’ worth. That is especially worrying because the courses include subjects such as engineering and construction skills. I am aware that £500,000 has been set aside to enable the issue to be examined. Does the minister think that is sufficient to enable a serious view to be taken on whether the changes need to be made?

Peter Peacock: One of the interesting things to arise from the current review of the curriculum in schools is a debate about how well national qualifications are understood by employers and students. That also has implications for how schools relate to further education and qualifications, especially in the areas that Mary Mulligan is talking about. A debate on, and consideration of, how we might improve that situation will take place over the coming months. I have no reason to believe that the sums of money that are involved are inadequate, but I am happy to speak further to Mary Mulligan about that.

First Minister’s Question Time

12:00

Prime Minister (Meetings)

1. Nicola Sturgeon (Glasgow) (SNP): To ask the First Minister when he will next meet the Prime Minister and what issues they will discuss. (S2F-1979)

The First Minister (Mr Jack McConnell): I met the Prime Minister last week and I hope to see him again soon.

Under serious pressure from the member for the Western Isles, I warmly welcome the fact that Glasgow Rangers Football Club succeeded this week in becoming Scotland’s first ever representative in the quarter finals of the champions league.

Nicola Sturgeon: I echo those comments and I wish Rangers the very best of luck for the remainder of the competition.

I refer the First Minister to the report that was published today by the Auditor General for Scotland, which at best paints a mixed picture of the First Minister’s stewardship of the national health service. No doubt the First Minister will point to the decline in the number of patients with a guarantee who have had to wait more than six months for treatment. I agree that that is progress, but does he share my concern that such progress has been achieved at least partially through a dramatic increase in the number of patients whose waiting time guarantee has been removed altogether?

The First Minister: That is, of course, a distortion of the position. The Minister for Health and Community Care is committed to ensuring that, in years to come, everyone on the lists is in the same position and that we do not have different categories. Clearly, that is to be welcomed. It is also important to note that the Auditor General’s report recognises that considerable improvements have taken place in the health service. I hope that Ms Sturgeon is prepared to welcome those.

Nicola Sturgeon: I started by welcoming the progress that has been made, but I asked a specific question. I point out to the First Minister that, since 2003, the number of patients who have lost their waiting time guarantee has gone up by nearly 25 per cent. More than 23,000 patients have now been waiting for treatment for more than six months and 12,000 patients have been waiting for more than a year. Is the First Minister aware that the majority of those patients are on the hidden waiting list not because they have abused

the health service or have a low-priority condition but because, for some personal reason such as bereavement, illness or child care problems, they have been unable to keep an appointment? How can he justify removing their guarantee and, worse still, ignoring their very existence when he comes to judge whether he has met his target?

The First Minister: I would think that the answer is obvious. If someone is too ill to enjoy the benefits of an operation or if they wish to delay their operation, we who live in a democracy—a free country—do not force them into a hospital ward or make them undergo the operation when that would be inconvenient, or perhaps even dangerous, for them. If Ms Sturgeon is suggesting that we should meet the six-month target—which for in-patients and out-patients we will meet, despite her prediction, by the end of this year—for patients whose operations have been delayed for good clinical or personal reasons by in some way forcing them to have their operation within six months, I believe that she is wrong.

Nicola Sturgeon: My question was why, when someone has to delay their operation for a good reason, they should lose any guarantee of treatment. The First Minister justifies that because he knows that he will hit his target only by getting as many people as possible off the main waiting list and on to the hidden waiting list. Is it not the case that, for many thousands of patients with real ailments, the First Minister's waiting time target will simply not be met, just as, according to the Auditor General's report, the waiting time targets for cancer treatment, accident and emergency care and access to general practitioners are not being met? Does the First Minister accept that he would win more respect if he were honest and did not try to fiddle the figures by telling patients who know better that everything in the garden is rosy?

The First Minister: First, there are no hidden waiting lists in the health service in Scotland, as the numbers that Nicola Sturgeon is able to quote are published and are not hidden. However, let me make a serious point. I believe that it is a disgraceful slur on the medical judgment of doctors across Scotland for Ms Sturgeon to suggest—

Stewart Stevenson (Banff and Buchan) (SNP): Give them back their guarantee.

The First Minister: Mr Stevenson is very keen on shouting out, but he should listen for a second.

If Ms Sturgeon is suggesting that any general practitioner, consultant or other medical practitioner in Scotland has deliberately put someone beyond the six-month guarantee, that is a disgraceful slur on them. If she has evidence that anyone in the health service has done that, she should produce it for the individual case

concerned, instead of slurring every member of the health service professions.

Ms Sturgeon should be highlighting from the Auditor General's report all the things that he says are positive in the health service in Scotland. The report says that clinical outcomes are improving, that life expectancy is increasing, that smoking is declining, that the number of deaths from cancer is falling, that the number of deaths from heart disease is falling, that the heart disease target will be met, that the number of deaths from stroke is falling, that the stroke target will be met and that waiting time targets will be met, despite the best efforts of the Scottish National Party to rubbish that possibility and everyone who is working so hard to realise it.

Nicola Sturgeon: It is a question not of clinical judgment, but of Executive policy. The fact is that 23,000 patients have been waiting more than six months for treatment. The question is, why are they not counted when the Executive comes to decide whether it has met its targets?

The First Minister may not want to listen to me, but what does he say to the independent health economist who was quoted in this morning's edition of *The Herald*? He said:

"The picture that is presented is a lot of new money going in, some targets being hit, quite a few targets being missed, and quite a few targets which we do not know if they have been hit or not because nobody bothered to check."

Is it not the case that after six years of the Executive that is simply not good enough?

The First Minister: The reality is that we met the target for those who were waiting for more than 12 months for treatment; we met the target for those who were waiting for more than nine months; and we will meet the target for those who have waited for more than six months. Ms Sturgeon's central point in this question-and-answer session is that somehow, somewhere, somebody in the health service in Scotland is deliberately moving people beyond the six-month guarantee in order to hide them and the rights that they have under it. It is a disgraceful suggestion that any doctor or consultant in Scotland would deliberately delay someone's operation—

Nicola Sturgeon: You are the ones who are doing it.

The First Minister: No—no one on the Executive benches is deciding the timing of people's operations. No amount of shouting from the SNP benches can hide that fact. If a medical practitioner makes a clinical judgment that it may be dangerous for someone to have an operation right now and that the operation should be delayed, or that an operation may be delayed at the request of the patient because the current moment, perhaps before Christmas, does not suit

them and their family and they would prefer to wait until the new year, they do so in good faith. If Ms Sturgeon has evidence that any medical practitioner is making such judgments in bad faith and is making the wrong judgments, she should make the proper complaint. She should not seek to distort the hard work that has been done throughout the service in Scotland to ensure that those with the guarantee have it met by 31 December.

Cabinet (Meetings)

2. Miss Annabel Goldie (West of Scotland)

(Con): To ask the First Minister what issues will be discussed at the next meeting of the Scottish Executive's Cabinet. (S2F-1980)

The First Minister (Mr Jack McConnell): The Cabinet will discuss our progress in delivering the legislation that we promised in the legislative programme and improvements to services in Scotland.

Miss Goldie: I wonder whether the First Minister will discuss consensus with his colleagues. So far in my new role, I have found precious little on which the First Minister and I agree. However, I have no intrinsic desire to play Judy to his Punch. Does the First Minister's Cabinet have any concerns about the provision of education in our state schools?

The First Minister: Miss Goldie's question has a remarkably similar ring to comments that were made in another place yesterday afternoon. I welcome that approach.

Although we are very proud that results in Scotland's schools have improved every year in virtually every category since the emergence of the Scottish Parliament and devolution in 1999; that the pay, conditions, morale and professional training of Scottish teachers and other staff in our schools have improved in recent years; that we have the biggest school modernisation programme that there has ever been in Scotland's history; and that investment in equipment, technology and new ideas is making a genuine difference in our classrooms, of course we want to go further. In particular, we want to ensure that the bottom 20 per cent of achievers in Scotland's schools have a better chance in the future. The problem is challenging and difficult, but we are dedicated to resolving it. We will continue with new initiatives in the new year to help to improve the situation.

Miss Goldie: The First Minister might affect some of the characteristics of Mr Punch, but he will not want his nasal proboscis to be confused with Pinocchio's. Let us look at the facts: a million days were lost to truancy last year; 59 per cent of our teachers consider discipline to be a serious problem; 50 per cent of 14-year-olds do not meet

the Government's standard for writing; 40 per cent of them do not meet the Government's standard for maths; and 2,730 young people left school last year with no qualifications.

I hope that in the mood of consensus the First Minister will agree that those figures are depressing. Let us try to find common ground to improve matters. Will the First Minister, like Mr Blair and me, accept the principle of greater autonomy in our schools and reflect that by allowing schools to own their buildings and land, employ their staff, set their pay and develop their culture and ethos?

The First Minister: Miss Goldie's question was in two parts with a nicer middle. The first part was about the performance of our schools, but what she does not report is that although the current figures on the levels of achievement, particularly for secondary 2, demand that we invest more in S1 and S2, in primary to secondary transitions and in the challenging work that goes on in S1 and S2 classrooms to raise standards, they are considerably higher than they were when the Parliament was created, even higher than they were when the Conservatives were in power and have improved every year since devolution.

If there is to be a spirit of consensus in education, it would be better to start by addressing the facts and recognising the achievements of those who work in our schools and of recent policy, while agreeing that we have to go further.

I do not agree with Miss Goldie's second point. I do not agree that 4,000 schools in Scotland should each have their own personnel and property departments, lawyers and so on. That would be a dreadful waste of resources. I believe strongly that we must make the most efficient use of resources in Scotland's schools with central administration and must devolve the maximum resources to head teachers, so that they can get on with running their schools, employing their staff and ensuring that those staff make a real difference in the classroom.

Miss Goldie: There was a certain ambivalence about that response. I listed what is happening in Scottish education. It takes two for Punch and Judy to tango and here am I with my arms outstretched.

Mr McConnell seems to concede that all is not well in our state education sector—his response illuminates that. So let me make a final offer to Mr McConnell. If he concedes the principle that all is not well and so accepts the conclusion that something fairly radical must be done, and if his party in the Executive accepts the need for reform to take place, will he accept my assurance that he need no longer rely on the duplicitous whimsy of his Lib Dem colleagues? If he is earnest in his

endeavour to improve the quality of state education provision, I can tell him that my party will support him in much-needed reform. Will he be gracious enough to accept that assurance?

The First Minister: I have a vision in my mind of David Cameron stretching out his arms to Tony Blair next week and welcoming him to his bosom. I do not think that that would be expected in the House of Commons, and although I welcome Miss Goldie's approaches I am not going to respond here and now.

I will also give Miss Goldie some advice. If we are going to have a bit of consensus and try to come together on an issue, I am prepared to listen to her questions and answer accordingly if she is prepared to change the questions that she has written and respond to the answers that I give her. Let us perhaps have that agreement and we will see how far we get.

I am sure that we both agree that the performance of Scotland's schools needs to improve constantly year on year. To achieve that and for our youngsters to learn, we need more resources, better trained staff working to higher standards, better equipment and more modern facilities. We need what the Minister for Education and Young People is achieving: a more flexible curriculum that allows teachers and head teachers to exercise their professional judgment. Head teachers themselves need more power to run their schools and to drive standards up through strong leadership.

The way forward for Scottish education is not the break-up of Scottish education into lots of autonomous units, which I think Miss Goldie and her party would wish for, but real investment and reforms and efforts to tackle the underachievement that still exists in some schools, particularly among the bottom 20 per cent of achievers. That is why we have the schools of ambition programme—and the number of schools on that programme is higher than even the upper limit for city academies down south. It will focus on the ingenuity and innovation of head teachers, classroom teachers, pupils and parents in Scotland's schools. It will see that tail of underachievement driven up in years to come, and we will see the benefits for our society and for the economy as a whole.

Cindy Sheehan

3. Colin Fox (Lothians) (SSP): To ask the First Minister whether he will accept the invitation from Rose Gentle to meet Cindy Sheehan, the US anti-war campaigner whose son Casey was one of 1,000 soldiers killed in Iraq, when she is in Scotland today. (S2F-1993)

The First Minister (Mr Jack McConnell): I received the invitation from Mrs Gentle on 6 December. My office replied to that invitation earlier today explaining that I am unable to attend the meeting. However, I am sure that all members of the Parliament will join me in extending our sympathy to all those who have lost family members serving in either the British or American armed forces, in Iraq or elsewhere.

Colin Fox: I am disappointed that the First Minister cannot meet Cindy Sheehan this afternoon in committee room 5 at 2.30. He is perfectly prepared to run after warmongers such as George Bush when they are here, but he cannot meet peace activists who come to Scotland, who are left to stand on their own. Cindy Sheehan lost her son in a war that the First Minister supported, yet he cannot even look her in the eye. Rose Gentle gets the same brush-off. Does the First Minister not appreciate the fact that millions of Scots are sick and tired of the never-ending carnage and brutality in Iraq that they see on their television screens, and that his refusal to meet Cindy Sheehan reinforces the impression that he has a closed mind and is wedded to a disastrous strategy?

The First Minister: I do not intend to respond to some of those personal comments, but I will say one thing: whatever differences we have in this chamber and elsewhere over the initial decision to go to war in Iraq or over the decisions that should or should not be taken by Governments now, I would have hoped that we could be united in condemning those who commit terrorist acts against British forces and against innocent Iraqis. I have yet to hear that from the Scottish Socialist Party; I hope that some day we will.

Colin Fox: I point the First Minister in the direction of the first post-invasion Iraqi Prime Minister, Mr Iyad Allawi, who said that the torture, death squads and barbarity of Saddam Hussein have now been replaced by a regime equally hated and torturous.

Is it not time that Scotland was synonymous around the world with peace instead of being known for its weapons of mass destruction on the Clyde and its armies in Iraq? Would it not be better if it was a place that had a reputation for welcoming a peace activist such as Cindy Sheehan rather than for turning her away empty-handed?

The First Minister: My view is that Scotland has—as it has always had—a reputation for welcoming people of all races and religions from around the world with all different points of view. The Parliament has exemplified that during its short existence and I hope that we will continue to do so.

At the same time, I believe that we should recognise the role that our armed forces have played in promoting the image of Scotland around the world. Of course, there have been different periods in our history in relation to events that have happened overseas, but by and large the performance of Scottish armed forces as part of the British Army around the world has portrayed this country positively. As we mentioned in the chamber earlier in the year, that was the case when Scots defended Malawi when there was the possibility of it losing the independence that it wanted.

Pre-budget Report

4. Dr Elaine Murray (Dumfries) (Lab): To ask the First Minister how the measures in the Chancellor of the Exchequer's pre-budget statement will affect Scotland's economy. (S2F-1991)

The First Minister (Mr Jack McConnell): The Chancellor of the Exchequer announced a series of measures to promote productivity growth, increase employment opportunities and improve services.

Dr Murray: The First Minister will be aware of the burdens placed on individuals and businesses in Dumfries and Galloway and throughout Scotland by the high price of petrol and other fuels. Therefore, does he welcome the Chancellor of the Exchequer's announcement that petrol and fuel duties will be frozen for the whole of the financial year? Does he also believe that Scottish consumers, businesses and taxpayers who have paid those high prices deserve to share some of the benefit of the increased profits made by the oil companies through high oil prices? Does he agree that the UK, with its marginal taxation rate of 50 per cent, still offers economic advantage over Norway, with its 78 per cent rate, and most other oil-producing countries?

The First Minister: I welcome the announcement that fuel duty will be maintained at its current level for the next 12 months. That is a good announcement for Scotland—in particular for Scotland's rural areas, such as the one that Elaine Murray represents.

The other measures announced by the chancellor have provoked widespread debate in Scotland and elsewhere over the past week. I am sure that that will continue to be the case. I hope that when members examine the pre-budget report, they will consider the balance between income and expenditure and the need to ensure that in the UK we not only spend money on the right things but raise enough money to keep our economy stable and successful.

Stewart Stevenson (Banff and Buchan) (SNP): Is the First Minister aware that Peterhead is the world's biggest offshore oil support base and that many of the small and medium-sized enterprises that contribute to a relatively vibrant economy in the north-east are involved in the oil industry? Given the fact that extracting oil from the Scottish sector is twice as expensive as extracting it from the Norwegian sector and five times as expensive as extracting it from the Dutch sector, what mitigation measures does the First Minister propose to deal with the undoubted loss of jobs in the Scottish oil industry as a result of the chancellor's measures?

The First Minister: Given the incredibly high number of licences awarded over the past 12 months and the positive environment that currently exists in the industry, I hope that we will continue to work with the industry to secure its expansion in Scotland and that of the support services that benefit from the oil and gas industry's work.

I recognise that Stewart Stevenson makes a strong and appropriate local point. I wish that his local member of Parliament had made the same point in Westminster yesterday. He had an ideal opportunity to do so when he asked a question at Prime Minister's questions, but he was more interested in making a sarcastic comment about the schools that the leader of the Opposition and the Prime Minister went to. I thought that questions about which school someone went to were a thing of the past.

We must concentrate on the issues that really matter. There is an issue about support for the oil and gas industry in Scotland, which concerns not only the taxation regime or the support that we have given and secured through our working pilot with the Department for Trade and Industry and the UK Government for new field exploration, but the support that we give to improve skills that will help the industry in the years to come and to promote the industry and the services that have resulted from it, which are expanding globally.

Severe Storms

5. Mr Jamie McGrigor (Highlands and Islands) (Con): To ask the First Minister what actions the Scottish Executive has taken to address the potential impact of severe storms, such as those that affected the Western Isles in January 2005. (S2F-1985)

The First Minister (Mr Jack McConnell): We acted promptly to help the Western Isles following the storms last January. We are committed to learning lessons from those awful events and to improving Scotland's ability to cope with any emergency. We have also allocated resources to help people locally to repair much of the damage.

Mr McGrigor: Does the First Minister realise that Western Isles Council put a conservative estimate of £15 million on the cost of repairing damage caused by the January hurricane, but the Executive has allocated only £9 million, and that little work has been done because of red tape and the need for planning permission? Does the First Minister understand the fear in South Uist communities such as lochdar and Stoneybridge that they will be cut off by the sea again? Will he ensure that safe exit routes are built, so that the tragic loss of life that occurred in January will not be repeated? Will he assure other vulnerable communities in the Highlands and Islands that the Scottish Executive is logistically and financially ready to deal with the consequences of further severe storms this winter?

The First Minister: A number of positive and constructive meetings took place with other authorities in Scotland after last winter's storms to ensure that lessons are learned and that we are better prepared in the years to come. Considerable resources were allocated in previous budget rounds and they will continue to be allocated for improvements to all kinds of preventive and contingency measures and to deal with emergency planning.

Already, £9 million has been allocated to the Western Isles. In January, the Minister for Finance and Public Service Reform will meet the member for the Western Isles, Alasdair Morrison, to discuss the next phase of resources that might be required. The elements that have been approved so far were identified by the local authority and, therefore, local people as priorities. It is right and proper that we take our lead from them.

I am sure that everybody who is involved, in particular Western Isles Council, will want to ensure that decisions are made speedily on these matters, although I am sure that, if there are any problems, Jamie McGrigor will raise them with the council. It would not be a good idea to waive planning permission altogether. I hope that if it has caused a hold-up in any way, it is dealt with soon.

Police Centre of Excellence

6. Jeremy Purvis (Tweeddale, Ettrick and Lauderdale) (LD): To ask the First Minister how the Scottish Executive's proposed new police centre of excellence is intended to reduce violent crime. (S2F-1996)

The First Minister (Mr Jack McConnell): Violence in Scotland needs to be addressed with a sustained and determined effort on many fronts. The expansion of the violence reduction unit, together with the other steps outlined by the Minister for Justice this morning, underline our firm belief that the so-called booze and blade culture has no place in today's Scotland.

Jeremy Purvis: Is the First Minister aware that some of the information from that excellent unit at Strathclyde police is deeply disturbing? For example, 17 per cent of all knife murderers between 1996 and 2005 were under the age of 18. Does he agree that if we do not challenge such behaviour and the culture, we will not be effective in turning the situation around, and that preventive approaches require the support of even tougher sentences in summary cases and on indictment, as well as for those who have been convicted of knife possession before? Will the First Minister support me in lodging amendments at stage 2 of the Police, Public Order and Criminal Justice (Scotland) Bill to bring that about, so that we put the law on knife crime more on a par with the law on firearms?

The First Minister: I will be interested to see those amendments. The approach to tackling knife crime, gun crime and violence in Scotland needs to be comprehensive. It needs to cover tougher sentencing and higher-profile policing, particularly on the streets of our city centres at night. It must also ensure that we change the culture, particularly among young people. We are perfectly willing to hear suggestions from any corner of this chamber that might ensure that, through our schools, youth groups or in other ways, young people are made aware of the likely impact of carrying a knife or a blade when they go out at night.

Ensuring that young people understand the impact of doing that—on themselves, their victims and their life chances—and the sentences that they might face as a result will form a particularly important part of prevention. That will need to be backed up by higher-profile policing and by tougher sentences through the courts.

Margaret Mitchell (Central Scotland) (Con): Will the First Minister say whether the report in *The Herald* on 2 December, stating that the Executive is considering cutting the number of police forces in Scotland, was accurate?

The First Minister: I do not think that there was any suggestion that we would be cutting the number of police forces, but the Minister for Finance and Public Service Reform made a serious suggestion in the article to which the member refers about the need to ensure the best configuration of all our public services throughout Scotland. It is important that we consider boundaries and the shape and efficiency of different organisations across the board.

However, boundaries, responsibilities and reorganisation should not be viewed as the solution to improving and reforming our public services. Improvements and reform of public services must start with the needs of service users and the delivery of quality by those on the front

line. That should be our starting point, and the structures should back that up in the most efficient way possible. First and foremost are those who need to benefit from services and the quality of the services that they receive.

12:31

Meeting suspended until 14:15.

14:15

On resuming—

Question Time

SCOTTISH EXECUTIVE

Health and Community Care

Carers

1. Maureen Macmillan (Highlands and Islands) (Lab): To ask the Scottish Executive how it is working in partnership with national health service bodies, local authorities and other agencies to help to assist and support carers. (S2O-8389)

The Deputy Minister for Health and Community Care (Lewis Macdonald): We are working with partners to support carers in a number of ways, including the preparation of the care 21 report on the future of unpaid care in Scotland, which I helped to launch in Inverness in September. We will respond to the care 21 report early next year.

Maureen Macmillan: I draw the minister's attention to the wonderful exhibition of photographs of carers by Fin Macrae—commissioned by the Princess Royal Trust for Carers—which will tour the Highlands over the next few months and, I hope, reach the Parliament in due course. I understand that Highland Council will no longer centrally fund the Highland Community Care Forum, at whose recent conference the minister was the keynote speaker. As a result of that decision, concerns have been expressed to me about future support for carers organisations in the Highlands. I know that that decision is for Highland Council, but I ask the minister to keep an eye on the situation.

Lewis Macdonald: I am aware of the good work that is done by the Princess Royal Trust for Carers and other bodies that are involved in the Highland Community Care Forum. Although Maureen Macmillan is right to say that the position on the Highland Community Care Forum is under review, I understand that Highland Council and NHS Highland will make a decision this month. Clearly, it is for them to make the decision, but I agree with Maureen Macmillan that it is good practice for local authorities and health boards to involve service users and carers in the planning of local services.

Mrs Nanette Milne (North East Scotland) (Con): The mental and physical health of young carers is a high priority on the Executive's agenda but it does not appear that there is sufficient support. What is the Executive doing to help

young carers? Can the minister explain why, in Aberdeen this year, 160 of the referrals that professionals have made to young carers projects have had to be refused? We should be encouraging growth in that area.

Lewis Macdonald: As I said in my reply to Maureen Macmillan's supplementary question, responsibility in local areas lies with local bodies. Nanette Milne and I both had the opportunity to visit the Princess Royal Trust voluntary service Aberdeen young carers activity centre last week and to hear some of the concerns that were expressed. It is noteworthy that the recommendations in the care 21 report include a call for a national young carers strategy. We are all aware of the significant role that young carers play. As I said in my answer to Maureen Macmillan's question, we will respond to the report early next year. When we do, we will pay close attention to that recommendation.

NHS Lanarkshire Acute Services Review

2. Janis Hughes (Glasgow Rutherglen) (Lab): To ask the Scottish Executive what action it will take to ensure that any changes to health care resulting from NHS Lanarkshire's current acute services review will not have a negative impact on patients in the NHS Greater Glasgow area. (S20-8385)

The Minister for Health and Community Care (Mr Andy Kerr): The National Health Service Reform (Scotland) Act 2004 places a duty of collaboration on NHS boards to ensure that service change proposals are not developed in isolation. That emphasis is reflected in "Delivering for Health"—the report sets out a number of specific responsibilities for regional planning groups, which will require further strengthening of the regional planning mechanisms and arrangements. NHS Lanarkshire has assured me that it has had on-going discussions with NHS Greater Glasgow and the west of Scotland regional planning group as it has developed its proposals for the future configuration of health care services throughout Lanarkshire.

Janis Hughes: I am sure that the minister is aware of my continuing involvement in the acute services review in Glasgow, under which two accident and emergency and trauma units will cover greater Glasgow. Will he assure me that those changes will be fully taken into account when he considers the proposed reduction in accident and emergency facilities in Lanarkshire and, in particular, the role that Hairmyres hospital plays in that regard?

Mr Kerr: I am well aware of Janis Hughes's views on those matters. Of course, no decisions have been taken even on what will be consulted on in Lanarkshire and beyond. Lanarkshire NHS

Board advises me that the consultation will begin in January and that all points should be raised during that process. As I have said today on another matter, regarding Argyll and Clyde, patient flows must be respected and must continue regardless of the configuration of services. We must respect patient choice in the health agenda and I expect there to be such choice as part of the proposal to reconfigure services.

Cathie Craigie (Cumbernauld and Kilsyth) (Lab): Will the minister ensure that, before NHS Lanarkshire makes any recommendations to him, it takes fully into account the deprivation and needs of people who live in the northern constituencies of the Lanarkshire area in particular? I am thinking about the need to access good health services and the shocking record of health inequality in those constituencies.

Mr Kerr: All boards in Scotland must address the Kerr agenda—I mean Professor David Kerr's agenda, of course—and the "Delivering for Health" agenda, which I set out in the chamber. Recognising that health improvement and inequalities are important and that they will be the key driver for the future development of the health service in Scotland is integral to addressing those agendas. The need to stream and organise patients effectively has also been recognised in order best to meet needs. I want there to be appropriate care that is as local as possible and that specialises where that is necessary. On the specific issue that the member raised, we must drive our health care services into the communities in question to prevent rather than treat health inequalities. That is the agenda of the Government in Scotland.

Insulin Pump Therapy

3. Mrs Margaret Ewing (Moray) (SNP): To ask the Scottish Executive whether it considers that insulin pump therapy offers an improved quality of life for type 1 diabetes sufferers. (S20-8356)

The Deputy Minister for Health and Community Care (Lewis Macdonald): NHS Quality Improvement Scotland has endorsed an appraisal by the National Institute for Health and Clinical Effectiveness on continuous subcutaneous insulin infusion for diabetes. The NICE report recommends that insulin pump therapy be made available as a treatment option for patients with type 1 diabetes for whom multiple-dose insulin therapy has failed and who are willing and able to use insulin pump therapy effectively. We expect national health service boards to implement the recommendations of that appraisal.

Mrs Ewing: When does the minister expect the health boards to accept those important recommendations? I am sure that the issue is not unique for constituents in my area and that it has

been raised with other members. Given the approval that has been mentioned, is it not sad that only 0.19 per cent of sufferers in the United Kingdom currently receive the treatment? We are lagging pitifully behind Germany, where the figure is 10 per cent, and Sweden, where the figure is 12 per cent. Will he carefully consider the figures, including the number of patients who have indicated that they would like to have that system of treatment, and confirm that financial pressure will not constrain provision?

Lewis Macdonald: The issue is not financial in the way that Margaret Ewing's final point might imply. Essentially, the position is that my officials wrote to NHS boards in February to remind them of their obligations to implement the guidance. However, it is important to say that the therapy is not appropriate for all sufferers of type 1 diabetes. Insulin pump therapy can be dangerous if the patient does not, or is unable to, monitor it carefully and frequently. The criteria that are used are that multiple-dose insulin therapy must first have been tried and must have failed and that the patient must have the commitment and the competence to use the therapy effectively. Therefore, I regard the matter not as statistical, but as clinical—clinicians must make proper clinical judgments in each individual case. The guidance to boards does not require clinicians to prescribe the therapy, but says that, if a clinician judges that such treatment is the best treatment, the board must fund it.

Taser Guns

4. Patrick Harvie (Glasgow) (Green): To ask the Scottish Executive what guidelines it has issued to health services on the treatment of people shot with Taser guns. (S2O-8417)

The Deputy Minister for Health and Community Care (Lewis Macdonald): The use of Tasers is conducted under strict police guidelines following rigorous testing, including independent medical assessment. The Executive has not issued guidance to health services, but the Association of Chief Police Officers in Scotland has provided information to general practitioners and hospitals on the treatment of people who have been subjected to Tasers.

Patrick Harvie: Given the alarming increase in the number of deaths following the use of Tasers in other countries in which they have been used for rather longer than they have been used here and the relative recency of their coming into use in Scotland, will the minister take into account the lack of experience that health services are likely to have in treating people who have been shot with Tasers and the complex relationships that there can be between drug and alcohol use, heart defects and 50,000V? In the light of the rather

alarming increase in the number of deaths in custody in other countries, will he ensure that work is undertaken to dismiss the notion that Tasers are non-lethal weapons?

Lewis Macdonald: I recognise that caution is required in those circumstances, which is why the police use Taser guns cautiously and only when they are the best option available to officers at the time. I welcome the information that ACPOS has provided to practitioners in the health service to ensure that they are aware of all the issues that the member mentions.

The Defence Scientific Advisory Council sub-committee on the medical implications of less lethal weapons provided a statement on the medical implications of the M26 advanced Taser gun in an operational trial. It concluded that risk of death exists, but that it is much lower than that from conventional firearms. No option is risk free—any use of force in any circumstances by the forces of law and order carries some risk of physical injury. However, we can look to the police to exercise that use of force in a restrained and proportionate way.

Dennis Canavan (Falkirk West) (Ind): Given that Taser guns have been involved in 74 deaths in the United States and Canada and have seriously injured many more, will the deputy minister say whether he or the Minister for Health and Community Care was consulted before the Taser was issued to Scottish police forces? Why was the approval of the Parliament not sought for the issue of such lethal weapons?

Lewis Macdonald: I am sure that Dennis Canavan appreciates that those are matters for the Minister for Justice and the Justice Department. I have no doubt that they carried out their responsibilities in the usual way and in the best interests of justice and of the citizens of Scotland.

Phil Gallie (South of Scotland) (Con): Does the minister consider that, from a health viewpoint, wounds suffered in attacks by knives and guns are far more serious than the injuries inflicted by Taser guns, which are used as a deterrent? If so, does he welcome the use of Tasers, which are, in the main, a non-lethal weapon?

Lewis Macdonald: Phil Gallie makes an important point. It is worth noting that Tasers have been used on two occasions in Scotland. Sadly and tragically, the use of knives and guns in the committing of crime is far more frequent. That is an issue that all members of the Parliament should address as a high priority.

National Health Service Boards (Consultations)

5. Margaret Mitchell (Central Scotland) (Con): To ask the Scottish Executive what influence NHS

board consultations have on the decision-making processes of NHS boards. (S2O-8345)

The Minister for Health and Community Care (Mr Andy Kerr): My response to the Kerr report, "Delivering for Health", is explicit: we will work with NHS boards to ensure that there is a constant effort to make certain not only that the interests of patients are paramount in the design of services but that every reasonable effort is made to explain the impact of service changes to patients and local populations and to involve patients and the public in the consideration of options for change. We will continue to give patients an influential voice in the future of the health service and in their own care. NHS boards will be asked to demonstrate how they are working to achieve year-on-year improvements by involving the public in service delivery and in individual decisions about their personal health care. The new Scottish Health Council will have a central role in holding the NHS to account for its performance on patient and public involvement.

Margaret Mitchell: Does the minister agree that consultations must be both genuine and thorough and must take into account the views of NHS staff, health professionals, stakeholders and others before a decision is made? Does he share my concern that, before the start of the consultation on the future of accident and emergency care in Lanarkshire, a televised news report announced that NHS Lanarkshire intended to have two accident and emergency hospitals and one elective one?

Mr Kerr: I am afraid that the member cannot hold me to account for the behaviour of the media—although that subject is one that I would love to undertake and deal with more effectively. However, that is not the case. What is the case is that NHS Lanarkshire is involved in a wide range of consultations internally on the options for choice for accident and emergency hospitals. It will issue a consultation paper in the new year on any proposals that it has for the reconfiguration of services in Lanarkshire. That paper has not yet been issued, so I would await the outcome of the consultation process before commenting on the substantial matters that the member raises.

Karen Whitefield (Airdrie and Shotts) (Lab): I was heartened to hear the minister say that any reorganisation of health services should be driven by improving public health and by addressing health inequalities. Does he agree that it is often the most deprived communities, and the communities with the highest levels of ill health, that are the least likely to engage in a formal consultation process? Will he ensure that, in any formal consultations, due weight is given to the views of such communities so that they can participate fully in the process?

Mr Kerr: I would hope that any NHS engagement would take cognisance of that point. My experience to date, and the comments that we have received from the Scottish Health Council, suggest that that is the case. We have had difficulties in the past, but the focus that the chamber has put on the conduct of the NHS in the engagement that the member describes has been significant. Standards are set out for consultations and there are issues that we have to take account of in the provision of services. I am confident that the consultation in Lanarkshire will meet those high and rigorous standards. I am sure that the member will keep me up to date with her views on the matter.

NHS Argyll and Clyde (Transfer of Responsibility)

6. Jackie Baillie (Dumbarton) (Lab): To ask the Scottish Executive whether it will set out the transition arrangements for the transfer of responsibility from NHS Argyll and Clyde to NHS Greater Glasgow and NHS Highland. (S2O-8373)

The Minister for Health and Community Care (Mr Andy Kerr): Following formal public consultation—which I argue was effective—I announced today my decision on the boundaries of the two boards that will assume responsibility for the planning and provision of health care services in Argyll and Clyde. The matter will be the subject of an Executive debate this afternoon.

The relevant boards will now begin formal consultation with staff on transferring their employment contracts and on other issues. The Executive will also shortly begin formal consultation—with organisations such as the NHS boards, relevant local authorities and trade unions—on the draft parliamentary order for the exercise of powers to vary the board boundaries.

Of course, a smooth transition in terms of service planning and provision is essential. Local people can be assured that all necessary preparations will be made to ensure an effective and efficient transition of responsibilities when NHS Argyll and Clyde is dissolved on 31 March 2006.

Jackie Baillie: The minister will be aware that many people are not happy with the decision on boundaries. However, the real debate is about services. He will know that local people are concerned about the range of services available at the Vale of Leven hospital. Both he and Professor Kerr have encouraged the proposals for integrated care at the Vale of Leven, so will he agree that now is the time to go further, beyond the warm words, to robust action? Will he repeat the welcome commitment made to my constituents this morning about the Vale of Leven hospital—a commitment that will effectively stabilise services and from which all Scotland can learn?

Mr Kerr: It was very useful to meet Jackie Baillie and her constituents this morning on the matter. I thought that it was right and appropriate to make that announcement, to meet people personally and to give—I hope—some strong reassurances on the point that she makes. The issue is about services. The organisation of boundaries and the management structures in the NHS respect and will continue to respect patient flow and patient choice.

Jackie Baillie raises a particular point about the Vale of Leven hospital. She is correct: David Kerr and I have been involved in discussions on the integrated care model. I am pleased to say that a pilot of that model will begin in January and will last for six months. My view is that that will take the idea from the bench and into practice. It will allow us to learn—not only in the Vale of Leven hospital but all around Scotland—how services can be better provided.

New Victoria Hospital

7. Mr Charlie Gordon (Glasgow Cathcart) (Lab): To ask the Scottish Executive which additional services will be provided in the proposed new Victoria hospital in Glasgow which are not currently provided at the Victoria infirmary. (S2O-8383)

The Minister for Health and Community Care (Mr Andy Kerr): Over £100 million is being invested in the new Victoria hospital for additional services. It will be a substantial facility offering state-of-the-art health care services in a fit-for-purpose environment and it will cater for around 85 per cent of the current hospital attendances in the old Victoria as we know it now. I understand that NHS Greater Glasgow plans to offer a number of day-case and out-patient services at the new Victoria hospital that are not currently available at the Victoria infirmary. Those include magnetic resonance imaging scanning, haemodialysis, day chemotherapy and an extensive range of day surgery and endoscopic procedures.

Mr Gordon: In the light of Greater Glasgow NHS Board's current in-patient bed modelling exercise, is it possible that, in addition to providing modernised services and new services, the new Victoria hospital will have in-patient beds?

Mr Kerr: That issue has been raised frequently in relation to the new Stobhill hospital. Let us put the matter in context. The new Victoria hospital represents a highly significant investment. It will be a three-floor facility that will provide an area the size of five football pitches in which the additional services can be delivered. I am pleased that NHS Greater Glasgow is involved in a bed modelling exercise, part of which involves working up proposals to provide the beds to which the member refers. I have not seen the conclusion of

that work, but there is a commitment to include in-patient beds in the model of care that the new hospital will provide.

Environment and Rural Development

Air Pollutants

1. Dr Jean Turner (Strathkelvin and Bearsden) (Ind): To ask the Scottish Executive what measures are being taken to monitor and measure air pollutants caused by road transport in rural areas. (S2O-8347)

The Deputy Minister for Environment and Rural Development (Rhona Brankin): All local authorities are required by the Environment Act 1995 regularly to monitor air quality in their areas. The type of monitoring that is undertaken depends on the particular local issues that they identify. Monitoring is also undertaken by the Executive, in partnership with the other United Kingdom Administrations, at a range of sites in both urban and rural areas.

Dr Turner: People are encouraged to cycle despite the fact that, since 1998, levels of pollution in rural areas have been higher than those in urban areas, according to the measurements of the headline air quality indicator. Given that recent research has shown that outdoor pollutants are linked not only to respiratory disease—an obvious connection—but to cardiovascular disease, how can the Executive make councils adhere to the advice of the Scottish Environment Protection Agency?

Rhona Brankin: The long-term trends on the presence of pollutants in the atmosphere are downwards. Emissions are falling because of tighter industrial regulation and increasingly stringent emissions and fuel standards. However, there are particular concerns in some areas. The member may be interested to know that East Dunbartonshire Council's review and assessment work has indicated that the nitrogen dioxide and particles objectives will not be achieved in parts of Bishopbriggs by the due dates of the end of 2005 and the end of 2010. In both cases, the issues are transport related. Following consultation, the council has announced plans to declare a single air quality management area covering both aspects. That will come into effect on 23 December. The council will now be required to undertake a further assessment of air quality within 12 months of the declaration and to produce an action plan.

Energy Efficiency

2. Sarah Boyack (Edinburgh Central) (Lab): To ask the Scottish Executive how its climate change strategy is promoting energy efficiency. (S2O-8376)

The Minister for Environment and Rural Development (Ross Finnie): Energy efficiency is a key component of our current climate change programme and will be central to our revised programme, which is to be published early in 2006. Along with a number of socioeconomic goals, climate change is an important driver for the promotion of energy efficiency and the current review of the Scottish climate change programme is helping to inform the development of an energy efficiency strategy for Scotland.

Sarah Boyack: Is the minister aware of the European Union's estimate that we could reduce our energy demands by 40 per cent if we adopted radical energy efficiency measures? What targets for domestic and business energy efficiency will he set and what incentives for them to be met will he put in place? How will he deliver the win-win that can be achieved for taxpayers if all public sector organisations reduce their energy bills and their CO₂ emissions and make the best use of our renewables technology by adopting an integrated approach?

Ross Finnie: I am aware of the EU study that has shown the dramatic gains that can be achieved through energy efficiency. As I said in response to the member's initial question, it is clear that a crucial part of the Executive's review of the climate change programme will be the promotion of energy efficiency, not just in the private sector but in the public sector, in which, as she rightly said, tremendous gains can be made. That point was highlighted in the Environment and Rural Development Committee's excellent report on climate change, which advocated that we produce a road map on how to make progress. That is what we ought to do and what we will do when we publish our revisions to the climate change programme.

Shiona Baird (North East Scotland) (Green): Two weeks ago, the Executive rejected an amendment to the Housing (Scotland) Bill that was lodged by my colleague Patrick Harvie, which would have established a statutory target for energy efficiency. That has already been done in England and Wales. Will the minister and his colleagues make a commitment to setting a voluntary target for energy efficiency in households? If so, will he say what the target might be?

Ross Finnie: I am not in a position to do that and I think that the member knows why that is the case. What I have undertaken to do as part of the climate change review is to work out, and be clear that we have a handle on, Scotland's share of carbon emissions. We need to establish what targets we might place on each sector that would be achievable and consonant with our aim of achieving our share of the required reduction in

carbon emissions, in line with the Kyoto commitments.

Waste Oil

3. Alex Fergusson (Galloway and Upper Nithsdale) (Con): To ask the Scottish Executive whether it considers that waste oil should continue to be incinerated under the Waste Incineration (Scotland) Regulations 2003. (S2O-8339)

The Deputy Minister for Environment and Rural Development (Rhona Brankin): Waste oils can be recovered through regeneration into usable oils or incinerated as a source of energy. I am satisfied that the Waste Incineration (Scotland) Regulations 2003 are necessary to protect human health and the environment where waste oils are incinerated.

Alex Fergusson: Is the minister aware that the cost of the part A provisional licence that is now required to incinerate waste oil is £10,000 in Scotland but only £300 in England? Does she agree that, rather than face the increased costs of disposal that will be incurred under the new regulations, businesses such as small motor garages will be sorely tempted to dispose of their waste oil in a considerably less environmentally friendly manner? I am thinking of the current practice of a constituent of mine who gathers waste oil from neighbouring small garages and incinerates it to heat his business premises.

Rhona Brankin: I am aware that there are differences between Scotland and England in how the cost is collected, but the cost in Scotland does not exceed the cost in England. I would be very disappointed if any operators were to dispose of waste oil in a way that could damage the environment and human health.

Eleanor Scott (Highlands and Islands) (Green): Is the minister aware of the situation of small garages on Shetland? Currently, small garages on the island can burn oil in a very small heater to heat the premises. They will now have to send the waste oil off the island and import oil on to the island to heat their premises? That neither fulfils the proximity principle nor makes environmental sense. Surely the minister can find a way to allow those businesses to continue with the practices that they have carried out until now.

Rhona Brankin: Operators will have to arrange for waste oil to be collected either by the local authority or by a properly licensed waste management company. In most cases, collection of waste oil is carried out free of charge or at low cost. I am happy to keep in touch with the member on the issue. That said, the regulations will come into force on 28 December and all operators will be required to comply with them.

Renewable Energy (Scottish Executive Buildings)

4. Donald Gorrie (Central Scotland) (LD): To ask the Scottish Executive what action its Environment and Rural Affairs Department will take to encourage the use of Executive buildings for generating energy from renewable sources, such as solar panels, for the benefit of local communities as part of the Executive's strategy on climate change. (S2O-8364)

The Minister for Environment and Rural Development (Ross Finnie): The answer is in two parts. As the member may be aware, all the electricity that is used in Executive buildings is already supplied from renewable sources, so we currently have no plans to install on-site renewable energy generation at any of our buildings. However, we will consider the inclusion of micro-renewables where appropriate and are supporting the development of a small-scale renewables market in Scotland through the Scottish community and household renewables initiative.

Donald Gorrie: That is encouraging, within limits. A large building such as Victoria Quay—let alone the Holyrood building—could not only supply its own power but power most of Leith if only small windmills, solar panels and so forth were to be used. Surely the Executive and the Parliament should be setting a lead. We should be visible in getting stuck into renewables.

Ross Finnie: We are stuck into renewables by virtue of the fact that we have a contract of some duration for the supply of all our electricity from renewable sources. I take the point that the member makes about community issues. That is a matter that would also require the consideration of community generation, which we very much wish to promote. Whether it would always be the case that an aesthetic Government building was the appropriate location for such structures is, of course, not a matter for me to comment on but a matter for the planning authority.

European Union Subsidies (Appeals)

5. Mr Jim Wallace (Orkney) (LD): To ask the Scottish Executive whether it has any plans to review the system for appeals against penalties applied to EU subsidy claims submitted under integrated administration and control system and agri-environment schemes. (S2O-8360)

The Minister for Environment and Rural Development (Ross Finnie): I have no plans to review the European Union agricultural subsidies appeals procedure which, as Jim Wallace is aware, was set up in November 2000 to review decisions in relation to the refusal, recovery and reduction of a producer's EU subsidy.

Mr Wallace: The minister will agree that the introduction of such an appeals mechanism has

been welcome, but he will also agree that there is sometimes frustration with the fact that the scope for determining appeals is often limited because the minister does not have much discretion or flexibility. I am sure that other members have raised with the minister constituency cases in which farmers and crofters who are hard-working and honest have nevertheless been penalised because of errors, oversights or delays in submitting applications. Can he assure us that he is taking all steps possible to get more flexibility and discretion to deal more justly with such cases?

Ross Finnie: I am grateful for Jim Wallace's acknowledgement that the implementation of the appeals system through the Scottish Executive Environment and Rural Affairs Department has greatly improved the sense of justice, but I wholly agree with him about the lack of flexibility and the sometimes disproportionate level of penalty that is applied to cases where no proof, or even suggestion, of dishonesty has been found. I continue to raise at European level the issue of whether greater flexibility could be granted to member states and to legislative regions within member states. I regret to say that the auditors of agricultural subsidies are not an easy group to deal with—flexibility does not appear to be their watchword—but the Executive is anxious to remove some of the anomalies and I will continue to press the issue.

Richard Lochhead (North East Scotland) (SNP): I concur with Jim Wallace's comments. The minister will be aware that I, too, have made representations to him on a number of occasions, in connection with cases in the north-east. It is perceived that the current regime does not take into account the possibility of innocent errors and that the penalties are often draconian and disproportionate. I understand—perhaps the minister can confirm this—that the Irish have shown a willingness to raise the subject in the European Union. Will the minister give us an update on the progress that is being made on the Irish representations, say whether he is of a mind to work jointly with the Irish to pursue the issue with the European authorities, and undertake to report back to Parliament on the progress that is made?

Ross Finnie: As I indicated in my response to Jim Wallace, the difficulty is neither a lack of willingness on the part of member states nor a failure on the part of the United Kingdom to recognise that, where there has been no dishonesty, the level of penalty that is applied is disproportionate. The argument on the other side is about the level of auditing that is conducted by the EU in relation to what are substantial sums of money. However, we continue to press the issue of errors that are a result of accident or omission

and that ought to be dealt with differently. I have raised that matter. I am well aware of the Irish situation; both our countries are pressing the issue, as are other member states. It is not a question of reporting back; we are simply hoping that we can get some movement, but it is not an easy matter, because of the range of farmers who are engaged, the number of applications and the quantum of the amounts at stake.

Litter Reduction

6. Alasdair Morgan (South of Scotland) (SNP): To ask the Scottish Executive whether it considers that adopt-a-road schemes could help to reduce litter. (S2O-8330)

The Minister for Environment and Rural Development (Ross Finnie): The Environmental Protection Act 1990 places a statutory duty on various bodies to keep roads clear of litter. The Scottish Executive is always interested to hear any suggestion on improving the environment and cutting down on litter. However, I should point out that an adopt-a-road scheme would have clear health and safety implications, which would need full consideration before any scheme could be adopted.

Alasdair Morgan: Litter on roads is clearly a problem. Many councils do their best to fulfil their statutory obligations, but they are fighting a losing battle and their efforts put a considerable burden on council tax payers. Schemes seem to be successful in some parts of other countries, notably the United States, where communities can be given incentives to adopt specific roads; there does not seem to be a safety problem in that jurisdiction. Does the minister believe that those activities could be encouraged in a more structured manner than they are at present?

Ross Finnie: As I said to the member in my opening answer, I am always keen to consider anything that might improve our environment or assist local communities to participate in litter collection. The central issue is that we have explicit health and safety requirements for any form of litter collection and would have to take that legislation into account when considering any scheme. I am happy to meet the member to see whether there is any way of taking the matter forward constructively.

Biofuel Crops

7. Nora Radcliffe (Gordon) (LD): To ask the Scottish Executive what support is available to farmers to encourage the production of crops for biofuels. (S2O-8361)

The Minister for Environment and Rural Development (Ross Finnie): Three schemes in Scotland provide aid for growing energy crops for

biofuels. Farmers can claim aid on industrial crops, including energy crops that are grown under contract on set-aside land. A flat-rate supplement of €45—around £30—per hectare can be claimed for crops that are grown under contract for energy purposes on other land. In addition, the Forestry Commission Scotland provides grant aid to farmers to establish short-rotation coppice—willow or poplar—as an energy crop under the Scottish forestry grants scheme.

Nora Radcliffe: Will the minister put resources into assisting the farming industry to develop and promote the business case for processing those crops and producing biofuel in Scotland—preferably in the north-east, which could be a main growing area for biofuel crops?

Ross Finnie: I am already in active discussion with a range of bodies to address both sides of the equation. First, the member alludes to the question of what the incentive is for Scottish farmers to grow crops for biofuels. The decision to grow such crops depends ultimately on whether a processing plant is available and—for both the farmers and the biofuel industry—whether it would be economically viable to do so in Scotland. The member will be aware of the Scottish Agricultural College report, which indicates that at present Scotland would have difficulty even in producing enough crops to make the activity viable. However, I am in active discussion with both the biofuel industry and the farming unions. The recent announcement at Westminster of a requirement for 5 per cent of motor fuel to be biofuel will, of course, help greatly in improving the market for the product and assist us in taking the matter forward in Scotland.

Alex Johnstone (North East Scotland) (Con): I am sure that the minister is aware that in certain areas there is impatience among farmers and potential investors to become involved in the production of biodiesel. Can the Executive reduce confusion by providing a formal gateway through which those who wish to invest in that can approach the Executive to seek support in the form of resources and guidance?

Ross Finnie: The matter is not only for me; we need to talk to the farming unions. There is impatience because there are indications that some of the crops might be more viable economically than some of the existing crops in rotation. However, we must be careful. Some of the prices that have been mentioned in the press recently are not prices at which current biodiesel producers would buy the crops, because at those prices it would not be competitive with other forms of fuel, such as animal residue. An issue both for us and for industry representatives is to produce guidance that would assist farmers to take such decisions in a more rational way.

The Deputy Presiding Officer (Trish Godman): Question 8 has been withdrawn.

Recycling (Local Authority Targets)

9. Christine May (Central Fife) (Lab): To ask the Scottish Executive which local authorities are successfully meeting their recycling targets. (S2O-8391)

The Minister for Environment and Rural Development (Ross Finnie): The Scottish Executive has set an all-Scotland target to recycle or compost 25 per cent of biodegradable municipal waste by 2006. No targets are laid down for individual local authorities in the national waste plan, but when strategic waste fund awards are made, authorities commit to achieving specific recycling targets.

Christine May: Will the minister join me in congratulating Fife Council which, due to an award from the Scottish Executive, has not only met but significantly exceeded its target? Will he also join me in recognising the achievements of Smith Anderson paper-makers in Leslie for its securecycle scheme? When he is next in Fife, will he join me in visiting some of those recycling projects? Can he confirm that the Executive continues to urge and assist local authorities to recycle and compost more of their municipal waste?

Ross Finnie: I confirm the last point. We have at present a target of 25 per cent for next year, but we have to raise the game and push towards 40 per cent. We will continue to support that. I am happy that Fife Council's recycling and composting rate, as reported in the Scottish Environment Protection Agency's most recent quarterly return is 34.3 per cent, which is highly commendable. I am pleased to acknowledge the contribution of Smith Anderson.

Obviously, each authority has different problems, conurbations and household circumstances, but every authority has to recognise the improvements that Fife has made. Every authority that I know is aiming not just to achieve 34.3 per cent but to go on to 40 per cent. Eventually, we have to adopt standards such as those in Bavaria, where recycling is at 71 per cent. That is challenging, but I am sure that we will get there.

Health Services (Argyll and Clyde)

The Presiding Officer (Mr George Reid): The next item of business is a debate on motion S2M-3684, in the name of Andy Kerr, on future arrangements for health services in Argyll and Clyde.

14:56

The Minister for Health and Community Care (Mr Andy Kerr): I have asked for parliamentary time to debate the Executive's proposal on the future arrangements for health care services in the Argyll and Clyde area. This follows my announcement on 19 May of the Executive's intention to dissolve Argyll and Clyde NHS Board and to consult on the boundaries of successor national health service boards. I also announced on 19 May that the Executive would provide up to £80 million to write off the accumulated deficit.

First, I make it clear that the decision to abolish NHS Argyll and Clyde was difficult. However, I felt that decisive action was required to safeguard safe and sustainable services for local people. I remain convinced that that was the right decision. Members will recall that I had been concerned for some time that the board's efforts to return to financial balance were not going to be successful. The Auditor General for Scotland's opinion, given in his report of October 2004, was that the board's cumulative deficit might reach as much as £100 million. I am sure that members agree that that would have been simply unacceptable.

I also recognised that there were underlying difficulties in planning and delivering modern health care services because of the complex geography of Argyll and Clyde. There are disparate demands for services in very rural Argyll and in urban Inverclyde and Renfrew, and there is a natural patient flow into Glasgow, which is why it was important to consult on our intention to alter Greater Glasgow NHS Board and Highland NHS Board. That public consultation afforded everyone the opportunity to have their say. The process was organised by the Health Department, and public meetings were chaired by an independent health commentator. The feedback that I have received on the conduct of the public meetings has been positive. An advisory group also influenced the process; it comprised representatives of various voluntary organisations, patient representatives, the Scottish Health Council, the Scottish Consumer Council and the three health boards.

The consultation included several key elements, including 16 public meetings across the area from Fort William to Inverclyde, 22 workshops with community and voluntary sector organisations,

and engagement with key local action groups. I was extremely pleased to hear that the public meetings were generally very well attended. It is clear that there is genuine interest in how local health services should be managed in the future. I also know that overwhelming support was expressed for the NHS staff who continue to provide high quality and highly valued health care services to the people of Argyll and Clyde. I take this opportunity to thank them.

The consultation focused on three options: option 1 proposed incorporating the Argyll and Bute Council area within NHS Highland and the rest of the Argyll and Clyde area within NHS Greater Glasgow; option 2 proposed incorporating most of the existing Argyll and Bute Council area in NHS Highland, with the exception of Helensburgh and Lochside, which would become part of NHS Greater Glasgow along with the rest of the Argyll and Clyde area; and option 3 proposed incorporating the northern part of the existing Argyll and Bute Council area into NHS Highland, with the rest of NHS Argyll and Clyde going to NHS Greater Glasgow.

From analysis of the consultation responses and from the views that were expressed at the public meetings, it became clear that there was little support for option 3, so I decided that it was not appropriate. Options 1 and 2 are very similar, the difference being that the Argyll and Bute Council area would remain complete and move to NHS Highland, or that the Helensburgh and Lochside area would be seen as a separate natural community whose health care planning and services would be better managed by NHS Greater Glasgow. In coming to my decision, my absolute priority has been to find a solution that will secure the right arrangements for coherent and integrated health care services for all the residents of Argyll and Clyde. To that end, I have thought long and hard about the merits of both remaining options.

During the public meetings throughout Argyll and Clyde, common concerns were expressed about access to local services and maintenance of current patient flows. People in Argyll and Bute were concerned that they would be disfranchised because of the management team of NHS Highland being located in Inverness. People from Renfrew and Inverclyde recognised that it makes sense for NHS Greater Glasgow to take responsibility for the planning and provision of their local services. However, some understandable concerns remained. Those were based largely on the fear that NHS Greater Glasgow would continue to concentrate its resources on the city, and that services in Inverclyde and Renfrewshire would therefore be marginalised. In response to that, I make it very clear to all those communities that the chair and

chief executive of NHS Greater Glasgow have assured me that planning and provision of services will be based on the needs of all its resident population in the newly enlarged organisation.

Murray Tosh (West of Scotland) (Con): I am sure that we all accept that Greater Glasgow NHS Board will indeed accept that as its duty. I do not, however, understand how the items in the first part of the minister's motion—on the dissolution of Argyll and Clyde NHS Board and its replacement—will address the board's structural and financial problems. Surely more than that must be necessary to address the problems. Will the minister address that in his speech?

Mr Kerr: I will come on to financial and planning matters later, but I point out that the deficit was accumulated over a number of years; that the matter relates to issues from some time ago as far as non-reconfiguration and change to services are concerned; and that the change will allow us more effectively to plan for the future around effective service provision.

The larger size of NHS Greater Glasgow will allow better use of the health care team—consultants, nurses, doctors and general practitioners with special interests—across the new area and will offer great potential. Similarly, in the Highlands, the coterminous boundary around Argyll and Bute will allow effective local care services to be delivered in partnership with the local council. That is integral to our view of the future. I will move on to the financial issues and some of the organisational aspects in a few moments.

The concentration of the more numerous and diverse workforce in the expanded Glasgow board area could offer additional opportunities to plan, provide and sustain more complex services closer to communities. That is not about the financial matter that Murray Tosh raised, but about service issues, which are my focus and the focus of others. Those services will be based in local hospitals such as the Inverclyde royal hospital and the Royal Alexandra hospital in Paisley.

People from Dumbarton and Helensburgh have been calling for increased access to services in Glasgow hospitals. There was concern about NHS Highland being experienced in delivering health services only in rural areas. Of course, NHS Highland deals with significant urban population centres such as Inverness, Oban and Fort William.

There was intense discussion about the opportunities that are offered by strong community health partnerships to plan, develop and deliver local services. It was refreshing to see during the consultation that communities are clearly up to date with health policy and see the CHPs as an

effective way forward. The work of the CHPs reflects local needs and circumstances—they offer a much improved prospect of better-integrated health and social care services.

On that basis, I concluded that option 1 was the best option because it will enable a single focus for planning and delivering local health care throughout Argyll and Bute. I explained the reasons for my decision to people from Argyll, Helensburgh and Lochside this morning. I have concluded that the principle of coterminosity is important for the development of an effective and well-resourced community health partnership, which people want. I have sought and gained a commitment from NHS Highland that the CHP will have fully devolved decision making, with a budget of about £100 million. It will be the focus for joint work on health and health improvement.

My decision does not mean that I have dismissed the views of the people of Helensburgh and Lochside.

Jim Mather (Highlands and Islands) (SNP)
rose—

Mr Kerr: I accept that a significant number of people registered support for option 2, and I am conscious of the concerns that they have expressed at the prospect of their area falling within NHS Highland. I refer Jim Mather to the following: I have received many letters, including one from a Helensburgh resident who wrote to me during the consultation in support of option 2. He argued that Argyll and Bute Council and NHS Highland are concerned largely with rural services and that Helensburgh is a densely populated urban area with strong links to Glasgow. He feared that if I endorsed option 1, people who had been receiving acute services from NHS Greater Glasgow would be forced to undertake a long and arduous journey elsewhere in the NHS Highland area for specialised services. My clear response to him and to all such concerned residents in Helensburgh and Lochside is that where patients choose to access services will not be altered by this announcement—they will still access their nearest GP or nearest appropriate hospital when they need to.

There has never been any suggestion that people in Helensburgh—or, for that matter, in Lochgilphead or Oban—would be required to travel to Inverness to access specialised acute services. The natural patient flows from those communities to Glasgow are recognised and will be respected. That said, I want NHS Highland and NHS Greater Glasgow to work together to respond to those local concerns.

Shona Robison (Dundee East) (SNP): Will the minister expand on that and explain how the

finances would work around the patient flows that he talks about?

Mr Kerr: Patient flows are nothing new to the health service; they happen every day, every hour and every minute. We are talking about the ability of the CHP to sit in the community with those strong coterminous boundaries and a professional core of staff. Given the work that the Executive is doing to encourage better management of patient flows, I am confident that they will be handled.

Patient flows happen just now in NHS Highland. Glasgow is a centre for Scotland in providing many of the services that we have all come to respect and rely on. There is no mystery or new thinking here. We are simply using our existing processes in respect of patient flow to ensure that the patient, who is at the heart of the matter, gets the choice so that patients from Helensburgh can get to Glasgow if that is what they want.

To reinforce that, I am placing a number of requirements on the boards in taking forward their new responsibilities. I am requiring NHS Greater Glasgow and NHS Highland to establish a joint locality planning group as a distinct arrangement within the Argyll and Bute CHP covering the population of Helensburgh and Lochside. We will thereby have an annual plan for the volume and range of acute services that are to be provided. That will include the related flow of patients and resources and, importantly, the extension of patient choice to access additional services in Glasgow hospitals. That will be set within an overall agreement between NHS Greater Glasgow and NHS Highland about joint working and about overall patient flows from throughout the former Argyll and Clyde Health Board area. I hope that that is reassuring to people in Helensburgh and Lochside, but we should also remember that, on access to services, more than 90 per cent of our lifetime health care needs will be sourced not in the specialised acute sector but locally.

A significant and increasing proportion of modern healthcare provision is dependent on effective partnership working between NHS boards and local authorities.

Mr Jamie McGrigor (Highlands and Islands) (Con): Will the minister take an intervention?

Mr Kerr: I must make progress.

I am convinced that the people's best interests will be served by option 1. The coterminosity that it offers presents the best opportunity for local services to be planned and provided most efficiently and effectively.

I will now address the key issue of financial allocations and budgets for NHS services in the Argyll and Clyde area. First, the Argyll and Clyde allocation will be split between the two successor

boards using the Arbutnott formula. The other key issue is how the task of achieving financial recovery will be taken forward by NHS Greater Glasgow and NHS Highland. It is clear that the Executive's decision to clear Argyll and Clyde NHS Board's accumulated deficit is absolutely central to enabling the enlarged boards to progress with a clean slate and a fresh start.

However, we are aware that there is at present a recurring financial deficit, because the outgoing board has allowed current expenditure to run ahead of current income. The task of returning to financial balance is tough; however, I am confident that NHS Greater Glasgow and NHS Highland will tackle that successfully.

I have been asked whether I will provide additional financial assistance through the transitional period to help the return to balance. Although I am not ruling that out, a number of vital issues need to be addressed first. The key requirement now is for the outgoing board and the two successor boards to work closely together to agree realistic financial plans for 2006-07 and 2007-08 that will secure the return to financial stability, which we need. We are prepared to consider the case for transitional financial assistance only once that planning task has been demonstrated to be complete and robust. The Health Department will assist the boards as much as possible in carrying out that task, but I must make it clear that any financial help beyond the £80 million that has already been pledged would have to be found from elsewhere in the health budget.

I believe that, by redrawing board boundaries, we will deliver more rational and effective planning of our services locally, as close to people's homes as possible and in line with my aspirations, as set out in "Delivering for Health".

I move,

That the Parliament supports the decisive action announced by the Scottish Executive on 19 May 2005 to dissolve Argyll and Clyde NHS Board and to redraw the boundaries of the neighbouring boards to take over its responsibilities from April 2006; believes that these steps will address the board's structural and financial problems; applauds the continued successful efforts of staff in NHS Argyll and Clyde to maintain comprehensive healthcare services for the people of the area; notes that a full public consultation has been held on the boundary option to be adopted, and supports NHS Highland and NHS Greater Glasgow in their task of returning services to financial balance while maintaining high standards of quality and access.

15:10

Shona Robison (Dundee East) (SNP): We need to pause to reflect on how we ended up in this situation and ask whether the Executive has learned lessons from its poor handling of the Argyll

and Clyde debacle. It was the Executive's inaction and its failure to direct the management of Argyll and Clyde NHS Board effectively prior to its reorganisation of December 2002 that ultimately resulted in the Executive's decision to propose the dissolution of the board almost two and a half years later.

Mr Kerr: The motivation behind the SNP amendment is interesting. In 2002, the Executive facilitated the investigation of partnership working and financial management in Argyll and Clyde NHS Board. That led to the resignation of the senior management team. That was active intervention.

Shona Robison: I am sure that the minister will be familiar with the report of the Audit Committee that was published earlier this year. It criticised the Executive, the lack of continuity among personnel representing the Health Department, the collective failure of the department and the board to agree a financial plan and so on. I am asking the minister whether lessons have been learned from that experience.

Mr Kerr: Yes, lessons have been learned about the issue of changing personalities. The member suggests that the lack of an agreement on a financial plan shows that we had some trouble with that financial plan, but it took so long to do that because we were trying to secure an effective financial plan, which takes time. Would Ms Robison just automatically have signed off the plan?

Shona Robison: No—we would have expected a lot of action to be taken earlier. Is the Audit Committee wrong in its findings? I do not think so. I want to know whether lessons have been learned because my fear is that we might end up in a situation in which other boards have financial difficulties. What monitoring is the Health Department doing to ensure that, in such cases, intervention takes place earlier? We cannot have another Argyll and Clyde.

As I said at the time of the minister's announcement in May, I believe that the decision that we have heard about today is the only one that could be made, in the light of the lack of public confidence that people in Argyll and Clyde had in the health board. The predicted deficit of between £80 million and £100 million could not be allowed to develop. It remains to be seen whether lessons have, as the minister says, been learned in relation to the serious questions that were asked about the role of the Health Department in the Audit Committee's report.

The Auditor General's report gives cause for concern: it states that health boards are predicting a funding gap of £183 million, and that several expect to overspend on their budgets. We need to

know that the Executive's new and improved procedures are robust enough when it comes to financial monitoring. As I said, we cannot have another Argyll and Clyde.

The minister must consider the underlying financial difficulties that are leading to some of the poor financial performances that have been outlined today. We know that health board chiefs have privately expressed concerns that, for example, the agreements that are being made at the centre are not being fully funded. We need an honest debate about that.

Mr Kerr: What agreements have been made at the centre without consultation of human resources managers and health boards? No deal is made at the centre without consultation of health boards.

Shona Robison: I know that there is consultation, but I tell the minister that senior managers in health boards are saying that pay deals are not being fully funded from the centre. They accept that more money is coming from the centre, but there is also more money going out, specifically for pay deals, which is why some financial difficulties have arisen. If that is not the case, how does the minister explain some of the financial difficulties that were highlighted by the Auditor General's report? He must explain: if the difficulties do not arise from the source that I suggest, where do they come from?

We know that chiefs from Argyll and Clyde would sit in meetings with the minister and his predecessor and say that their choice was either to get more money or to cut services. As I understand it, both options were refused. The Executive must have been well aware that the situation was becoming difficult in Argyll and Clyde and must accept a share of the responsibility.

Despite the difficulties—

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

Shona Robison: Very briefly.

Jackie Baillie: I made an offer to NHS Argyll and Clyde to go and argue with ministers that the board should have five years, rather than three, to achieve recovery. NHS Argyll and Clyde refused that offer, so the fault is the board's.

Shona Robison: Obviously, it was silly of the board to do that but, despite what the member says, we know that the board raised with ministers the concerns that I mentioned.

As the minister said, it is important to recognise the contribution that staff have made; they have kept services going in difficult circumstances. We know that morale can be a problem when there is uncertainty.

Of course, the most important people are the members of the public who depend on health services in Argyll and Clyde. They need to know not only that there will be an end to the uncertainty but, more important, that services will improve under the new arrangements. Today, the minister outlined the changes that will be made to the boundaries of Highland NHS Board and Greater Glasgow NHS Board to include Argyll and Clyde. There is a great deal of concern about the proposal among people who live in the Helensburgh area. More than 80 per cent of the people who responded to Helensburgh community council's consultation were in favour of option 2, under which the Helensburgh area would have become part of NHS Greater Glasgow. People in the area will no doubt feel that even though they have been consulted their views have been ignored.

People are concerned that decisions on their health care will be taken miles away. People whose health care will be affected by the boundary changes must be given cast-iron assurances that they will be able to access local services irrespective of where the health boards' boundaries lie. The minister has to do some convincing on that.

In the minister's statement in May, he said that the geography of Argyll and Clyde precluded effective management by a single health board. That might be true, but the geography is still the same and the same challenges now face NHS Greater Glasgow and NHS Highland. The writing off of the cumulative deficit is helpful and welcome, but the structural deficit remains a problem for the new chiefs to resolve. The minister said that they will get Argyll and Clyde's share of the money, but he also said that it is in effect up to them to manage the process. I urge the minister to be a bit more forthcoming with transitional finance assistance, because there will be difficulties. With the best will in the world, if NHS Argyll and Clyde could not manage to address the recurring deficit, it will be difficult for the new chiefs to do so and they will need assistance. I hope that the minister will come back at an early stage and tell us how that will be done.

I also ask the minister for a guarantee that he will formally review the sufficiency of the financial settlement and how services are working for patients a year after the new arrangements come into force. The public require that assurance.

We need to consider the best way to deliver health services throughout Scotland and to consider which structures work best. At the moment, we have a bit of a dog's breakfast with health boards of dramatically different sizes. Changes need to be made on a planned basis that

takes into account the Kerr report: crisis-driven restructuring must become a thing of the past.

I move amendment S2M-3684.2, to leave out from first “supports” to end and insert:

“regrets the failure of the Scottish Executive to direct effectively the management of Argyll and Clyde NHS Board prior to its reorganisation of December 2002 and the continuing lack of direction and support that resulted in the Executive’s decision to dissolve the board two years and five months later in May 2005 and to redraw the boundaries of the neighbouring boards to take over its responsibilities from April 2006; applauds the continued successful efforts of staff in NHS Argyll and Clyde during these difficult times to maintain comprehensive healthcare services for the people of the area; demands clear evidence that input from the public consultation on the boundary option to be adopted has been fully and objectively considered; supports NHS Highland and NHS Greater Glasgow in their task of returning services to financial balance while maintaining high standards of quality and access, and demands that the Executive provides these boards with adequate support and more effective leadership and direction that will assist them to address credibly the structural and financial problems in NHS Argyll and Clyde.”

15:18

Miss Annabel Goldie (West of Scotland) (Con): Presiding Officer, I apologise to you, the minister and Parliament for my late arrival. I am afraid that I had thought that the debate started at 3 o’clock.

With a projected financial deficit of £100 million by 2007-08, the previous administration of NHS Argyll and Clyde faced significant financial and managerial problems and the urban and rural mix of the area contributed to the board’s struggle. There is no dispute about that, but I have to say that we do not think that any of the options that were presented in the consultation would necessarily solve the problems.

I say at once that my party wishes to commend the staff and the clinicians of Argyll and Clyde for their hard work and their efforts to carry on providing services for the area against the backdrop of uncertainty for residents and the workforce. The current state of morale makes it all the more frustrating that the Executive has allowed a period of consultation without clarifying the specific structural, financial and management issues that lie at the heart of Argyll and Clyde’s problems, and without explaining in detail not only how the proposed changes would address those problems but what the future service plans of the successor boards will be.

On the consultation, we are primarily troubled about the absence of sufficiently robust information on the funding implications of each consultation option that was presented by the Executive. Given the fundamental importance of preserving confidence in the administration of health care in Argyll and Clyde, the Executive

should have extended the consultation until far more detailed information could be made available to the public to enable people to make a more informed choice from the options that were presented to them. Provision of information on the specific areas of failure and financial loss in Argyll and Clyde would have allowed the public to understand the extent to which better management in any option would contribute to financial and operational recovery.

There is no analysis or proposition in the Executive’s consultation to clarify how changing the budgets will eliminate the deficit. The consultation paper suggests that part of the deficit arises from the mixture of urban and rural areas, but it does not really strip away the role that such incompatibility plays as opposed to poor management. If the problem is caused by geography, then changing the boundaries will only solve it if the funding mechanisms change. In fact, today’s announcement is a geographical compromise; that is not a solution.

I understood the First Minister earlier to say—I might be paraphrasing him—that public services are not necessarily guaranteed improvement by changing boundaries. Perversely, that seems to be exactly what the Minister for Health and Community Care has put before us. It would have been appreciated if the consultation document had addressed the additional financial burdens that are projected for the short or long term for the prospective successor boards, and information concerning the specific sectors of Argyll and Clyde’s accounting that made a loss.

Those concerns have been made all the more relevant with today’s publication of the Audit Scotland report, “Overview of the performance of the NHS in Scotland 2004/05”, which highlights some of the great challenges that the national health service will face in the future. We have seen those challenges for ourselves at first hand—long waiting lists, unpopular moves to centralise services and problems in rolling out NHS 24 and with finding dentists.

It is interesting that the Audit Scotland report recommends a review and improved financial management and workforce planning, which needs to improve if NHS bodies are to manage their finances properly, respond effectively to cost pressures and provide a health service differently in the future. The report even goes on to say:

“The NHS in Scotland faces a significant challenge in meeting savings as part of the Efficient Government Initiative.”

In the face of all that, lack of analysis of problems in the consultation document is all the more significant. That is why my party is adamant that the consultation should be extended to ensure that that vital extra financial information is made

available to the public so as to better inform people's choices.

Having indicated our position, I will move on to highlight other concerns that the proposals have raised in the interim. At many of the consultation sessions, the recurring message was that some residents of Argyll and Bute felt that they were on the edge of the health systems of which they have been a part, and they perceive that their needs and priorities have not always taken centre stage for the NHS board.

On another front, community health partnerships are central to delivery of joined-up health and social care services. It is understandable that proposals for CHPs in Argyll and Clyde depend on the final consultation on dissolution of the board, but that might affect the development of CHPs in NHS Greater Glasgow and NHS Highland. It will be a close-run thing if all those community health partnerships are to be established by April 2006. I would be grateful for further information from the minister on progress on that.

Given that centralisation and reconfiguration of acute services within an expanded NHS Greater Glasgow would be decided at board level, cuts in the current vulnerable acute services in Argyll and Clyde might take place in the interests of a cost-cutting agenda for the Greater Glasgow NHS Board. There is a fear that any change in administration would present an opportunity to further centralise and downgrade acute services—it is vital that that does not happen. Mr Tosh rightly alluded to that threat in his question to the minister. No one doubts the sincerity of the intention of the chairman of the Greater Glasgow NHS Board; it is what the board might be compelled to do that is troubling.

Mr Kerr: As far as local services are concerned, the fact that NHS Greater Glasgow has committed to taking the integrated care model from a concept on a bit of paper to a pilot at the Vale of Leven hospital suggests that it is committed to providing effective care for the local community.

Miss Goldie: I concede that that level of intent provides a modicum of reassurance to that particular area. However, what about Inverclyde on the other side of the Clyde, where—I must say to the minister—very real concerns have been expressed about the continuation of acute care services?

What guarantees can be given that the public in Argyll and Clyde will not suffer further losses of service as a result of the agenda of managers who are driven by costs? I certainly want to know what specific changes will be made under each option to ensure that there is a stable environment for acute services in the Argyll and Clyde area.

No one underestimates the perplexing complexity or the gravity of the current situation. However, people in Argyll and Clyde strongly suspect that the heavy hand of Government and bureaucracy has been sterile in assisting better provision of health services in the area. Indeed, they want that hand to be lifted and they want far greater restoration of control to patients and their local clinicians.

I move amendment S2M-3684.4, to leave out from first "supports" to end and insert:

"applauds the efforts of all clinicians and staff in NHS Argyll and Clyde, at this unsettling time, to maintain the delivery of services; expresses profound concern about the inadequate nature of the consultation process concerning the future of NHS Argyll and Clyde; believes that the consultation paper lacked both a clear analysis of the structural and financial problems facing the existing NHS board and any robust information about the implications of revised NHS board areas for acute hospital services, which the public needs to make informed choices about the options presented, and therefore calls for the necessary analysis and information to be provided for the public as a matter of urgency and for the consultation to be reopened, in order that informed decisions can be made."

15:26

Frances Curran (West of Scotland) (SSP): The rather hasty decision to dissolve Argyll and Clyde NHS Board and the subsequent consultation did not address the central issues that led to a massive lack of confidence in the board. In about the second sentence of his speech, the minister said that the dissolution was undertaken for financial reasons, in particular the board's financial management and its deficit. At £80 million, that deficit is more than significant. I welcome the fact that the Scottish Executive will step in and address some of that deficit in order to maintain services.

However, tens of thousands of people did not, over the course of a year, come on to the streets to protest just because of a figure on a balance sheet. That activist protest was one of the biggest in the area for many years. Confidence was completely withdrawn from the board because it insisted on pushing through a clinical review that meant massive hospital closures and significant loss of services in the areas whose boundaries are being considered for change today.

The problem with the decision to dissolve the board and with the consultation is that neither course of action addresses the clinical review. The introduction to the consultation document made it absolutely clear that it was concerned only with redrawing lines on a map and that none of the decisions that the board, despite mass opposition, had already forced through in its clinical review would be revisited. Those issues would not be discussed. That consultation on the future of

health services in Argyll and Clyde was a travesty of democracy.

I agree with Annabel Goldie that the decision to dissolve the board and the subsequent consultation do not address the loss of services. At no point does the motion on these two major decisions indicate the future for Inverclyde royal hospital, Vale of Leven hospital and the mental health care services that have been lost.

Jackie Baillie: Is the member aware of the minister's announcement at question time that a pilot to develop integrated care will be introduced at the Vale of Leven hospital in January? Surely that will stabilise services at the hospital for the future.

Frances Curran: The minister did not address the question whether any more beds will be available. The pilot does not allow for the way in which services have been withdrawn, and does not mean that the Vale of Leven hospital will become a general hospital. After all, that is the very reason why people were holding hands around it last year.

People are none the wiser about what stabilisation means or what services will be provided at the Vale of Leven hospital over the next six months to a year. That is not clear, nor is it clear whether services will be at Paisley or at Glasgow. Those were the central issues. The document does not address issues such as consultant-led maternity services in Inverclyde. Why should we not revisit that point? The health board in Caithness revisited it, making exactly the same arguments that were made in the Argyll and Clyde clinical review. Those arguments were that the services were unsafe and that the royal colleges said that there were not enough births.

Guess what? Highland NHS Board has done a U-turn, and those arguments are now irrelevant because consultant-led services will be introduced there. The document does not address the issues that the people in Paisley face. The clinical review meant centralisation of services. What will we see? The people who live in Greenock and Paisley did not have a choice. From the outset of this consultation there was no question that the only option of all those that were put forward was that those areas would join Greater Glasgow NHS Board.

Given how things have gone already and the way that services tend to be delivered, I conclude that services will be centralised. Argyll and Clyde wanted to further centralise services to Paisley. Will the minister tell us whether this decision means that we will now see a further centralisation of services to Glasgow? That is the situation that we face.

Mr Kerr: Will the member give way?

Frances Curran: I want to ask another question about maternity services in Paisley, and I have only seconds left. There are huge implications for maternity services in Paisley. If the people in Greenock and the Vale of Leven elect to go to Glasgow, what are the implications for the Paisley maternity unit? The minister can take that up in his winding-up speech.

My final point is about staffing. If services are to be further centralised—which is what is happening across the whole of Scotland; I agree with Shona Robison about that—then we must ask about staff. They will also be centralised. If the recurring deficit is to be lowered or eliminated, and three quarters of the budget goes towards wages, that can only mean staff cuts. The staff are not clear about the implications for their continued contracts of employment and job provision where they work at the moment. The consultation addressed none of that, and until we have the answers and the people of Paisley and Greenock can make an informed choice about the services that they will be left with, we should not go ahead with this change. Local people feel that they do not have a voice. That came up repeatedly in the consultation meetings. The Executive is prepared at the stroke of a pen to dissolve a health board, but it is not prepared to allow the election of local people on to a health board so that they can have the services that they want.

I move amendment S2M-3684.3, to leave out from first "supports" to end and insert:

"believes that the Scottish Executive's decision to dissolve Argyll and Clyde NHS Board was hasty and the subsequent consultation document issued concerning the new boundary options for the services provided by NHS Argyll and Clyde was completely inadequate, lacking both financial information and possible impact assessment on service provision from a reallocation of resources to NHS Highland and NHS Greater Glasgow; further believes that no-one responding to the consultation could reach an informed view on these issues; therefore calls for this information to be placed in the public domain before any decision, which could have a major impact on jobs and services within the existing Argyll and Clyde NHS Board area, is taken by the Executive, and applauds the work of the existing staff to continue to provide healthcare services within NHS Argyll and Clyde despite the enormous uncertainty that they feel about their own employment."

15:33

Euan Robson (Roxburgh and Berwickshire) (LD): I am grateful for the minister's remarks on this important issue. His news release, and indeed, this debate, ends a period of consultation and inevitable speculation on future arrangements. The minister was right to dissolve the Argyll and Clyde NHS Board. He needed to act to bring stability and to secure health services for the public, and he did so decisively. On behalf of the Liberal Democrats, I would like to add my thanks

and appreciation to all health service staff, who have worked hard to maintain the quality of care and treatment for the public in what has clearly been an unsettling period.

I noted the points that several members and the minister made about the extent of consultation. There seems to have been effective public engagement. I do not know whether that means that all the questions were answered; I suspect that they were not. However, that is probably the nature of all consultations. I say to Annabel Goldie that it would have been unwise to have prolonged consultation to cover a whole gamut of financial issues because that would continue speculation and uncertainty and would probably have been counterproductive. However, that is not to say that there is not a lot of work yet to do on the financial arrangements for Greater Glasgow NHS Board, which has now been extended, and for Highland NHS Board.

We have supported option 1 in the consultation because it will ensure boundaries that are coterminous with those of local authorities. I come from an area in which there are coterminous boundaries and can testify to the advantages that result from them. My colleague George Lyon, who represents Argyll and Bute, strongly argued that the Argyll and Bute community health partnership area should be retained and should not be split across health board boundaries. That is an important point.

Murray Tosh: I wonder whether Mr Robson will clarify something else that Mr Lyon argued for—that, in effect, the Royal Alexandra hospital in Paisley should cease to be a major centre for acute hospital services and that Inverclyde royal hospital and the Southern general hospital should be developed as centres for medical treatment.

Euan Robson: I am not in a position to do that—Mr Lyon can clarify his remarks on that subject.

The problems that geography caused were one of the minister's key reasons for breaking up Argyll and Clyde NHS Board. Coping effectively with the different demands of, say, Paisley and Campbeltown was difficult for a board to do. There is local financial and management control in the newly merged Highland NHS Board area. It is important that the mistakes that were made in the past are not repeated. There must be an element of local control through the community health partnerships.

Synergy will result from merging Argyll and Bute and Highland, which face similar challenges, such as rural remoteness and delivering primary care over a wide area. I understand that there is strong local support in Argyll and Bute for going into Highland, provided that there are guarantees that

there will be local control. The minister said that £100 million of the budget would be devolved to the community health partnership, and we want to see that community health partnership being firmly established and delivering the necessary services.

Mr Stewart Maxwell (West of Scotland) (SNP):

The member said that he understands that there is a lot of support in the Argyll and Bute Council area for the transfer to Highland NHS Board. On what basis did he make that statement? I understand that a survey by the local community council showed 80 per cent support for going into Glasgow.

Euan Robson: I was alluding to the fact that public perceptions are considerably altered when patient flows are guaranteed—the minister mentioned that. I think that there was a view that there would be a bar of some description on people going to the hospital of their choice, but the minister made it clear that patient flows can continue across boundaries and into Glasgow. I come from an area in which we are familiar with patient flows across boundaries—a number of my constituents need to go to Edinburgh, for example, and we receive patients from across the national boundary with England. The point is that it is clear that the NHS can cope with patient flows in a number of areas, which is a positive thing. The minister's reassurance is helpful.

I am pleased that Sir John Arbuthnott supports the minister's decision. His intervention was helpful. I suppose that he would support his own formula for allocations between the two new boards. That is probably the right decision, given the context of the changes.

It is good that Greater Glasgow NHS Board has already started to work out arrangements with East Renfrewshire and West Dunbartonshire for establishing community health partnerships in those local authority areas. I urge similar engagement in Renfrewshire and Inverclyde.

There are savings to be obtained as a result of taking away Argyll and Clyde NHS Board's administrative structure. At one stage my constituency had two trusts and one board, and when they were merged into one, the surprisingly large sum of £500,000 per annum was available. Considerable progress could be made from that point of view.

I would like to make a final point on the issue of accumulated deficit. The minister found resources to write off up to £80 million and to allow a start from a new base, to use his own words. We have seen boards bailed out from time to time. However, there is a problem in that: there is a danger of sending the wrong message to boards that manage their affairs in the best possible way and stay in balance. We must be careful not to give the

impression that we are rewarding failure at the expense of success.

Other boards have difficult challenges to meet. The lesson of NHS Argyll and Clyde has to be that financial control is essential not only for its own sake, but for those who really matter: patients and the staff who care for them.

The Presiding Officer: We move to open debate. Time is tight, so members should make speeches of six minutes, with a little time for interventions.

15:41

Mr Duncan McNeil (Greenock and Inverclyde) (Lab): No one in my community is naive enough to believe that structures in themselves will solve all a community's problems. Moreover, they came to believe that structures were part of the problem. The minister's announcement in May that he was to put NHS Argyll and Clyde out of its misery was as welcome as it was inevitable.

The minister was left with little choice. Over several years and under a series of management regimes, the board attempted to force through a string of ill-conceived reorganisation plans, its books were in a mess and, more important, it had lost the trust of those it served. Abolishing the board and pledging to write off its accumulated £80 million debt has, therefore, been warmly welcomed in my constituency. That move will, as I said in my submission to the consultation, tackle the two issues that cause the most difficulty for health services in my constituency: geography and debt.

Geographically, it never made sense to have a health board that tried to balance the competing interests of remote and urban communities—it certainly does not now. Writing off the debt means, I hope, that the new board can start planning services with a clean slate and with nothing but the quality of patient care to consider.

What of the new board? The minister announced today that health services in my constituency will come under the management of NHS Greater Glasgow. That is to be welcomed for a number of reasons. First, if we are serious about reducing inequalities, tackling the pockets of appalling public health in urban west central communities such as my own must be our priority. NHS Greater Glasgow has expertise in doing that. Moving health services in Greenock and Inverclyde to NHS Greater Glasgow will allow a focus to be put squarely on tackling those persistent, serious health problems as well as the high incidence of premature death.

Secondly, moving services to NHS Greater Glasgow reflects what happens in practice: many

of my constituents who require highly specialised care have, for many years, received it in hospitals in Glasgow. Today's announcement also means that our health services will be provided by a board that boasts university-led acute services. It should not face the same recruitment and retention challenges that NHS Argyll and Clyde did. It follows that, with flexible working, that can allow acute services in Inverclyde access to a wider pool of clinical staff. In these days of reduced working hours, and royal college training requirements and guidelines, such a pool is essential to maintain near-patient local services. Furthermore, joining with NHS Greater Glasgow can deliver a strategic focus for the provision of services across all west central Scotland and make the best use of resources.

Although I have no wish to tread on the toes of members who represent other communities in the Argyll and Clyde area, I do have an interest in patient flows from outside my constituency. If the principle of patient choice is to remain—and people on the Cowal peninsula have made it clear that they wish to continue to have services delivered at Inverclyde royal hospital—we have to ask whether patient flows can be maintained. We would certainly hope so.

Notwithstanding all the benefits that I believe will come from this change, my constituents have certain expectations of NHS Greater Glasgow. There is an obvious need to create stability in local health services. For too long, it has been a question of what would go and what could stay. The future of Inverclyde royal hospital must be confirmed and alternative proposals to NHS Argyll and Clyde's discredited clinical strategy must be introduced as quickly as possible. Those alternatives must be acceptable to the community and to the clinicians. To achieve that, they must be consistent with the model proposed in the Kerr report. In other words, we must deliver services as locally as possible and as specialist as necessary.

15:46

Eleanor Scott (Highlands and Islands) (Green): I start by echoing Argyll and Bute Council's response to the minister's announcement today, which was a cautious welcome. I welcome an end to the period of uncertainty and I join others in commending the staff of NHS Argyll and Clyde, who have carried on providing a service throughout that period. I know from my experience in the NHS that nothing is worse for morale than uncertainty. It is because of the need to move on from that period of uncertainty that I feel unable to support the amendments in the names of Annabel Goldie and Frances Curran.

I tend to agree with Duncan McNeil that Argyll and Clyde NHS Board was a slightly odd administrative entity, although I would not have been calling for its abolition had it not been for the debt that it got into. I am grateful that the Executive has been able to write off that debt, but I am still concerned that the conditions that led to that debt may not have been fully looked into and got rid of.

On balance, I support the Executive's going for option 1, because coterminosity makes sense. There is a close working relationship between the NHS and local authorities and having the same boundaries makes delivering services a lot easier. I am reassured by the minister's words about patients still being able to go to the hospital of their choice. In some parts of the Argyll and Bute Council area, that will usually be in Glasgow. However, I would ask the minister to go a bit further. Should health professionals come across any little barriers, discouragements or difficulties preventing patients from going to the hospital of their choice, I ask that the minister act promptly to deal with those barriers. It should not happen, but I would like an assurance that, if it does, the barriers will be got rid of immediately.

NHS Highland deals with many issues that are similar to those dealt with by NHS Argyll and Clyde. There could therefore be quite a nice fit; in particular, there will be some synergy between the hospitals in Fort William and Oban. It is important that the addition of the Argyll and Bute area to the area covered by NHS Highland is positive. The debt has been a concern, as has funding—especially funding that takes into account the difficulty of providing health services in rural and island areas. The funding should be kept under constant review.

The recurring deficit will not disappear straight away and we will need a period of grace to allow us to manage the transition. Any need for additional funding should be considered sympathetically. It is likely that the new governance of the NHS in Argyll will have to make some changes to services. That would happen anyway; for clinical reasons, there will always be a need for redesign and reconfiguration. Unfortunately, that will always be regarded with a bit of suspicion and concern by the communities that are affected, so it will have to be handled sensitively. It certainly cannot be hurried into under a new regime. In order to take the people of Argyll with us, there may therefore be a need to move a little more slowly on things that would need to happen anyway.

A community health partnership will have many local and devolved powers but it will not be an autonomous unit and it will remain within the governance of Highland NHS Board. There is

therefore an opportunity for Highland NHS Board to go for more devolution within its structure. Areas such as Caithness or Skye might benefit from a new look at the way in which community health partnerships operate under the NHS Highland umbrella. There is a chance to create more local accountability, which—as has been said—must involve fully devolved decision making. I hope that that happens.

I have another concern, which the minister mentioned in response to Shona Robison rather than in the main body of his speech. It relates to the role that the Scottish Executive Health Department played in what has happened, which the Audit Committee's report identified as an issue. The report raised serious concerns about the Health Department's analysis of the Argyll and Clyde financial plan and recommended that the department should review

“the financial data submitted by Boards; and its own practices and capacity”.

That is crucial if we are to avoid another NHS Argyll and Clyde scenario. The accountability review process is another area that the department should look into. There are issues that face the department, as well as those that face individual health boards. I seek reassurance from the minister that such matters are being fully addressed.

I wish the new arrangements well and I hope that they are positive for Highland, for Argyll and for the rest of Argyll and Clyde. I have concentrated on what the proposals will mean for Highland, but there are many Clyde representatives here to say their bit. I support the minister's motion.

15:51

Jim Mather (Highlands and Islands) (SNP):

The proposals that we are discussing represent the Executive's second attempt to rectify matters at NHS Argyll and Clyde. As Shona Robison said earlier, it made its first attempt in December 2002, which was two years and five months before the minister's announcement to Parliament in May of the dissolution of NHS Argyll and Clyde—not three or four years previously, which is what he said when he made that announcement.

The action that the minister has taken is decisive, but it needs to be matched by leadership and ownership of the problems and public concerns. I welcome his assurance that that will happen; the SNP intends to hold him to that. The challenge that is faced is not just financial or managerial; it has other dimensions. There are clinical, social, familial and national and local economic aspects that must be addressed.

From talking to people across Argyll and Bute, Dunoon community council and action groups such as CATCHES—Cowal against the cuts in health services—that are worried about the health situation, I know that fundamental concerns persist, which must be addressed. There are still concerns about the consultation, for example. There is deep disappointment that few questions were answered factually, openly and completely. People feel that little feedback was provided on why the problems at NHS Argyll and Clyde arose. As Mr Tosh said, the motion makes only passing reference to structural problems. No in-depth analysis of the situation has been provided and, as Annabel Goldie said, no detailed financial information has been supplied. There has been no cross-referencing of the underlying problems to specific steps that will be taken to tackle them.

After years of centralisation, it is no wonder that there is residual fear about the services. There are worries about the economic impact of what has happened. Business investors might be frightened off and the retention of young people might be affected. The retention and continuing inward migration of older people might also be affected.

Rob Gibson (Highlands and Islands) (SNP): I believe that the crisis management that has led to the current situation is something that we are all concerned about. However, in the present crisis, there is a danger of a domino effect, whereby other small health boards, such as those that serve the Western Isles, Orkney or Shetland, could be sucked into bigger regional organisations. I hope that the member agrees that, if we want to keep the jobs that are vital to the economies of those places, that is not the way to plan their services.

Jim Mather: I certainly agree with that. The key benefit of the present process—which will take place in the Western Isles, just as it has taken place in Argyll and Clyde—is that people are now aware of the situation, auditing it, carrying out organisational work and considering long-term performance and the future implementation of the Kerr report. That organisational work is not being done only by individuals. Councillor Allan MacAskill of Argyll and Bute Council is contacting every community council to get their views and his council has produced a comprehensive package that advocates a better way forward.

In essence, there has been a reorganisation and a dissolution in the space of 29 months. In my book, that does not qualify as decisive leadership. The Executive's role is to go beyond that. We have yet to get a full definition of the fundamental problems that were experienced in Argyll and Clyde. We need to have a clear view about what will be different this time around and proof that the core problems are being addressed.

People's willingness to be involved in the process is total: the public is willing to be involved, as are the staff of NHS Argyll and Clyde, who have done a sterling job. Perhaps that willingness is best demonstrated in the concerns of the Royal College of Nursing. Its submission is that a fundamental improvement in the consultation mechanism is required. I put it to the minister that, surely, it is now time to have the meaningful involvement of all stakeholders in consultation and for consultation to be done with a degree of equity that was not there in the past. That should happen for consultation with staff, and even suppliers; certainly, it should happen for consultation with patients and communities. We need to see that publicly motivated involvement is happening as an on-going process, right down to the level of democratically elected boards.

Mr Kerr: I am interested in the member's point on meaningful involvement. Sixteen meetings were held; consultations were held; documents were issued; and websites were set up. There was also involvement of the public—I met with many different dimensions of the community. That is meaningful involvement, but it does not mean to say that we always agree. That is leadership, and that is what has been provided.

Jim Mather: I drive the minister back to what I was saying earlier. In my notes, I scored out the words "waste of time" and instead added the word "disappointment", but the message that I got was that the consultation was a waste of time. I agree that a good body of people came to the meetings and that they showed a lively interest in the proceedings, but they expressed very low satisfaction levels. They said that they had not been listened to or that they had not been given detailed answers. I strongly advocate that the minister should look at the RCN's concerns in some detail and that he should involve people. We need to move forward and that is the way ahead.

The people are on the case; they are the auditors and arbiters of what is right in this situation. People turned up to our meeting at the Queen's Hall in Dunoon and told us harrowing tales. One of them was a woman who was clearly still heartbroken as she sat in the hall and told us of her experience. Late at night, her husband had suffered a heart attack. For the lack of an ambulance and hospital care in Dunoon, he had to be taken to Inverclyde hospital in the back of their car. The idea that, in the early 21st century, people in our country have to leave an affluent part of the country, such as Cowal—which, if it were in the Potomac, Rhine or Hudson areas, would be a thriving place with its own hospital—to find a hospital elsewhere is unacceptable. Frankly, that makes them look like people exiting a Beirut war zone.

The standards that we want to achieve across Argyll and Bute are 21st century standards—the sort of standards that will allow us to grow our economy and attract more people to live in the area. Anything else is totally unacceptable.

15:57

Jackie Baillie (Dumbarton) (Lab): I start by acknowledging that the minister was absolutely right in deciding to scrap NHS Argyll and Clyde. For many of us who suffered the consequences of the board's failure to plan and manage services effectively, the robust action that he took is very welcome.

I recognise that the decision was not easy. However, when one considers the challenging geography of the area, the anticipated financial deficit of £80 million, which would have impacted on patient care, and the nonsense that was the board's clinical strategy, one starts to see the necessity for such drastic action.

I remind the chamber of the madness of NHS Argyll and Clyde's proposal for the delivery of services to my constituents. At times, it felt as if people were incidental to the board's planning—we really did not matter at all. People were told, "Just you travel for two and a half hours on public transport to get to the RAH in Paisley"—incidentally, they would bypass five Glasgow hospitals en route. However, it was not only the small number of people who needed to access specialist services who were told that; many people from my area were told to travel that distance to access basic services that should have been delivered in their local community.

I turn to the future. I am pleased that people from Dumbarton and the Vale of Leven will now be part of NHS Greater Glasgow. That not only makes sense but is a proposal that enjoys considerable local support. However, it will come as no surprise to the minister that I am deeply disappointed in his decision on the boundaries for Helensburgh and Lomond. Bluntly, I think that the minister is wrong, as do the overwhelming majority of my constituents.

It is worth noting that an interesting divide was generated in the responses to my consultation and that of the minister. The vested interests—namely the health board, general practitioners and local authorities—wanted option 1; boundaries mattered to them. However, when we asked the people—the ordinary folk who receive the service—they clearly wanted option 2; they wanted NHS Greater Glasgow, not NHS Highland. A staggering 80 per cent of people across the area favoured option 2, but when one delves down into the figures one can see that 90 per cent of people in Helensburgh itself and 94 per cent of people in the

Garelochhead area favoured that option. That view was supported by front-line staff, who provide the health care in our communities. However, the minister has heard all of that from me several times before, and although I still believe that he is wrong, nothing—but nothing—can be as bad as being part of NHS Argyll and Clyde.

Let me move on to a more fundamental issue of concern. In May 2005, the minister stood up in the chamber and said that the consultation was about protecting services for patients, not about boundaries. Well, hear, hear. I acknowledge that our debate about boundaries has perhaps been a proxy for our concerns about services, but in turn I want to know that he really means business about protecting services for patients. The essential prerequisites will, again, not come as a surprise to him. I have raised them many times before, not least when we met in Helensburgh this morning. I am grateful to him for listening and for applying his considerable talent to meeting those very concerns.

First, I asked specifically for the retention of the Helensburgh Victoria infirmary and the Jeannie Deans unit. There is no local provision that could currently substitute for those facilities, and NHS Argyll and Clyde, in its rush to implement its clinical strategy, intended to close them without adequate replacements. This morning, the minister promised their retention until we can provide and demonstrate something better locally, and I am grateful for that.

Secondly, and of equal importance, I asked for a clear commitment to making integrated care happen at the Vale of Leven hospital. So far, Andy Kerr and Professor David Kerr have been encouraging. Now is the time for action, not words. The Vale of Leven hospital must be sustained. NHS Greater Glasgow must support the model of integrated care that is being developed—I point out to Frances Curran that it will include in-patient beds. I am particularly grateful to the minister for having committed to a pilot on integrated care, which will stabilise services and deliver lessons from which all of Scotland can learn.

Thirdly, I asked for a written undertaking by both boards to be given to the minister and to the local community, covering patient flows, planning and finance. All of that is essential. We have had assurances before, and in the context of Argyll and Clyde they were found to be worthless. Because of that, the annual plan of the joint locality planning group should be sent to the minister for sign-off and not left to the boards. Our contract is clearly between the minister and the people in my constituency. This morning, he agreed with that.

Fourthly, we need to be clear about current and future patient flows. Current patient flows from

Helensburgh and Lomond come to the Vale of Leven and to NHS Greater Glasgow. Indeed, much of the patient flow from Argyll comes that way too, as my colleague Duncan McNeil has said. I therefore do not envisage that there will be any patient flow for secondary services to anywhere other than Glasgow. Effectively, that will be the default position. This morning, the minister agreed work to underpin that. Equally, I expect that the default position will be for patients from that area to travel not to the RAH in Paisley, but to Gartnavel and the Golden Jubilee, if the service cannot be provided at the Vale itself. The minister has told NHS Greater Glasgow to review Argyll and Clyde's clinical strategy, and it has promised the delivery of services north of the river from 2007. Again, I am grateful for that.

Finally, I shall put it simply to the minister. If he can deliver on all of that, with the resources to back it up, boundaries will indeed become a secondary consideration. At the end of the day, what we want are services—in Helensburgh, at the Victoria infirmary and the Jeannie Deans unit, and in the Vale of Leven hospital with integrated care. For special services I ask him, please, to give us Glasgow rather than Paisley, because we can actually get there. He has shown us before that he means business. He has shown leadership in tackling the problem. I ask him to keep doing so.

16:04

Murray Tosh (West of Scotland) (Con):

Nothing that I am going to say in this debate is in any sense motivated by party-political considerations. I start by saying that I hope that the minister has made the right decisions and that the decisions announced today will pave the way for work that will be done to stabilise health services in the Argyll and Clyde area and to address the budgetary problems. In approaching the debate, our concern is that there is no clear analysis of those problems and no clear narrative to show how the changes that are to be made will respond to that analysis.

For example, reference has been made to the point about the incompatibility of the rural and urban mix in Argyll and Clyde, with which the consultation document began. The manifest impact of that has been the differential funding pattern, in that, under the previous arrangements, rural areas in the Highlands had a higher capitation payment than rural areas in Argyll and Bute.

My colleague Mary Scanlon, who unfortunately will not be able to speak in the debate, has calculated that, as there are 91,000 people in the Argyll and Bute Council area and a current differential level in capitation of about £80, the transfer of those people to NHS Highland ought to

carry with it an additional financial bonus of just over £7 million. It would be helpful if the minister could confirm in his wind-up speech that NHS Highland will receive that allocation and that it will not suffer as a consequence of the decisions that are taken today.

I will focus my remarks on NHS Argyll and Clyde. It is difficult to get at exactly what the structural difficulties are and what is meant by the "bureaucratic boundaries" that the consultation document mentions, to which the minister attributes the financial problems.

In an intervention, I put to the minister the point that there is no clear indication of what the structural difficulties were. In his answer he instanced only what he called the failure to reconfigure services—I paraphrase, but I think that I do so accurately. I am not sure that that is a structural problem as opposed to a management problem. However, let us take that as the basis of the difficulties and agree that it is probably why NHS Argyll and Clyde has been bleeding some £30 million a year—the figure may have risen above that—and has been unable to redress the matter. I am curious about what will happen as a result of the changes that will allow those serious deficits, which must be addressed, to be disposed of.

The minister referred to better management of patient flows. It would be interesting to know what that means in relation to a cumulative deficit and a recurring deficit of £30 million. He also referred to economies of scale. That was a very interesting comment, which raises many wider issues about health boards and the future delivery of their services throughout Scotland. I would have hoped that it might have been possible—if not in the consultation, certainly now—to give an estimate of the economies of scale that might be achievable and to indicate whether those could conceivably close a £30 million gap.

Mr Robson referred to the likelihood that, through reorganisation, the NHS could economise in what we generally call back-of-house services. The NHS can economise in administrative support and back-up services, although costs and extreme management difficulties are faced in doing that. However, we have had no indication from the minister that such reorganisation is what the rearrangement is about, nor have we had a projection as to what target savings it might be reasonable to look for.

We have been told that the boundaries have been changed, that the changes do not affect service delivery and that service delivery is what matters. We believe that some management changes will follow and that the issues can be addressed. However, those changes have not been matched to the gap.

I wonder what more is involved in the reconfiguration of services that might dispose of the deficit. In all the briefings that many members have had over the years from the board, we were told that its clinical strategy review was driven by clinical considerations. There was a lot of argument about whether we believed that, but that is what the board always said. However, when the board explained the deficits to us, it always added that the deficits arose from the pattern of hospitals in the area: the four acute hospitals, plus the invisible fifth hospital that it used to talk about, which was the income transfer to Glasgow, not for specialist services but for elective services, for which people had gone to Glasgow.

What we all need to know, and what all the communities in Argyll and Clyde will want to know in the years to come, is whether the merger with Glasgow means a Glasgow solution, because we have been here before with Greater Glasgow NHS Board. I am not suggesting that the example of that board rationalising its seven hospitals to two—or two plus Gartnavel—is necessarily the blueprint, because I do not believe that there is any possibility that it could function without hospitals in Alexandria, Paisley and Greenock, but the key question is what services will be delivered in those hospitals. Communities will continue to have concerns about the possible centralisation and removal of services. It is important that we develop the integrated care model at the Vale of Leven, which I hope will work.

Duncan McNeil said that pooling Argyll and Clyde and Glasgow would provide the highest quality clinical staff and university-led services, end recruitment problems and give everybody in the expanded greater Glasgow area access to a pool of excellent consultants. I hope that he is right about that. My fear is that that is exactly what the Argyll and Clyde Health Board used to say when it was driving forward its clinical review strategy. It said that it would resolve all those problems by pooling the staff and pulling in patients.

We need to know that the new model will allow the delivery of consultant-led services at the existing hospitals and that we will not have a review by greater Glasgow that is, effectively, a replay of the centralisation that Argyll and Clyde offered. The jury is still out on that. I do not doubt the minister's good intentions, but an awful lot is riding on whether he is able to deliver what he has held out this afternoon.

16:11

Des McNulty (Clydebank and Milngavie) (Lab): I begin by commenting on the tenacity of my colleagues Jackie Baillie and Duncan McNeil in driving forward on behalf of their constituents a proper solution to the health needs of their area. I

also pay tribute to John Mullin and Neil Campbell of NHS Argyll and Clyde, who have done a good job under difficult circumstances over the past three or four years, and have tried to maintain services in the difficult situation that followed the minister's announcement of the dissolution of the board. Having made that decision, it is entirely appropriate that the minister does what he can to reduce uncertainty. I am pleased that he has reached a decision on the future boundaries, because now we can begin to plan for the consequences.

The vast majority of my constituency lies within the NHS Greater Glasgow area, while a small strip lies within the NHS Argyll and Clyde area; therefore, removing the boundaries will be beneficial. West Dunbartonshire Council, which has had to deal with two health boards over the past period, welcomes the coterminosity that will be established for its area. That will improve the interface between the local authority and the health board and help with the planning of services throughout West Dunbartonshire, which is to be welcomed. It will also inform the debate on how the community health partnership will operate in our area. The CHP will have an interesting role to play in taking issues forward. I am keen to work with Jackie Baillie, the council and the minister's officials to ensure that we get the best possible service delivery.

I have some concerns about funding, given the minister's announcement. I acknowledge that, in connection with the financial consequences of the current position, it is difficult for Professor Arbuthnott to argue against the formula that he put in place. However, following the finance of the patient flows leads me to estimate that the cost will be £4 million or £5 million more than the budget that we will get. In other words, NHS Greater Glasgow will get more patients than money, and there will be £5 million less in the budget to deal with them. I acknowledge that, because the debts have been written off, NHS Greater Glasgow is not inheriting the history of accumulating debt. However, given that the minister said that the task of returning to financial balance is tough, starting with minus £5 million is an unwelcome additional burden.

Jim Mather: Does Des McNulty have a handle—because I do not—on how the specific problems that led to the deficit will be identified and handled by the new amalgamated body?

Des McNulty: I will come on to that.

It is probably fair enough calculate the financial flows at around £4 million to £5 million. If Jackie Baillie is correct, and patients are voluntarily assigning themselves to Glasgow more than is suggested by the theoretical model, the actual adverse financial flow to Glasgow might be greater

than the figures that I advanced. The minister will need to address that issue.

I recognise the fact that the minister said that he is not ruling out providing financial assistance to the health boards during the transitional period. There is a particular issue for NHS Greater Glasgow, but we must consider the formula. I am concerned that, in addition to all the problems and issues that the board already has to address in its existing area, plus the additional management burden, which is partly an assimilation burden, it will also have to address the structural problems that have plagued Argyll and Clyde. There might be a lack of managerial focus, there might be an issue of capacity and there might also be an issue of funding. We need to point out those matters.

Picking up on a point that Jim Mather made, I should emphasise that, although there was criticism of Argyll and Clyde NHS Board in the Audit Committee's report, there was stronger criticism of the Health Department and the way in which it had been dealing with the continuing issues in Argyll and Clyde, particularly when it came to the failure to agree the clinical strategy, and perhaps also the failure to agree the proper steps required to address the matter effectively. The Health Department and NHS Greater Glasgow must engage in a clear debate on how the issues are to be addressed. It is not a question of simply deciding what the boundaries are and letting the board get on with it; a continuing debate needs to be had that must take into account not only finance but the way in which services can be delivered.

I have lobbied the minister on this matter in the past. A few weeks ago, he made an announcement about an anticipatory care model. I understand that there has been a broad allocation in relation to health board areas. I would like to lobby on behalf of Clydebanks and, if I may speak for my colleague Jackie Baillie, West Dunbartonshire. We would like to be considered as a pilot area for anticipatory care. There are health conditions that need to be addressed in our area, and we would be very pleased if we could get some recognition and support in that regard.

16:17

Dr Jean Turner (Strathkelvin and Bearsden)
(Ind): I thank you for letting me speak in the debate, Presiding Officer, as my constituency does not exactly have anything to do with Vale of Leven hospital. However, everything that happens within the Greater Glasgow NHS Board area has a knock-on effect somewhere. My constituents have certainly been anxious about what will happen to them when NHS Greater Glasgow takes on the extra workload.

Patient flows are an extremely important matter, and I am pleased and encouraged by what I have heard from the minister today. However, I am still worried by the decision. I cannot honestly see how all this will work. This is one big prayer and although I hope that it will work, I do not know where the moneys will come from. Sometimes, health boards do not get the cross-boundary moneys that they should get.

My constituents from places as far out as Lennoxtown might have to go to the north of the city. When the new Southern general hospital is built, there will be no general hospital between Hairmyres and the Southern general. Hairmyres hospital might not have an accident and emergency department, so the patient flows might change. People who we might think will go to one place could cross the river instead and go to Glasgow royal infirmary. People in my area are not awfully keen to go through the Clyde tunnel to the Southern general, for transport and other reasons.

When I lodged my motion on the matter, I thought that it was important that patient flows should remain as they have been, and that it was very important that the Vale of Leven hospital should be part of the integrated care model that general practitioners and consultants had put together. While all hell has been breaking loose, while the board and everyone else have been trying to make up their minds and while the doctors, patients and NHS staff have been in despair and wondering what on earth is going on, the doctors and nurses in and around the Vale of Leven hospital have managed to get a wonderful integrated care model up and running. I am pleased that there is to be a six-month pilot; I like to think that the care model could be permanent. I have heard rumours that NHS Greater Glasgow is not all that keen on it. I would rather that it was and I would like to see the idea spreading.

I ask the minister to bear certain things in mind. For example, acute services left the Vale of Leven hospital, but in the past few days the hospital has been accepting acute emergency admissions for the overburdened Royal Alexandra hospital. Doctors there have told me that orthopaedic and general surgeons love coming back to the theatres at the Vale of Leven hospital, because they do not have enough theatres in the Royal Alexandra hospital. The original idea was to send everybody across the river to the Royal Alexandra hospital, but apparently it is becoming overburdened. The same thing is happening in Glasgow royal infirmary.

I will make this brief, because Argyll and Clyde is not my area. My plea is for everybody to keep an open mind, to see what is happening on the ground and not to go ahead with an idea because

it was thought up goodness knows how many years ago and we have to make it work.

I have been reassured about Stobhill. I like to think that when the new Stobhill hospital is built, the general hospital will work side by side with it until we see how things go. I do not think that NHS Greater Glasgow has a clue how many hospital beds or theatres it will need and how the flows will go.

I would like the Vale of Leven hospital to be reassured that it will stay for as long as it is needed. The most important thing is that we do not have change for the sake of it. Patients want at least the same service as they have had, if not a better service, and they do not want to go all round the countryside to get it.

Please do not close down the Vale of Leven hospital, the Victoria infirmary or Stobhill until we see where we are going. There is no shame in holding back and reflecting, because it is the safety of patients and continuity of care that matter.

I have no idea how the change will work out for NHS Highland, despite its experience. I have grave doubts about how NHS Greater Glasgow will take on board the extra work. I wish everybody well; I sincerely hope that the change works for the staff, and that they will be reassured in the end, and that the patients know where they are going and where they can go safely. Considerable education and perhaps an advertising programme will be needed to reassure people not only in the area of Vale of Leven and Argyll and Clyde, but in greater Glasgow. Lots of people, north and south of the river, are extremely worried about how their health service is turning out.

16:23

Trish Godman (West Renfrewshire) (Lab): Although I had serious reservations about the decision to dissolve Argyll and Clyde NHS Board, I, like others here, have to accept the inevitable. I put on record the fact that the chairman, the board members and the officials have always been readily available and accessible to me as the local MSP and they have been prepared to listen to my complaints. I accept that, among other things, the Argyll and Clyde area is not a natural geographical area for one health board and that things had to change to allow better services to be provided. Most of what I wanted to say has been said by Jackie Baillie and Duncan McNeil, among others. As Des McNulty said, they have pursued the matter diligently.

I want to talk about practical issues that still worry me. Despite financial difficulties, there had been real achievements by the board, with the move to the single system and a reduction in

waiting times and delayed discharges. The targets were reached well in advance of the Executive's time goals. It is clear that staff have worked hard to achieve those goals. I want to be sure of job security for the staff and their continued potential for promotion. I need guarantees that they will not find themselves at the end of the queue when it comes to promotion.

Argyll and Clyde has brought down its waiting lists. I would welcome the minister's comments about where my constituents will be placed on the lists when they are combined with Glasgow's lists. I accept that a clinical decision is paramount, but I do not want my constituents to be pushed down the list because they come from outwith Glasgow. For example, I do not want someone who knows that only one bed is available simply to give it to the person who lives nearest. Those issues have to be addressed.

We face a different future. A shift to a network that is dominated by Glasgow means that we have to have a copper-bottomed guarantee that the NHS services in Renfrewshire and Inverclyde do not suffer from being on the periphery of the new set-up. Although this change can be seen as an opportunity to redesign services, the issues of where they are delivered, how they are delivered and who they are delivered by must be central to our decisions if we are to assure constituents that services are safe and sustainable.

The Kerr report made clear the distinction between specialist treatment and procedures and sustainable, safe services delivered locally. Regarding the change, I must be sure that there is a guarantee that local does not mean Glasgow. For people who live in Port Glasgow, Lochwinnoch, Kilmacolm and Bridge of Weir, Glasgow is not local. Local services for people in those places should be continued in Inverclyde and Renfrewshire.

Patients who expect to travel to get specialist hospital treatment do not care how far they have to travel as long as they get the best treatment. However, what further impact will the changes have on such patients and their families if they have to travel even further for that treatment? Are there any plans, for example, to help with travel expenses? My experience of this area is bad but, if such plans are in place, I suggest that the system by which expenses are claimed needs to be much less complicated than the present one.

We must ensure that the representatives of the board from the Argyll and Clyde area are tough minded, practical, sensible and active. I do not want time servers on the board; I want representatives who will fight their corner in order to ensure that their area gets the best possible services. The communities that I represent must

not be marginalised or overlooked as a result of the decision.

The minister has stated that the changes are about not bureaucracy, boundaries and borders, but people and services. This is a fresh start and a clean slate. I want patients to feel secure in the knowledge that there will be security in services and that those services will be delivered locally where that is appropriate. Most of all, I want them to feel confident that we have made the right decision today.

16:27

Frances Curran: In the short time that I have, I would like to say that the debate has been revealing. The minister said that the Executive had ensured that there was meaningful involvement. He also said that there had been consultation, although many of us in the chamber did not believe that. However, in those consultations, the minister specifically ruled out discussion of the clinical review of Argyll and Clyde. The Executive said that that would stand and would not be discussed. Loads of things were said about the clinical review in the meetings, but they were not put on record because the consultation specifically ruled out a discussion of the clinical review. However, Jackie Baillie got up in the chamber today and revealed that, as a result of private conversations with the minister, there will be a moratorium in relation to the Jeannie Deans unit and the Victoria infirmary in Helensburgh, there will be an integrated bed service—

Mr Kerr: There were no private discussions. The discussions took place in front of the community councillors and the very people who were actively involved in the consultation. They found out my views because they asked me questions. Does the member suggest that I do not tell the public what I think?

Frances Curran: How can the minister guarantee that? We wanted to discuss many things, but Jackie Baillie gets a guarantee and an agreement. Lots of other people would have liked to have an agreement on service transfer and service retention in the clinical review, but we did not get the opportunity to have that discussion. The arguments against the proposal were clinical and were contained in the clinical review, which the minister signed off, based on clinical arguments from Argyll and Clyde. We lobbied on the issue but, all of a sudden, we find that those clinical arguments no longer hold. That is extremely revealing.

Secondly, how can the minister guarantee that that is the situation? How can he guarantee that the integrated pilot at the Vale of Leven hospital will continue or that units such as the Jeannie

Deans unit will continue to open? I thought that that was supposed to be part of the clinical review of Greater Glasgow NHS Board. How on earth is the minister involved in that decision making if he has already signed it off?

How many other discussions have taken place about parts of the clinical review that are guaranteed to change? As Murray Tosh said, the minister asked Greater Glasgow NHS Board to review the clinical review, but we were not allowed to discuss it in the consultation. Is that not Greater Glasgow NHS Board's decision among the much wider measure of the services that we are going to have? Will Duncan McNeil get a guarantee that Inverclyde royal hospital in Greenock will remain an acute general hospital? He made that request today, but he has not got any agreement on that and that was a huge part of the clinical review.

What about the people of Paisley? What will be the impact on them? They live the nearest to the rest of the Glasgow hospitals. What will be the impact of the decision on their acute general hospital? The big fear, which Murray Tosh mentioned, is that there will be centralisation of services as a result of the changes. People in Paisley live only 10 minutes away from the Southern general hospital and other health care services. Ordinary people have not had the opportunity to comment and it is not clear from the consultation how a requirement for local voices to be heard will be built in. Nobody is convinced that the community health partnerships will do that. In addition, they will not make the decisions. The board will still do that.

There is genuine fear that services in Argyll and Clyde and representation from those areas will be swallowed up in the big Glasgow pond. That fear came up in the consultation meetings. The minister has not given us an answer on how people in Helensburgh, Greenock, Paisley and Renfrew will have a voice in the reconfigured Greater Glasgow NHS Board. That is the biggest fear. The minister shakes his head, but we will see what happens with the clinical review. We will see what proposals there are for the centralisation of services as a result of the changes.

I agree that change happens for a reason. I am in favour of change and of integrated care. I was in favour of the model that NHS Argyll and Clyde proposed, whereby people would get access to services as near as possible to where they live and would not have to travel for miles. We should go for that model, but we should test it first and convince people that it works, then they may let go of the other services. The problem here was that acute services were ending with a pilot that nobody knew would work. People are still concerned.

16:33

Euan Robson: It has been a good debate and I listened to it with interest. I reiterate our conclusion that the minister made the right decision. As Duncan McNeil and Jackie Baillie said, the minister probably had little choice but to act and the fact that he did so is greatly to his credit.

To all intents and purposes, the decision about the boundaries has been made. There are certain key requirements that must be met. Perhaps Jackie Baillie put it best when she said that it is now all about services and not about boundaries. The minister gave several welcome assurances during his opening remarks. The key assurance that he gave patients and doctors is about allowing patient flows across the boundaries. He might care to reiterate that reassurance in his closing speech, because it is particularly important.

We heard that the review of the clinical strategy of Argyll and Clyde was essential and that there were deficiencies in what the soon-to-be-dissolved board had set out. Clearly, the successor boards will need to take on the work that was in hand and draw conclusions.

The minister will need to ensure that there is effective engagement between his department, NHS staff and patients.

Does the minister have any specific arrangements in mind to ensure that his department monitors developments? For example, does he intend specifically to review progress after a year? How does he intend to monitor what is going on? How does he then intend to report back to Parliament? How does he intend to keep track of the commitments that were made today and of the developing picture around the finances of the newly configured boards?

Murray Tosh: Mr Robson might also ask the minister whether he might expand on the transitional funding that he indicated might be available to ease the changes through.

Euan Robson: Mr Tosh is sitting close to me; he must have read my notes, because I am just about to come to that point.

In an earlier debate on the Kerr report, I said that the minister should retain some financial flexibility in his budgets to help cope with the changes that arise when services are modernised. I said that in the context of the Kerr report, because there are difficulties ahead for some smaller boards that might have to take difficult decisions and find extra resources. The minister nodded at the time, and I welcomed that because a case can be made for ensuring that there is some flexibility. In the context of this debate, the minister might need in due course to invest to allow the transition to the new arrangements.

However, that will come about only if the minister monitors closely how the situation develops.

Mr McGrigor: Does the member agree with the minister's choice of option 1, or does he go along with his colleague George Lyon, who said that he backed option 1 but then said that he would not reject option 2, and finally said that option 3 might be the way forward? Admittedly, that was his second shot at the question. Does the member agree with George Lyon or the minister?

Euan Robson: I have tried to explain to Mr McGrigor that if there are three options, they are all possibilities. The key thing is that Mr Lyon is in favour, as are the Liberal Democrats, of option 1. I made that absolutely plain at the start.

There is an important point around the development of community health partnerships. I referred earlier to Greater Glasgow NHS Board's intention to engage with local authorities, which is very welcome. The board has made good progress with two of those local authorities and its intentions for dealing with the others are excellent.

I welcome the assurance in the minister's press release that the Argyll and Bute community health partnership will be given maximum scope to take decisions locally and that it will receive the necessary support from the boards to do so.

The local planning group that has been established for the Helensburgh and Lochside area is important and I hope that it will give residents a structured opportunity to make an input into the planning of hospital and other services in greater Glasgow.

This has been a very difficult period for health services in the west of Scotland. I reiterate that the staff have done immensely well in coping with a difficult and unsettling period. I wish those who are creating the new structures every success in so doing.

16:39

Mr Jamie McGrigor (Highlands and Islands (Con): I start by thanking the minister, Andy Kerr, for responding to me directly about my letter that was published in the Argyll and Helensburgh newspapers. I am delighted to know that he reads the *Argyllshire Advertiser*. Unfortunately, he did not answer my question about where the £60 million—or is it now £80 million—has disappeared to.

In the past two and a half years since the debate on the Argyll and Clyde health service problems began, I have attended and spoken at health meetings in Oban, Dunoon, Campbeltown, Helensburgh and the Vale of Leven. I remember the west Highland project, which was produced by students from Birmingham, and which told us that

the status quo is not an option. That provoked such an outcry from those dependent on the hospitals in Oban and Fort William who feared losing their core acute services that the approach was dumped in favour of the Lib-Lab solutions group's wishy-washy compromise that broadly supported the status quo.

Not surprisingly, nothing came of that. In any case, it was overrun by the report by Professor David Kerr, which pronounced—correctly, in my view—that local hospitals should supply core services. In that time, Argyll and Clyde NHS Board lost £60 million.

If the people are being asked to make up their minds about options, they should be told what caused the debt in the first place. How did the overspend occur? What items went over budget? The minister has referred to structural problems affecting Argyll and Clyde, but he has not explained what they are. In his letter dated 5 December, he says that resources are allocated to all NHS boards on the same basis. In that case, and given that there were structural problems, why was less money allocated per head in Argyll and Clyde than in NHS Greater Glasgow or NHS Highland? Was that a main factor in the overspend? Did the urban percentage of Argyll and Clyde stop the rural upgrade from kicking in and/or did the rural percentage stop the urban upgrade from kicking in? In other words, did the Arbutnott formula come up with the wrong answer for Argyll and Clyde, despite the minister's refusal to accept that it might have been flawed?

At a recent meeting in Oban that was attended by about 300 people, including a representative from the Executive and another from NHS Scotland, the audience was told that a recording of the meeting would be sent to the Minister for Health and Community Care and that answers to all the questions would be in the public domain. Will the minister now tell us where the £80 million went? It could have been used to build three or four hospitals or to do wonders for community care.

In his letter, the minister also talks about the geography of Argyll and its mix of urban and rural communities with their very different challenges. I can tell him that Campbeltown depends on its own hospital, whose rehabilitation unit has been cut, and, for specialisation, on hospitals in Glasgow and Paisley. Because Dunoon's local hospital has been much downgraded, it relies heavily on Inverclyde. North Argyll and some of Argyll's 26 inhabited islands depend on Lorne and the Isles hospital in Oban, the Vale of Leven hospital and other hospitals in Glasgow and Paisley. The psychiatric hospital in Lochgilphead is extremely important; Helensburgh depends on the Victoria infirmary, including the Jeannie Deans unit; and

for the people of Helensburgh and Lomond, keeping an integrated care model up and running at the Vale of Leven is an absolute must. At this point, I congratulate Jackie Baillie on making a rather brave speech about the people of Helensburgh and Lomond.

The situation is not that complicated and should fit in with the findings of the Kerr report, which highlights the importance of keeping core services local. Does the minister know, for instance, that Oban hospital recently had 1,200 applicants for four junior doctor posts? Who says that rural hospitals cannot attract doctors?

The minister has chosen option 1—I have already mentioned George Lyon's choices—but he now has to convince the huge majority of people in Helensburgh and Lomond who wanted option 2 that they will not have to go to Raigmore hospital in Inverness and that NHS Highland will have enough money to buy services from NHS Greater Glasgow. In the past, NHS Argyll and Clyde received about £80 less a head than NHS Highland, and changing that situation is vital. Will such a change happen with the merger with NHS Highland?

The north Clyde group said:

"it is critically important for health services in Lomond that we do not again make the mistake of drawing boundaries on maps that are without adequate regard for natural community, direct lines of responsibility, local knowledge, and the facts of geography and transport."

Given that, I hope that the minister listened to the people at this morning's meeting in Helensburgh, which I have to say was called at remarkably short notice. It has been recognised that local services should not be taken away to service the needs of centralised specialisation. On that point, the Kerr report is helpful.

It takes a special kind of incompetence to spend billions more in the NHS only to preside over a significant increase in waiting lists and times and still not know where the £80 million has gone. Will the minister please apologise to the people of Scotland for the loss of their money; to the people of Argyll and Bute for the anxiety that they have suffered over the past two and a half years; and to the doctors and nurses in the Argyll and Clyde area who have somehow kept services running despite appalling executive management?

16:45

Mr Stewart Maxwell (West of Scotland) (SNP):

The debate has been interesting, and it was worth having at this time, given the radical changes that are occurring. As many members know, the Argyll and Clyde NHS Board area ranges from dense urban areas such as Dumbarton, Paisley and Greenock, to remote, rural areas, including a

clutch of west coast islands. The area covers nearly 3,000 square miles of territory and both sides of the Clyde, with a population of approximately 420,000. Unfortunately, almost 50 per cent of that population is in deprivation quintiles 4 and 5, which is nearly 10 per cent higher than the Scottish average. That clearly had something to do with the problems.

On many occasions, the Executive has claimed that geography was the problem. However, the geography has not changed. The Clyde did not suddenly appear last year, the islands did not suddenly pop out of the sea six months ago and Paisley did not suddenly appear last Tuesday. The geography has always been there. The core problem was the failure to plan to deal with geography. In May, the minister said:

"It is apparent that the geography of the NHS Argyll and Clyde area is simply not a natural area for a single health board."

Duncan McNeil said earlier in the debate—and I hope that I quote him correctly—that "it never made sense". If it was so obvious that Argyll and Clyde NHS Board should not exist, who was daft enough to create it in the first place? Perhaps it was those evil Tories, back in the dark days. Funnily enough, it was not the Tories—the Labour Government set up Argyll and Clyde NHS Board in 1999. The Labour Government set it up, failed to invest in it and failed to see the geography that is now apparently so obvious to us all. It could never exist and should never have existed as a single health board. As I said, the geography has not changed, so the structural funding problem remains. The minister has not addressed the structural deficit and has failed to guarantee funding that will deal with the issue. He has said that he has an open mind on transitional funding. I hope that in his closing remarks he will say how the structural deficit will be dealt with if there is not to be at least transitional funding over the next while.

Why choose option 1 if all patients from north of the river go to Glasgow? That makes little sense, and I know that Jackie Baillie perhaps shares that view. Her point about patients being forced to go to Paisley is correct. Therefore, can we have faith that there will not be similar pressures under the new structures? The Executive's decision to abolish Argyll and Clyde NHS Board was nothing more than a panic measure. Others have called it crisis management. I agree that it had to go, but unfortunately, the change should have happened on the basis of forward planning and strategic thinking, not crisis management. It was made in isolation; it was not part of a wider plan for health boards. There was no advanced research on its likely impact on patients, staff or adjoining health boards. There was no attempt to address the real problems that Argyll and Clyde face. We go back

to the flawed funding mechanism, which was there from the start.

In May, the Minister for Health and Community Care said:

"What matters most to me is protecting services for patients. It's not about boundaries".

He then went on to launch a consultation exercise that is about nothing but boundaries. The consultation was not about the many problems that Argyll and Clyde face, such as deprivation, rurality and funding, and it did not address the possible outcomes of the decision to abolish.

Jackie Baillie: Does the member recognise that we have heard a whole series of commitments to service provision north of the river? I hope that he can find it in his heart to welcome that as a positive step.

Mr Maxwell: Some commitments have been made on service delivery. However, there was nothing in the consultation document; there is nothing in anything that has been published today; there is no detail; and there is no evidence of outcomes or of the structural funding problems being dealt with. I welcome any statement that the minister may wish to make. Let us get some detail so that we can consider the matter properly.

The consultation did not deal with the impact on the future plans of the surrounding health boards, which is obviously extremely important. The consultation was just about boundaries.

One of the respondents to the consultation summed the position up quite well. Dr Bell said:

"by limiting the scope of the consultation to where the new boundaries should be drawn, a real opportunity to try ... new ways of providing Health and Social Care, which, with imagination and political courage, could have been discussed, has been excluded from comment".

The consultation was very narrow.

It is clear that the consultation was completely inadequate. It did not ask people what they really wanted; instead, it provided only three possible options on boundaries from which people could select. I say to the minister that no analysis of those responses has been made available on the Executive's website. Why has analysis of the responses not been provided? Perhaps they were too embarrassing.

There were around 400 responses from individuals. In the time that was available to me, I managed to sample 250 of them. Option 1 received 45 positive responses; option 2 received 57 positive responses; option 3 received 25 positive responses; and the none of the above option received 123 positive responses. In the sample that I considered, 50 per cent of the people who responded could not express a preference. Many of them expressed

dissatisfaction with the consultation process and because all the options from which they had to choose were unsatisfactory.

I will quote various people who submitted responses. One said:

"Having studied the consultation paper and having attended several meetings ... I still feel that we have not been given sufficient information on which to base a positive decision".

Another person said:

"Having considered the evidence I would support the formation of an Argyll and Bute Health Board".

Many people said that, although it was dismissed as a possible option. Another person said:

"I do not accept the broad brush reasons given for rejecting options 10.3 and 10.4".

Even the 50 per cent of people who expressed a preference were unhappy with the consultation process. People who expressed a preference often did so grudgingly and with deep reservations. For example, one person said:

"Option 1 seems the best of a bad bunch".

Somebody else said:

"If I had to pick any of the options it would be no 3 though this is far from satisfactory".

Somebody else said:

"option 1 is the best of a bad lot".

The consultation failed. Many people expressed a negative preference during the consultation process and said that they could not choose between options 2 and 3, but that they definitely did not want option 1. How can the minister make decisions on the basis of such a consultation? Why was there no proper analysis that gave details of the responses on the Executive's website?

We all hope that the new set-up will work because people in the Argyll and Clyde NHS Board area deserve a first-class, locally accessible service, but the consultation exercise was not carried out properly and the minister must still explain how he will deal with the underlying problems in the area.

16:52

Mr Kerr: Trying to deal with all the points that have been made is a difficult task. However, on the point about the analysis of responses, there will be an analysis today on the website that we set up for the process.

This is an important debate. Various views have been given from around the chamber, but I still think that the Executive's decision on boundaries was right.

I will run through some of the big issues. Last May, I said that the Health Department had a role, a responsibility and culpability in respect of the matters that we are discussing. I have made it clear to the Health Committee that we have changed the way in which we work. We have put in place clear escalation procedures for intervening, which have been shared with the committee; we have moved from frequent reporting and we have put in place support teams, management change and board change, which, of course, we have found to be necessary in this case.

I am sure that members are aware of many other matters relating to the Executive's Health Department. I refer to the delivery unit, our focus on and review of data, data management and management reporting in the organisation. However, we are not micromanaging every board in Scotland from the Health Department—that is at the heart of the matter. Boards must take responsibility for decisions and ensure that they carry out the extremely difficult task of coming in on budget.

I want to deal with a point that many members—particularly Duncan McNeil—made. The chief executive of Greater Glasgow NHS Board has made it absolutely clear that the much larger number of staff—especially doctors—in the bigger board area makes possible consideration of a wider range of acute service options. Of course, it is too soon to talk about the outcomes of such consideration, but I strongly believe that there will be new opportunities and possibilities for services in the area. As I said during the debate in May, I think that the futures of the Royal Alexandra hospital and Inverclyde royal hospital are better protected, safer and more secure and that services will be more local and diverse as a result of our decisions.

I thought that Frances Curran's speech was barely based on reality. The decision in question was not hasty—it hung about for too long. It was difficult for staff to read constantly about a crisis-ridden, debt-ridden board whose future was in doubt. We have made a decision and we should now look forward and ensure that we deliver better services in the area. There are clear partnership arrangements for staff. The organisational change policy in the Executive and in the health service in Scotland is second to none with regard to protecting the staff whom we value so dearly.

Euan Robson talked about having to make tough decisions. He is right: they were tough decisions, which were made as a result of the consultation. I did more than just read bits of paper, which is what some members suggested. I have met the communities and the community councils; they have come to see me in Edinburgh

and I have been to see them. I have looked them in the eye and discussed my proposals for the health service and listened to theirs. I have given them the reassurances that they wanted on local services in places such as the Vale of Leven hospital, the Jeannie Deans unit, the Helensburgh Victoria hospital and on issues such as patient flow. I have assured them that I will sign off the patient flow arrangement and will look to ensure that it is protected. That burden and responsibility will rest with health ministers in the future.

Duncan McNeil made a passionate point about inequality and deprivation. Let us lift our horizons a wee bit higher. Let us look at what the World Health Organisation said about the NHS in Scotland and about the Executive's health policy. It says that we are at the cutting edge of the health improvement agenda in Europe—indeed, in the world. That is why Erio Ziglio of the WHO is in Scotland to learn about what we are doing so that he can take our message on health improvement all round Europe.

We are improving Scotland's health, starting in the nurseries and in our schools, through the hungry for success campaign and by supporting our communities. It is happening and it will continue to happen. Duncan McNeil mentioned the IRH, and I see an opportunity to extend services in it.

Eleanor Scott raised similar issues. One of the barriers that we need to remove concerns support services in the NHS. I hear too much about bureaucrats and managers. Information technology professionals allow us to localise our NHS care—the very people whom some members want sacked and put out of the way. Managers, IT consultants and support staff will make changes to the health service possible. People should stop slagging them off, get behind them and make the change happen.

Mr McGrigor *rose—*

Shona Robison: Will the minister take an intervention?

Mr Kerr: No, thank you.

Eleanor Scott raised the issue of barriers to patients and clinicians exercising choice—*[Interruption.]*

The Presiding Officer: Order. There is too much noise.

Mr Kerr: I expect NHS Highland and NHS Greater Glasgow to respect that choice and I made that clear this morning and have done so throughout the debate.

Jim Mather was very selective in quoting the RCN. In the quotes that I have, the RCN welcomes my assurance that the changes that

have been announced today will not affect where patients access health care and goes on to explain and support many of the issues that we have discussed today.

Jackie Baillie is absolutely right to say that she thinks I am wrong. I accept her point of view; it is a reasonable one. Nevertheless, I think that I am right, and I think that I was able to reassure the Lochside communities about many of their concerns about Helensburgh Victoria hospital and the Jeannie Deans unit. I gave them my personal assurance, which they wanted and which I was happy to give, about—

Mary Scanlon (Highlands and Islands) (Con) *rose—*

Mr Kerr: I am coming to the money in a moment.

I am more than happy to reassure those communities.

In summing up the debate—which is what I thought I was supposed to be doing, although some members did not respect that protocol—I want to address the issue that Murray Tosh raised and the point that I presume Mary Scanlon was going to make about resources. The Arbutnott formula will be used. I do not agree with the figure that was suggested, but it is not far off. The resources have not been allocated and the budget has not been set. Nonetheless, that is the ballpark figure.

Economies of scale are important, as are streamlined management structures. Also important is the potential that the NHS has to use its staff more widely and effectively. Let us take consultants from Glasgow and—my goodness—put them in Greenock; they could start doing some clinics there as well. The 900 or so consultants in Glasgow and the 250 in Argyll and Clyde give us an opportunity to ensure that such wide and effective use of staff can happen.

Many members have supported the Executive's views on coterminosity. Improvements in health, health services and care of our children and elderly people are not just about the NHS; the voluntary sector, the private sector and local councils are also involved. Therefore, it is right to go for coterminosity, with a strongly managed locality plan, which I will sign off, and a strong community health partnership, which will be of central importance.

Jean Turner spoke about cross-boundary flow, which we have been working on for a number of years. We are getting better at it. The changes that I announced in the Scottish Executive Health Department and the work that we are doing on cross-boundary flow will help to make our arrangements easier.

There are many other issues that I would like to address but, unfortunately, I cannot because of the time. If I have not addressed issues that members would like me to address, I ask them to write to me and I will get back to them.

The decision at the heart of our proposals for the future of health services was not taken lightly or rushed. The decision had to fit into our strategy for health delivery and it had to respect communities' desires for local services. I strongly believe that that is what the Executive has delivered today.

Parliamentary Bureau Motion

17:00

The Presiding Officer (Mr George Reid): The next item of business is consideration of a Parliamentary Bureau motion. I ask Margaret Curran to move motion S2M-3677, on rule 9.5.3A.

Motion moved,

That the Parliament agrees, for the purposes of consideration of the Joint Inspection of Children's Services and Inspection of Social Work Services (Scotland) Bill at Stage 2, that Rule 9.5.3A be suspended.—[*Ms Margaret Curran.*]

The Presiding Officer: The question on the motion will be put at decision time.

Business Motion

17:00

The Presiding Officer (Mr George Reid): The next item of business is consideration of business motion S2M-3678, in the name of Margaret Curran, on behalf of the Parliamentary Bureau, setting out a timetable for legislation.

Motion moved,

That the Parliament agrees that consideration of the Joint Inspection of Children's Services and Inspection of Social Work Services (Scotland) Bill at Stage 2 be completed by 22 December 2005.—[*Ms Margaret Curran.*]

Motion agreed to.

Decision Time

17:01

The Presiding Officer (Mr George Reid): Five questions will be put as a result of today's business. The first question is, that amendment S2M-3684.2, in the name of Shona Robison, which seeks to amend motion S2M-3684, in the name of Andy Kerr, on future arrangements for health services in the Argyll and Clyde area, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, Brian (Aberdeen North) (SNP)
 Baird, Shiona (North East Scotland) (Green)
 Ballance, Chris (South of Scotland) (Green)
 Ballard, Mark (Lothians) (Green)
 Crawford, Bruce (Mid Scotland and Fife) (SNP)
 Cunningham, Roseanna (Perth) (SNP)
 Ewing, Fergus (Inverness East, Nairn and Lochaber) (SNP)
 Ewing, Mrs Margaret (Moray) (SNP)
 Fabiani, Linda (Central Scotland) (SNP)
 Gibson, Rob (Highlands and Islands) (SNP)
 Grahame, Christine (South of Scotland) (SNP)
 Harper, Robin (Lothians) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Hyslop, Fiona (Lothians) (SNP)
 Ingram, Mr Adam (South of Scotland) (SNP)
 Lochhead, Richard (North East Scotland) (SNP)
 MacAskill, Mr Kenny (Lothians) (SNP)
 Martin, Campbell (West of Scotland) (Ind)
 Marwick, Tricia (Mid Scotland and Fife) (SNP)
 Mather, Jim (Highlands and Islands) (SNP)
 Maxwell, Mr Stewart (West of Scotland) (SNP)
 McFee, Mr Bruce (West of Scotland) (SNP)
 Morgan, Alasdair (South of Scotland) (SNP)
 Robison, Shona (Dundee East) (SNP)
 Ruskell, Mr Mark (Mid Scotland and Fife) (Green)
 Scott, Eleanor (Highlands and Islands) (Green)
 Stevenson, Stewart (Banff and Buchan) (SNP)
 Swinney, Mr John (North Tayside) (SNP)
 Turner, Dr Jean (Strathkelvin and Bearsden) (Ind)
 Welsh, Mr Andrew (Angus) (SNP)

AGAINST

Alexander, Ms Wendy (Paisley North) (Lab)
 Arbuckle, Mr Andrew (Mid Scotland and Fife) (LD)
 Baillie, Jackie (Dumbarton) (Lab)
 Baker, Richard (North East Scotland) (Lab)
 Barrie, Scott (Dunfermline West) (Lab)
 Boyack, Sarah (Edinburgh Central) (Lab)
 Brankin, Rhona (Midlothian) (Lab)
 Brown, Robert (Glasgow) (LD)
 Butler, Bill (Glasgow Anniesland) (Lab)
 Canavan, Dennis (Falkirk West) (Ind)
 Chisholm, Malcolm (Edinburgh North and Leith) (Lab)
 Craigie, Cathie (Cumbernauld and Kilsyth) (Lab)
 Curran, Ms Margaret (Glasgow Baillieston) (Lab)
 Eadie, Helen (Dunfermline East) (Lab)
 Ferguson, Patricia (Glasgow Maryhill) (Lab)
 Finnie, Ross (West of Scotland) (LD)
 Gillon, Karen (Clydesdale) (Lab)
 Glen, Marlyn (North East Scotland) (Lab)
 Godman, Trish (West Renfrewshire) (Lab)
 Gordon, Mr Charlie (Glasgow Cathcart) (Lab)

Gorrie, Donald (Central Scotland) (LD)
 Henry, Hugh (Paisley South) (Lab)
 Home Robertson, John (East Lothian) (Lab)
 Hughes, Janis (Glasgow Rutherglen) (Lab)
 Jackson, Dr Sylvia (Stirling) (Lab)
 Jackson, Gordon (Glasgow Govan) (Lab)
 Jamieson, Cathy (Carrick, Cumnock and Doon Valley) (Lab)
 Jamieson, Margaret (Kilmarnock and Loudoun) (Lab)
 Kerr, Mr Andy (East Kilbride) (Lab)
 Lamont, Johann (Glasgow Pollok) (Lab)
 Livingstone, Marilyn (Kirkcaldy) (Lab)
 Lyon, George (Argyll and Bute) (LD)
 Macdonald, Lewis (Aberdeen Central) (Lab)
 Macintosh, Mr Kenneth (Eastwood) (Lab)
 Maclean, Kate (Dundee West) (Lab)
 Macmillan, Maureen (Highlands and Islands) (Lab)
 Martin, Paul (Glasgow Springburn) (Lab)
 May, Christine (Central Fife) (Lab)
 McAveety, Mr Frank (Glasgow Shettleston) (Lab)
 McCabe, Mr Tom (Hamilton South) (Lab)
 McMahan, Michael (Hamilton North and Bellshill) (Lab)
 McNeil, Mr Duncan (Greenock and Inverclyde) (Lab)
 McNeill, Pauline (Glasgow Kelvin) (Lab)
 McNulty, Des (Clydebank and Milngavie) (Lab)
 Morrison, Mr Alasdair (Western Isles) (Lab)
 Muldoon, Bristow (Livingston) (Lab)
 Mulligan, Mrs Mary (Linlithgow) (Lab)
 Munro, John Farquhar (Ross, Skye and Inverness West) (LD)
 Murray, Dr Elaine (Dumfries) (Lab)
 Oldfather, Irene (Cunninghame South) (Lab)
 Peacock, Peter (Highlands and Islands) (Lab)
 Peattie, Cathy (Falkirk East) (Lab)
 Pringle, Mike (Edinburgh South) (LD)
 Purvis, Jeremy (Tweeddale, Ettrick and Lauderdale) (LD)
 Radcliffe, Nora (Gordon) (LD)
 Robson, Euan (Roxburgh and Berwickshire) (LD)
 Rumbles, Mike (West Aberdeenshire and Kincardine) (LD)
 Scott, John (Ayr) (Con)
 Smith, Elaine (Coatbridge and Chryston) (Lab)
 Smith, Iain (North East Fife) (LD)
 Smith, Margaret (Edinburgh West) (LD)
 Stephen, Nicol (Aberdeen South) (LD)
 Stone, Mr Jamie (Caithness, Sutherland and Easter Ross) (LD)
 Swinburne, John (Central Scotland) (SSCUP)
 Wallace, Mr Jim (Orkney) (LD)
 Whitefield, Karen (Airdrie and Shotts) (Lab)
 Wilson, Allan (Cunninghame North) (Lab)

ABSTENTIONS

Aitken, Bill (Glasgow) (Con)
 Brocklebank, Mr Ted (Mid Scotland and Fife) (Con)
 Brownlee, Derek (South of Scotland) (Con)
 Byrne, Ms Rosemary (South of Scotland) (SSP)
 Curran, Frances (West of Scotland) (SSP)
 Davidson, Mr David (North East Scotland) (Con)
 Fergusson, Alex (Galloway and Upper Nithsdale) (Con)
 Fox, Colin (Lothians) (SSP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallie, Phil (South of Scotland) (Con)
 Goldie, Miss Annabel (West of Scotland) (Con)
 Johnstone, Alex (North East Scotland) (Con)
 MacDonald, Margo (Lothians) (Ind)
 McGrigor, Mr Jamie (Highlands and Islands) (Con)
 McLetchie, David (Edinburgh Pentlands) (Con)
 Milne, Mrs Nanette (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Scanlon, Mary (Highlands and Islands) (Con)
 Tosh, Murray (West of Scotland) (Con)

The Presiding Officer: The result of the division is: For 30, Against 67, Abstentions 19.

Amendment disagreed to.

The Presiding Officer: The second question is, that amendment S2M-3684.4, in the name of Annabel Goldie, which seeks to amend motion S2M-3684, in the name of Andy Kerr, on future arrangements for health services in the Argyll and Clyde area, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

FOR

Aitken, Bill (Glasgow) (Con)
 Brocklebank, Mr Ted (Mid Scotland and Fife) (Con)
 Brownlee, Derek (South of Scotland) (Con)
 Byrne, Ms Rosemary (South of Scotland) (SSP)
 Curran, Frances (West of Scotland) (SSP)
 Davidson, Mr David (North East Scotland) (Con)
 Fergusson, Alex (Galloway and Upper Nithsdale) (Con)
 Fox, Colin (Lothians) (SSP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallie, Phil (South of Scotland) (Con)
 Goldie, Miss Annabel (West of Scotland) (Con)
 Johnstone, Alex (North East Scotland) (Con)
 MacDonald, Margo (Lothians) (Ind)
 Martin, Campbell (West of Scotland) (Ind)
 McGrigor, Mr Jamie (Highlands and Islands) (Con)
 McLetchie, David (Edinburgh Pentlands) (Con)
 Milne, Mrs Nanette (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Scanlon, Mary (Highlands and Islands) (Con)
 Scott, John (Ayr) (Con)
 Tosh, Murray (West of Scotland) (Con)
 Turner, Dr Jean (Strathkelvin and Bearsden) (Ind)

AGAINST

Alexander, Ms Wendy (Paisley North) (Lab)
 Arbuckle, Mr Andrew (Mid Scotland and Fife) (LD)
 Baillie, Jackie (Dumbarton) (Lab)
 Baird, Shiona (North East Scotland) (Green)
 Baker, Richard (North East Scotland) (Lab)
 Ballance, Chris (South of Scotland) (Green)
 Ballard, Mark (Lothians) (Green)
 Barrie, Scott (Dunfermline West) (Lab)
 Boyack, Sarah (Edinburgh Central) (Lab)
 Brankin, Rhona (Midlothian) (Lab)
 Brown, Robert (Glasgow) (LD)
 Butler, Bill (Glasgow Anniesland) (Lab)
 Canavan, Dennis (Falkirk West) (Ind)
 Chisholm, Malcolm (Edinburgh North and Leith) (Lab)
 Craigie, Cathie (Cumbernauld and Kilsyth) (Lab)
 Curran, Ms Margaret (Glasgow Baillieston) (Lab)
 Eadie, Helen (Dunfermline East) (Lab)
 Ferguson, Patricia (Glasgow Maryhill) (Lab)
 Finnie, Ross (West of Scotland) (LD)
 Gillon, Karen (Clydesdale) (Lab)
 Glen, Marlyn (North East Scotland) (Lab)
 Godman, Trish (West Renfrewshire) (Lab)
 Gordon, Mr Charlie (Glasgow Cathcart) (Lab)
 Gorrie, Donald (Central Scotland) (LD)
 Harper, Robin (Lothians) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Henry, Hugh (Paisley South) (Lab)
 Home Robertson, John (East Lothian) (Lab)
 Hughes, Janis (Glasgow Rutherglen) (Lab)
 Jackson, Dr Sylvia (Stirling) (Lab)
 Jackson, Gordon (Glasgow Govan) (Lab)

Jamieson, Cathy (Carrick, Cumnock and Doon Valley) (Lab)
 Jamieson, Margaret (Kilmarnock and Loudoun) (Lab)
 Kerr, Mr Andy (East Kilbride) (Lab)
 Lamont, Johann (Glasgow Pollok) (Lab)
 Livingstone, Marilyn (Kirkcaldy) (Lab)
 Lyon, George (Argyll and Bute) (LD)
 Macdonald, Lewis (Aberdeen Central) (Lab)
 Macintosh, Mr Kenneth (Eastwood) (Lab)
 Maclean, Kate (Dundee West) (Lab)
 Macmillan, Maureen (Highlands and Islands) (Lab)
 Martin, Paul (Glasgow Springburn) (Lab)
 May, Christine (Central Fife) (Lab)
 McAveety, Mr Frank (Glasgow Shettleston) (Lab)
 McCabe, Mr Tom (Hamilton South) (Lab)
 McMahon, Michael (Hamilton North and Bellshill) (Lab)
 McNeil, Mr Duncan (Greenock and Inverclyde) (Lab)
 McNeill, Pauline (Glasgow Kelvin) (Lab)
 McNulty, Des (Clydebank and Milngavie) (Lab)
 Morrison, Mr Alasdair (Western Isles) (Lab)
 Muldoon, Bristow (Livingston) (Lab)
 Mulligan, Mrs Mary (Linlithgow) (Lab)
 Munro, John Farquhar (Ross, Skye and Inverness West) (LD)
 Murray, Dr Elaine (Dumfries) (Lab)
 Oldfather, Irene (Cunninghame South) (Lab)
 Peacock, Peter (Highlands and Islands) (Lab)
 Peattie, Cathy (Falkirk East) (Lab)
 Pringle, Mike (Edinburgh South) (LD)
 Purvis, Jeremy (Tweeddale, Ettrick and Lauderdale) (LD)
 Radcliffe, Nora (Gordon) (LD)
 Robson, Euan (Roxburgh and Berwickshire) (LD)
 Rumbles, Mike (West Aberdeenshire and Kincardine) (LD)
 Ruskell, Mr Mark (Mid Scotland and Fife) (Green)
 Scott, Eleanor (Highlands and Islands) (Green)
 Smith, Elaine (Coatbridge and Chryston) (Lab)
 Smith, Iain (North East Fife) (LD)
 Smith, Margaret (Edinburgh West) (LD)
 Stephen, Nicol (Aberdeen South) (LD)
 Stone, Mr Jamie (Caithness, Sutherland and Easter Ross) (LD)
 Swinburne, John (Central Scotland) (SSCUP)
 Wallace, Mr Jim (Orkney) (LD)
 Whitefield, Karen (Airdrie and Shotts) (Lab)
 Wilson, Allan (Cunninghame North) (Lab)

ABSTENTIONS

Adam, Brian (Aberdeen North) (SNP)
 Crawford, Bruce (Mid Scotland and Fife) (SNP)
 Cunningham, Roseanna (Perth) (SNP)
 Ewing, Fergus (Inverness East, Nairn and Lochaber) (SNP)
 Ewing, Mrs Margaret (Moray) (SNP)
 Fabiani, Linda (Central Scotland) (SNP)
 Gibson, Rob (Highlands and Islands) (SNP)
 Grahame, Christine (South of Scotland) (SNP)
 Hyslop, Fiona (Lothians) (SNP)
 Ingram, Mr Adam (South of Scotland) (SNP)
 Lochhead, Richard (North East Scotland) (SNP)
 MacAskill, Mr Kenny (Lothians) (SNP)
 Marwick, Tricia (Mid Scotland and Fife) (SNP)
 Mather, Jim (Highlands and Islands) (SNP)
 Maxwell, Mr Stewart (West of Scotland) (SNP)
 McFee, Mr Bruce (West of Scotland) (SNP)
 Morgan, Alasdair (South of Scotland) (SNP)
 Robison, Shona (Dundee East) (SNP)
 Stevenson, Stewart (Banff and Buchan) (SNP)
 Swinney, Mr John (North Tayside) (SNP)
 Welsh, Mr Andrew (Angus) (SNP)

The Presiding Officer: The result of the division is: For 22, Against 73, Abstentions 21.

Amendment disagreed to.

The Presiding Officer: The third question is, that amendment S2M-3684.3, in the name of Frances Curran, which seeks to amend motion S2M-3684, in the name of Andy Kerr, on future arrangements for health services in the Argyll and Clyde area, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

FOR

Byrne, Ms Rosemary (South of Scotland) (SSP)
 Curran, Frances (West of Scotland) (SSP)
 Fox, Colin (Lothians) (SSP)
 Lyon, George (Argyll and Bute) (LD)
 Martin, Campbell (West of Scotland) (Ind)
 Turner, Dr Jean (Strathkelvin and Bearsden) (Ind)

AGAINST

Alexander, Ms Wendy (Paisley North) (Lab)
 Arbuckle, Mr Andrew (Mid Scotland and Fife) (LD)
 Baillie, Jackie (Dumbarton) (Lab)
 Baird, Shiona (North East Scotland) (Green)
 Baker, Richard (North East Scotland) (Lab)
 Ballance, Chris (South of Scotland) (Green)
 Ballard, Mark (Lothians) (Green)
 Barrie, Scott (Dunfermline West) (Lab)
 Boyack, Sarah (Edinburgh Central) (Lab)
 Brankin, Rhona (Midlothian) (Lab)
 Brown, Robert (Glasgow) (LD)
 Butler, Bill (Glasgow Anniesland) (Lab)
 Canavan, Dennis (Falkirk West) (Ind)
 Chisholm, Malcolm (Edinburgh North and Leith) (Lab)
 Craigie, Cathie (Cumbernauld and Kilsyth) (Lab)
 Curran, Ms Margaret (Glasgow Baillieston) (Lab)
 Eadie, Helen (Dunfermline East) (Lab)
 Ferguson, Patricia (Glasgow Maryhill) (Lab)
 Finnie, Ross (West of Scotland) (LD)
 Gillon, Karen (Clydesdale) (Lab)
 Glen, Marlyn (North East Scotland) (Lab)
 Godman, Trish (West Renfrewshire) (Lab)
 Gordon, Mr Charlie (Glasgow Cathcart) (Lab)
 Gorrie, Donald (Central Scotland) (LD)
 Harper, Robin (Lothians) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Henry, Hugh (Paisley South) (Lab)
 Home Robertson, John (East Lothian) (Lab)
 Hughes, Janis (Glasgow Rutherglen) (Lab)
 Jackson, Dr Sylvia (Stirling) (Lab)
 Jackson, Gordon (Glasgow Govan) (Lab)
 Jamieson, Cathy (Carrick, Cumnock and Doon Valley) (Lab)
 Jamieson, Margaret (Kilmarnock and Loudoun) (Lab)
 Kerr, Mr Andy (East Kilbride) (Lab)
 Lamont, Johann (Glasgow Pollok) (Lab)
 Livingstone, Marilyn (Kirkcaldy) (Lab)
 Macdonald, Lewis (Aberdeen Central) (Lab)
 Macintosh, Mr Kenneth (Eastwood) (Lab)
 Maclean, Kate (Dundee West) (Lab)
 Macmillan, Maureen (Highlands and Islands) (Lab)
 Martin, Paul (Glasgow Springburn) (Lab)
 May, Christine (Central Fife) (Lab)
 McAveety, Mr Frank (Glasgow Shettleston) (Lab)
 McCabe, Mr Tom (Hamilton South) (Lab)
 McMahon, Michael (Hamilton North and Bellshill) (Lab)
 McNeil, Mr Duncan (Greenock and Inverclyde) (Lab)
 McNeill, Pauline (Glasgow Kelvin) (Lab)
 McNulty, Des (Clydebank and Milngavie) (Lab)
 Morrison, Mr Alasdair (Western Isles) (Lab)

Muldoon, Bristow (Livingston) (Lab)
 Mulligan, Mrs Mary (Linlithgow) (Lab)
 Munro, John Farquhar (Ross, Skye and Inverness West) (LD)
 Murray, Dr Elaine (Dumfries) (Lab)
 Oldfather, Irene (Cunninghame South) (Lab)
 Peacock, Peter (Highlands and Islands) (Lab)
 Peattie, Cathy (Falkirk East) (Lab)
 Pringle, Mike (Edinburgh South) (LD)
 Purvis, Jeremy (Tweeddale, Ettrick and Lauderdale) (LD)
 Radcliffe, Nora (Gordon) (LD)
 Robson, Euan (Roxburgh and Berwickshire) (LD)
 Rumbles, Mike (West Aberdeenshire and Kincardine) (LD)
 Ruskell, Mr Mark (Mid Scotland and Fife) (Green)
 Scott, Eleanor (Highlands and Islands) (Green)
 Scott, John (Ayr) (Con)
 Smith, Elaine (Coatbridge and Chryston) (Lab)
 Smith, Iain (North East Fife) (LD)
 Smith, Margaret (Edinburgh West) (LD)
 Stephen, Nicol (Aberdeen South) (LD)
 Stone, Mr Jamie (Caithness, Sutherland and Easter Ross) (LD)
 Swinburne, John (Central Scotland) (SSCUP)
 Wallace, Mr Jim (Orkney) (LD)
 Whitefield, Karen (Airdrie and Shotts) (Lab)
 Wilson, Allan (Cunninghame North) (Lab)

ABSTENTIONS

Adam, Brian (Aberdeen North) (SNP)
 Aitken, Bill (Glasgow) (Con)
 Brocklebank, Mr Ted (Mid Scotland and Fife) (Con)
 Brownlee, Derek (South of Scotland) (Con)
 Crawford, Bruce (Mid Scotland and Fife) (SNP)
 Cunningham, Roseanna (Perth) (SNP)
 Davidson, Mr David (North East Scotland) (Con)
 Ewing, Fergus (Inverness East, Nairn and Lochaber) (SNP)
 Ewing, Mrs Margaret (Moray) (SNP)
 Fabiani, Linda (Central Scotland) (SNP)
 Fergusson, Alex (Galloway and Upper Nithsdale) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallie, Phil (South of Scotland) (Con)
 Gibson, Rob (Highlands and Islands) (SNP)
 Goldie, Miss Annabel (West of Scotland) (Con)
 Grahame, Christine (South of Scotland) (SNP)
 Hyslop, Fiona (Lothians) (SNP)
 Ingram, Mr Adam (South of Scotland) (SNP)
 Johnstone, Alex (North East Scotland) (Con)
 Lochhead, Richard (North East Scotland) (SNP)
 MacAskill, Mr Kenny (Lothians) (SNP)
 MacDonald, Margo (Lothians) (Ind)
 Marwick, Tricia (Mid Scotland and Fife) (SNP)
 Mather, Jim (Highlands and Islands) (SNP)
 Maxwell, Mr Stewart (West of Scotland) (SNP)
 McFee, Mr Bruce (West of Scotland) (SNP)
 McGrigor, Mr Jamie (Highlands and Islands) (Con)
 McLetchie, David (Edinburgh Pentlands) (Con)
 Milne, Mrs Nanette (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Morgan, Alasdair (South of Scotland) (SNP)
 Robison, Shona (Dundee East) (SNP)
 Scanlon, Mary (Highlands and Islands) (Con)
 Stevenson, Stewart (Banff and Buchan) (SNP)
 Swinney, Mr John (North Tayside) (SNP)
 Tosh, Murray (West of Scotland) (Con)
 Welsh, Mr Andrew (Angus) (SNP)

The Presiding Officer: The result of the division is: For 6, Against 73, Abstentions 37.

Amendment disagreed to.

The Presiding Officer: The fourth question is, that motion S2M-3684, in the name of Andy Kerr, on future arrangements for health services in the Argyll and Clyde area, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

FOR

Alexander, Ms Wendy (Paisley North) (Lab)
 Arbuckle, Mr Andrew (Mid Scotland and Fife) (LD)
 Baillie, Jackie (Dumbarton) (Lab)
 Baird, Shiona (North East Scotland) (Green)
 Baker, Richard (North East Scotland) (Lab)
 Ballance, Chris (South of Scotland) (Green)
 Ballard, Mark (Lothians) (Green)
 Barrie, Scott (Dunfermline West) (Lab)
 Boyack, Sarah (Edinburgh Central) (Lab)
 Brankin, Rhona (Midlothian) (Lab)
 Brown, Robert (Glasgow) (LD)
 Butler, Bill (Glasgow Anniesland) (Lab)
 Canavan, Dennis (Falkirk West) (Ind)
 Chisholm, Malcolm (Edinburgh North and Leith) (Lab)
 Craigie, Cathie (Cumbernauld and Kilsyth) (Lab)
 Curran, Ms Margaret (Glasgow Baillieston) (Lab)
 Eadie, Helen (Dunfermline East) (Lab)
 Ferguson, Patricia (Glasgow Maryhill) (Lab)
 Finnie, Ross (West of Scotland) (LD)
 Gillon, Karen (Clydesdale) (Lab)
 Glen, Marlyn (North East Scotland) (Lab)
 Godman, Trish (West Renfrewshire) (Lab)
 Gordon, Mr Charlie (Glasgow Cathcart) (Lab)
 Gorrie, Donald (Central Scotland) (LD)
 Harper, Robin (Lothians) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Henry, Hugh (Paisley South) (Lab)
 Home Robertson, John (East Lothian) (Lab)
 Hughes, Janis (Glasgow Rutherglen) (Lab)
 Jackson, Dr Sylvia (Stirling) (Lab)
 Jackson, Gordon (Glasgow Govan) (Lab)
 Jamieson, Cathy (Carrick, Cumnock and Doon Valley) (Lab)
 Jamieson, Margaret (Kilmarnock and Loudoun) (Lab)
 Kerr, Mr Andy (East Kilbride) (Lab)
 Lamont, Johann (Glasgow Pollok) (Lab)
 Livingstone, Marilyn (Kirkcaldy) (Lab)
 Lyon, George (Argyll and Bute) (LD)
 Macdonald, Lewis (Aberdeen Central) (Lab)
 MacDonald, Margo (Lothians) (Ind)
 Macintosh, Mr Kenneth (Eastwood) (Lab)
 Maclean, Kate (Dundee West) (Lab)
 Macmillan, Maureen (Highlands and Islands) (Lab)
 Martin, Paul (Glasgow Springburn) (Lab)
 May, Christine (Central Fife) (Lab)
 McAveety, Mr Frank (Glasgow Shettleston) (Lab)
 McCabe, Mr Tom (Hamilton South) (Lab)
 McMahon, Michael (Hamilton North and Bellshill) (Lab)
 McNeil, Mr Duncan (Greenock and Inverclyde) (Lab)
 McNeill, Pauline (Glasgow Kelvin) (Lab)
 McNulty, Des (Clydebank and Milngavie) (Lab)
 Morrison, Mr Alasdair (Western Isles) (Lab)
 Muldoon, Bristow (Livingston) (Lab)
 Mulligan, Mrs Mary (Linlithgow) (Lab)
 Munro, John Farquhar (Ross, Skye and Inverness West) (LD)
 Murray, Dr Elaine (Dumfries) (Lab)
 Oldfather, Irene (Cunninghame South) (Lab)
 Peacock, Peter (Highlands and Islands) (Lab)
 Peattie, Cathy (Falkirk East) (Lab)
 Pringle, Mike (Edinburgh South) (LD)

Purvis, Jeremy (Tweeddale, Ettrick and Lauderdale) (LD)
 Radcliffe, Nora (Gordon) (LD)
 Robson, Euan (Roxburgh and Berwickshire) (LD)
 Rumbles, Mike (West Aberdeenshire and Kincardine) (LD)
 Ruskell, Mr Mark (Mid Scotland and Fife) (Green)
 Scott, Eleanor (Highlands and Islands) (Green)
 Smith, Elaine (Coatbridge and Chryston) (Lab)
 Smith, Iain (North East Fife) (LD)
 Smith, Margaret (Edinburgh West) (LD)
 Stephen, Nicol (Aberdeen South) (LD)
 Stone, Mr Jamie (Caithness, Sutherland and Easter Ross) (LD)
 Swinburne, John (Central Scotland) (SSCUP)
 Wallace, Mr Jim (Orkney) (LD)
 Whitefield, Karen (Airdrie and Shotts) (Lab)
 Wilson, Allan (Cunninghame North) (Lab)

AGAINST

Aitken, Bill (Glasgow) (Con)
 Brocklebank, Mr Ted (Mid Scotland and Fife) (Con)
 Brownlee, Derek (South of Scotland) (Con)
 Byrne, Ms Rosemary (South of Scotland) (SSP)
 Curran, Frances (West of Scotland) (SSP)
 Davidson, Mr David (North East Scotland) (Con)
 Fergusson, Alex (Galloway and Upper Nithsdale) (Con)
 Fox, Colin (Lothians) (SSP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallie, Phil (South of Scotland) (Con)
 Goldie, Miss Annabel (West of Scotland) (Con)
 Johnstone, Alex (North East Scotland) (Con)
 McGrigor, Mr Jamie (Highlands and Islands) (Con)
 McLetchie, David (Edinburgh Pentlands) (Con)
 Milne, Mrs Nanette (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Scanlon, Mary (Highlands and Islands) (Con)
 Scott, John (Ayr) (Con)
 Tosh, Murray (West of Scotland) (Con)

ABSTENTIONS

Adam, Brian (Aberdeen North) (SNP)
 Crawford, Bruce (Mid Scotland and Fife) (SNP)
 Cunningham, Roseanna (Perth) (SNP)
 Ewing, Fergus (Inverness East, Nairn and Lochaber) (SNP)
 Ewing, Mrs Margaret (Moray) (SNP)
 Fabiani, Linda (Central Scotland) (SNP)
 Gibson, Rob (Highlands and Islands) (SNP)
 Grahame, Christine (South of Scotland) (SNP)
 Hyslop, Fiona (Lothians) (SNP)
 Ingram, Mr Adam (South of Scotland) (SNP)
 Lochhead, Richard (North East Scotland) (SNP)
 MacAskill, Mr Kenny (Lothians) (SNP)
 Martin, Campbell (West of Scotland) (Ind)
 Marwick, Tricia (Mid Scotland and Fife) (SNP)
 Mather, Jim (Highlands and Islands) (SNP)
 Maxwell, Mr Stewart (West of Scotland) (SNP)
 McFee, Mr Bruce (West of Scotland) (SNP)
 Morgan, Alasdair (South of Scotland) (SNP)
 Robison, Shona (Dundee East) (SNP)
 Stevenson, Stewart (Banff and Buchan) (SNP)
 Swinney, Mr John (North Tayside) (SNP)
 Turner, Dr Jean (Strathkelvin and Bearsden) (Ind)
 Welsh, Mr Andrew (Angus) (SNP)

The Presiding Officer: The result of the division is: For 74, Against 19, Abstentions 23.

Motion agreed to.

That the Parliament supports the decisive action announced by the Scottish Executive on 19 May 2005 to dissolve Argyll and Clyde NHS Board and to redraw the boundaries of the neighbouring boards to take over its responsibilities from April 2006; believes that these steps

will address the board's structural and financial problems; applauds the continued successful efforts of staff in NHS Argyll and Clyde to maintain comprehensive healthcare services for the people of the area; notes that a full public consultation has been held on the boundary option to be adopted, and supports NHS Highland and NHS Greater Glasgow in their task of returning services to financial balance while maintaining high standards of quality and access.

The Presiding Officer: The fifth and final question is, that motion S2M-3677, in the name of Margaret Curran, on rule 9.5.3A, be agreed to.

Motion agreed to.

That the Parliament agrees, for the purposes of consideration of the Joint Inspection of Children's Services and Inspection of Social Work Services (Scotland) Bill at Stage 2, that Rule 9.5.3A be suspended.

John Thomson

The Deputy Presiding Officer (Murray Tosh):

The final item of business is a members' business debate on motion S2M-3243, in the name of Helen Eadie, which is that supporters hope that the Scottish Football Association will admit John Thomson to the hall of fame. The debate will be concluded without any question being put.

Motion debated,

That the Parliament notes that football supporters across Scotland continue to honour the memory of John Thomson, the young Celtic football player who so tragically lost his life in 1931; further notes that the people of Cardenden, in particular, and Scotland, generally, have continued annually since his death to honour and pay tribute to this legendary international football player who continues to serve as a role model for Scotland's children as a person who was so decent, so upstanding and so honoured for setting standards for behaviour in football of all that is best, and hopes that the Scottish Football Association will admit John Thomson to Scotland's Hall of Fame.

17:08

Helen Eadie (Dunfermline East) (Lab): I am very grateful to Parliament for giving me the opportunity to lead this evening's debate—it is an honour and a privilege to do so.

I am pleased to welcome to the public gallery Mr Ronnie Hawthorne, who is the director of operations at Celtic Football Club. Brian Wilson, the acting chairman, has offered his apologies for not being able to attend the debate, but he sends a message of support for the motion. I am delighted also to welcome Mr Alex Burns and Mrs Jessie Burns, who are John Thomson Cardenden committee members, and Mr and Mrs Tom Greig. All are, in equal measure, responsible for the motion that we will debate.

This evening I hope to achieve three things: first, I want to secure the support of Patricia Ferguson, the Minister for Tourism, Culture and Sport; the support of fellow MSPs; and the support of football fans and clubs from all over in an effort to persuade the Scottish Football Association to admit John Thomson to its hall of fame. I acknowledge that the minister has written back to me and although I appreciate the constraints under which she operates, I ask her to use whatever means are at her disposal to help me in my mission. I also want to explain why I think John Thomson should be admitted to the hall of fame, and to say something about the support that exists for that proposal, which is a consequence of John's having become a legendary figure.

In September this year, when I was at the memorial service for John Thomson in Cardenden, I was asked to do all that I could to help win his entry into the hall of fame. I wrote to the SFA and

was apprised of the process by which such entry is achieved. I appreciate that the SFA has certain rules and criteria by which it operates. However, I pose the question: can the process be set aside so that the SFA can decide to admit John Thomson to the hall of fame? Later in my speech, I hope to set out the extenuating circumstances that merit that request's being met. I ask Patricia Ferguson for her support.

I turn to why John Thomson should be admitted to the hall of fame. Fife has nurtured some great footballers, including the late Jim Baxter, who died in September 2001 and whose statue is in Halbeath in my Dunfermline East constituency. John Thomson was a miner. In Fife at that time, 30,000 miners worked in 66 pits and all of them, whatever their religion, mourned the passing of John Thomson. He stood above any religious divide; he was a member of the Protestant Church of Christ who was also proud to play for Celtic.

John Thomson, the Celtic and Scotland goalkeeper, died at the tender age of 22 years, in the evening of 5 September 1931, following a tragic accident during a match against Rangers. By that time, John Thomson had four international caps. I believe that he is the only football player to have died on the pitch during a game. Wherever Cardenden or Celtic Football Club are mentioned, someone will talk about John Thomson. He is a goalkeeping legend who was a Celtic regular at 18.

Much of what has been written about him says that he would most certainly have spent at least the next decade being the last line of defence for his club and country. We are told that John Thomson would have excelled at any sport because of his great eye for the ball and tremendous natural ability. Added to that was his dedication and commitment, which ensured that he trained extremely hard, first at home in Fife and, later, under the professional guidance that he received at Celtic park.

As to how good a player John Thomson was, I have no doubt that other members will assist in painting a picture of his magical qualities. John was compared to Jesse Owens, the great black American Olympic athlete, who dominated in the 1936 Berlin Olympics. It was said that, just as Owens seemed to have an extra kick in midair, Thomson appeared to have an extra lunge and even the ability to change direction.

John Thomson made 188 appearances for Celtic. The club's manager at the time was Willy Maley, who said:

"Goalkeepers come and goalkeepers go, but whenever I think of goalkeepers, the more I think of our genius Thomson."

John Thomson is a legendary figure in the annals of football: he has not been, and will never be, forgotten.

In the Parliament building, I need only mention John Thomson's name for virtually all my colleagues to say instantly, "Oh—you mean the Celtic goalie for whom tragedy struck when he died saving a goal during a Rangers match." His memory is still alive among Celtic supporters all around the world.

Shortly after I lodged the motion, I was very touched to receive a phone call from an old man in Chicago. In a voice that told me that he was near to tears, he said: "Helen, it is a great thing that the Scottish Parliament is considering the motion and I pray that your campaign to have John Thomson admitted to the SFA hall of fame is successful."

In today's world of high-profile club and international football, John Thomson would have been up there among the very best. With far better exposure now on television and the possibility of huge salaries, his life would have been transformed to one of glamour and luxury. However, he will always be remembered as a sporting legend, a thorough gentleman and a wonderful representative of any club and country.

John Thomson may have been the greatest goalkeeper of them all or it may be that his tragic early death has led historians to romanticise him—who knows?—but what cannot be disputed is that he was a very good goalkeeper. Songs, poems and ballads have been written about him; many of them poignantly appropriate. Few footballers are remembered in the same way.

His funeral in Cardenden was attended by 30,000 people from all across the nation. The world's press came to Bowhill cemetery. A special train came from Glasgow, which included a wagon that contained only wreaths and floral tributes. The penniless unemployed people simply walked. Women wept, as did their menfolk, while they waited for the cortège to pass by. Some walked from Glasgow to Cardenden and back. An aeroplane was seen to land in a nearby field; it was believed to belong to a national newspaper. Hundreds of miners, grimy and toil-stained from their work in the colliery 200yd away, rubbed shoulders with scrupulously dressed men from a dozen cities.

If John Thomson had known me, he might have had a wry little smile to himself at the thought of Helen Eadie lodging in the Scottish Parliament a motion about football. He would probably have known that the only football match that I have ever seen was Real Madrid v Eintracht Frankfurt, although everyone who knows that fact about me admires my taste; it was, I am told, the *crème de la crème* of football matches in 1960.

I also said that I wanted to speak about the enduring ways in which John Thomson's memory lives on. John and his folks would be so pleased and proud, I am sure, to know that he has inspired generations of youngsters—lads and lassies—to play football. Every year, more than 500 little boys and girls play football tournaments in Cardenden as a tribute to the memory of John Thomson. This year I have had the real privilege of being one of the presenters of the prizes.

Finally, I thank Tom Greig, Alex Burns, Jessie Burns and the Cardenden committee, who ensure that honour and respect are paid to one of the greatest footballers of that time. Jessie Burns, in her quiet little way, tends the grave of John Thomson and washes, dries and presses all the football scarves and shirts and returns them to the grave where they lie in John's honour.

I very much hope that everyone here this evening will do all that they can to help us secure the ultimate tribute that we seek for John Thomson. I hope that the SFA is listening and that it will accede to our request.

17:16

Bruce Crawford (Mid Scotland and Fife) (SNP): I know that John Thomson's memory means a lot to a lot of people, and Helen Eadie deserves some congratulations on having the motion debated tonight.

"They never die who live in the hearts they leave behind."

Glasgow Celtic's manager, William Maley, penned that tribute at the time of the untimely death, at just 22 years old, of John Thomson, the first-choice Glasgow Celtic goalkeeper.

Scotland-born author Tom Greig recently spoke to the Celtic Connection website about his newly published book, "My Search for Celtic's John". He said:

"If I were to take you today some 70 odd years on to the grave of John Thomson, it would still be maintained with dignity and care and visited by football fans, not just Celtic fans but of other clubs, because he was a Scottish international goalkeeper."

He went on to say:

"What always intrigued me was the uniqueness of John Thomson that he should be remembered when statues of great parliamentarians are entertained in street squares only by pigeons—yet a 22-year old boy could inspire such affection and love"

in all those around him.

Among John Thomson's many attributes, he was known as the prince of goalkeepers and, as Helen Eadie said, as a gentleman on and off the field. He was also a deeply religious man, having been brought up by his parents in the Protestant sect called the Church of Christ. Thomson carried

his faith and his Bible with him throughout his outstanding and exceptional career. Football fans came from all over just to see John Thomson in action on the playing field, and they were awed and inspired by his physical prowess. It was said that his eyes never left the ball on the field, and he was renowned for his bravery and fearsomeness. People who are involved in football say that someone who goes in hard will come out the other side okay and that someone who tackles hard will be all right. Tragically, however, as far as John Thomson was concerned, that was not how things transpired.

There is another side of the story that is not often talked about—another tragedy that happened to Sam English, the footballer who happened to collide with him that day. He was born in Ireland, in County Coleraine, but he grew up in Yoker in Scotland. During the 1930s, he played with Rangers and held records for Rangers for the most goals scored in one season. The official inquiry into the incident said that it was an accident and cleared Sam English of any blame—a view that was fully supported by John Thomson's family. He later transferred to play for Liverpool and also played for Ireland a number of times. No one ever seriously accused Sam English of malice in that situation, but he was constantly barracked by Scottish crowds, which caused his transfer to England, where he found that his reputation had preceded him and that he faced constant barracking from spectators when he played in England too, so he gave up football. He died at the Vale of Leven hospital in West Dunbartonshire aged only 58. A nurse who nursed him at that time said that he died before his time and looked very old. Therefore, two tragedies are associated with the death of John Thomson.

The song "Johnny Thomson's Ghost" is still sung by Celtic supporters:

"So come all you Glasgow Celtic
Stand up and play the game
For between your posts
There stands a ghost
Johnny Thomson is his name".

John Thomson played in goal for Glasgow Celtic for the first team when he was, I think, only 17—it might have been 18 as Helen Eadie suggested. He also made four appearances for the national team.

As Helen Eadie said, 40,000 mourners turned up for his funeral; some of them had walked 55 miles from Glasgow to John Thomson's childhood home. I have a good friend in Milnathort called John Watt, who is a singer. He wrote "The Kelty Clippie" and "Methil by the Sea", but he also wrote the words:

"Between the posts at Parkhead
He was the Prince of Men

John Thomson came from Bowhill
Bowhill, Cardenden".

Two special trains left Glasgow on that day to come to Bowhill and many people slept on the crags along the line that night. The Bowhill pipe band and the Bowhill silver band were in attendance and, as Helen Eadie said, an aeroplane landed in the Daisy park in Bowhill.

John Thomson came to play for Celtic by chance. One Saturday he was playing for Wellesley Juniors—a pit team—against Denbeath Star. A Celtic scout at the game saw him play and signed him up. In his first game, Celtic won 3-1 in front of 20,000 supporters at Dens park. He was a hero from the first day he played for Celtic.

John Thomson's part of Fife is a tremendous area with a great history in the sport. It has produced a remarkable number of professional footballers: 50 players from the Cardenden area have played in the professional leagues in Scotland. John Thomson was perhaps one of the best of them all.

17:22

Mr Jamie McGrigor (Highlands and Islands (Con): I congratulate Helen Eadie on securing the debate. Until I read her motion, I had little knowledge of John Thomson, but since then I have found out how much he meant to so many. I was reminded of the lyrics of a John Lennon song:

"A working class hero is something to be".

This man was certainly a hero and he is a legend. It was a tragedy that he was accidentally killed, aged only 22. They say that only the good die young. The epitaph on his gravestone says it all:

"Honest and upright he played the game
Loved and respected he made his name".

People today would do well to follow that inscription if they want to live a useful and happy life.

I agree with Helen Eadie that John Thomson should be in the Hampden hall of fame. I was lucky enough to spend a day at Hampden recently, at sportscotland's annual general meeting. Afterwards, I visited the excellent museum, which includes the hall of fame, where I was asked to nominate a player. I looked at who was already in the hall of fame, and I chose wee Willie Henderson—the Rangers and Scotland right winger—who I believe was never really recognised. In the 1960s and early 1970s his dribbling and passing skills brought gasps of admiration.

I come back to John Thomson. He is the man who, as the Celtic goalkeeper, put Bowhill on the map. It is staggering to think that 30,000 to 40,000

people went to his funeral and that people from all over the world attended it. As Bruce Crawford said, the Bowhill pipe band and the Bowhill silver band were there and an aeroplane arrived and landed in Daisy park.

John Thomson's excellent record on the pitch speaks for itself at domestic and international level. It interested me that John Thomson, the miner's son from Fife, was—unlike most of his team-mates—a Protestant. I did not know that. One would think that in those days he might have found it difficult to win acclaim, but that was not the case, because people like John Thomson are bigger than religious intolerance. He inspired respect: people like him set a shining example, on and off the field, which is worth following. His huge fan club is the best testament to that. In 1993, he had a street—Thomson Court—named after him.

I agree with Helen Eadie that since we have a hall of fame, John Thomson should be in it both as a footballer and as a man.

17:25

Trish Godman (West Renfrewshire) (Lab): I, too, congratulate Helen Eadie on the motion. When I read and signed it, I recalled my father talking to me about the brave young goalie John Thomson. It was the view of my father, among many others, that John Thomson would have been Scotland's goalkeeper for at least another 10 years. That was certainly the opinion of the sportswriter John Rafferty, who said of that young man:

"A great player, who came to the game as a boy and left it still a boy; he had no predecessor, no successor. He was unique."

Few, if any, would dispute that opinion.

John Rafferty later taught me at school and talked a lot about Celtic, Rangers, football in general and boxing, and he talked a lot about John Thomson in particular. Indeed, if he had talked as much about my schooling, I would have passed my qually, but I was too interested in listening to the football stories that he had to tell.

John Thomson was unique, certainly when compared with some of today's football heroes. In those days, earnings were not as they are now. Players had to have another job, so he worked in a gents retailers in Renfield Street in Glasgow. He knew that he would not play football for ever and needed something to fall back on. A quiet, unassuming young man, he was walking out with a young Glasgow girl, who was at the match the day he died. Because of his football talent, he avoided a lifetime down the mines. He loved football. The future looked good.

As Bruce Crawford said, John Thomson was discovered by the Celtic scout Stevie Callaghan. I declare an interest because, although Stevie Callaghan was a bit old for me, I had a notion for his grandson, who was in my class at school; I am afraid that I did not get very far with that. Stevie and my father used to say that John Thomson always went for the ball. He was fearless in front of his goal. One moment he was flying through the air like a ballet dancer, the next he was in the middle of a scrum, his hands and body wrapped round the ball, while at the same time trying to hold on to his bunnet.

Speaking as a lifelong football supporter—many members know that on a winter's night I run from here, get all my thermals on and run to watch a football game—I add my voice to those of others who have supported Helen Eadie's powerful case for this young player's memory to be honoured in the SFA hall of fame. There are few now who can recall seeing this gifted goalie play for Celtic and Scotland—they would need to be in their late 80s or their 90s to have seen him play. However, John Thomson is an abiding figure in Scotland's footballing history—a decent, modest young man who enjoyed the love and affection of his family and the respect and admiration of scores of thousands of Scots. Today, we would describe him as an exemplary role model for youngsters.

Helen Eadie is right when she says that even though many of those who knew John Thomson are themselves no longer with us, his memory should be honoured by his inclusion in the SFA hall of fame. I hope that those with the authority to make that decision will heed the sincere request from Fifers and those of us from other parts of Scotland to honour in that way the memory of young John Thomson—a truly remarkable Scottish football player.

17:28

John Swinburne (Central Scotland) (SSCUP): I thank Helen Eadie for giving us this opportunity to pay tribute to one of Scotland's outstanding football personalities, John Thomson.

I should declare an interest as I am a director of Motherwell FC, one of the finest exponents of Scottish football.

I remember working in the shipyards with an old chap called Pat McGinley. He worked away quietly—he was a tremendous engineer and fitter—but he was always singing a song of praise to John Thomson. I will not sing it—I will spare members that—but the song went:

"From out a west Fife village,
Of mining stock he came
To play for Glasgow Celtic
And make himself a name."

Everything that I was going to say in this speech has been said, but instead I will describe what happened when, as a good Motherwell supporter, I went to Parkhead in the early 1960s to see two former Motherwell centre-forwards playing in opposition to each other. Joe McBride was playing for Celtic, and Ian St John was playing for Liverpool. I managed to get a ticket for the Celtic end. Neutral fans would generally try to avoid the Celtic end, but I went there because I was desperate to see those two former Motherwell centre-forwards competing at Parkhead in an excellent European game.

We were standing there, packed like sardines, and the fans were singing rebel songs and other songs. A big chap turned round, pointed towards me and said, "He's no singing." I did not know the words to the song. The fans then broke into a song of praise to John Thomson and the words of old Pat McGinley came floating back to me. I could sing them as well as anyone in the crowd and they eased off after that. John Thomson got me out of trouble that day.

Our national stadium contains a hall of fame, which commemorates players and personalities who are deemed to have brought credit to the Scottish football scene. No one has brought more credit to the game than did the unfortunate John Thomson, who died in his prime at the age of 22. It would be remiss of the SFA not to act. The next time that I see David Taylor, I will tell him to get the lad's name in the hall of fame. There are many other players who should also be included in the hall of fame, but there is no one else who contributed quite so much to football or who literally gave their all to the sport.

The hall of fame is a post-war thing. I think that that is the only reason why John Thomson is not already there. That will be rectified by the football authorities. I am positive that we will be able to go proudly to the hall of fame and see John Thomson's name there.

The little ditty from old Pat McGinley ends:

"Come all you Celtic players,
Stand up and play the game.
Between the posts there stands a ghost.
John Thomson is his name."

I thank Helen Eadie once again for securing the debate. It is a pleasure to have contributed a little bit to it.

17:32

Michael McMahon (Hamilton North and Bellshill) (Lab): I should possibly declare an interest as a member of the Carfin (1948) Celtic supporters club. I had not originally intended to speak in the debate, but I said that I would support Helen Eadie today, as I supported her motion

when she lodged it some time ago. I have something else that I have to go to this evening, but the more I heard people talking about John Thomson, the more I felt I had to make a contribution.

At the weekend, as we watched the burial of a legend of football, George Best, I was thinking how appropriate it was that in the same week we would have a debate on the death of a genuine Scottish legend, John Thomson. As I was sitting with my children, talking about the images that we were seeing on the television, with tens of thousands of people lining the streets of Belfast to honour George Best, I, like Helen Eadie, recalled how, at a time when transport, the media and people's financial resources were not as they are now, 30,000 football supporters still made the journey to the graveside in Cardenden to pay tribute to a man whom they had watched in their day.

As a Celtic-minded person, I was raised in that tradition. I remember learning at my father's knee about John Thomson, and my father had had the story passed on to him by his father. I visited John Thomson's grave. I felt that, as a Celtic supporter, it was my honour and privilege to do so. Indeed, I encouraged my own children to do the same and they have done so. I hope that they will pass it on to their children.

We have to keep alive the memory of legends such as George Best and John Thomson, because they are what football is all about. We got the good and the bad with George Best; all I ever heard about was the good of John Thomson. As a Celtic-minded person, I find it easy to discuss with my friends and fellow supporters traditions, history and people such as John Thomson, but it is unfortunate that outside that Celtic family too few people know about John Thomson. That has to be rectified because he was a giant of the game just as George Best was.

For that reason, I had no hesitation in supporting Helen Eadie's motion. It is good that she has brought the matter to the Parliament's attention. If we can get more people to learn about John Thomson, all the baggage that comes with Scottish football might start to dissipate and we might start to make progress in tackling sectarianism and taking that aspect out of Scottish football. We should do that in his honour and in his memory, of which Celtic-minded people are proud.

In honouring John Thomson in the way that Helen Eadie has requested, the SFA would be doing a service not only to Scottish football but to wider Scottish society. We need more people to learn about that remarkable young man.

John Swinburne mentioned the song about the ghost of John Thomson standing in the goals. As a

Celtic supporter I often wonder whether that ghost is just too big for Celtic. Celtic is traditionally associated with attacking football—our number 7 is the greatest known to football fans anywhere. However, Celtic has not had a great tradition of goalkeepers. We have had Ronnie Simpson and Pat Bonner and we might have a great goalkeeper in Artur Boruc now. Celtic has not had the number of goalkeepers that it should have had. Perhaps in honouring John Thomson, we will lift the burden from the goalkeepers who have had to fill the gap that he left.

Before I sit down, it would be remiss of me not to take the opportunity to utter the words “hail, hail”, because this might be the only time that we have a debate in which I can get away with it.

17:37

The Minister for Tourism, Culture and Sport (Patricia Ferguson): I congratulate Helen Eadie on securing the debate and congratulate the members who have contributed to what I think has been an interesting, informative and worthwhile debate.

I, like others, am pleased to be here this evening to contribute to a debate that honours the memory of a young man who achieved much in a career that was cut short tragically and who continues to hold such a special place in the annals of our national game. As Trish Godman said, many of us heard about him at an early age from fathers, grandfathers and other family members who perhaps remembered the tragic day when he died. Fortunately, accidents such as that which befell John Thomson are extremely rare in football. Only two other people have died as a result of injuries received playing top-level football in Scotland: one in 1890 and one in 1909.

The motion recognises the high esteem in which John Thomson was held by Celtic Football Club and its supporters in the mining community in which he was born in Fife and in Scottish football generally—an esteem that is remembered to the present day. His great skill and ability earned him representative honours as well as success at club level and there is no doubt that he would have achieved further success and recognition if he had been able to enjoy a longer career in football.

Bruce Crawford quite rightly told us the interesting story of how John Thomson began his career with Celtic almost accidentally. It is worth adding to that story by pointing out that times certainly have changed, because I understand that Celtic bought John Thomson for just £10.

The motion refers to John Thomson's contribution as a role model for young people in his own and subsequent generations. By all accounts he was a quiet and unassuming young

man but, when he took the field, he impressed with his ability, agility and bravery.

None of us had the pleasure of seeing him play, but one man who did was his manager, Willie Maley, who wrote:

“His merit as a goalkeeper shone superbly in his play. Never was there a keeper who caught and held the fastest shots with such grace and ease. In all he did there was the balance and beauty of movement wonderful to watch.”

I think that it is excellent that we have sports halls of fame and rolls of honour that enable us to recognise great sporting achievements and let past champions motivate and inspire future generations to participate and excel at their own level. The Scottish Executive has been pleased to support the sporting champions scheme, for example, which assists and encourages the current generation of sportspeople to visit schools to promote the value of a healthy lifestyle, including participation in physical activity and sport.

The motion calls on the SFA to induct John Thomson into the Scottish football hall of fame, but I understand that it is not the SFA that is responsible for deciding on inductees and that, in fact, the hall of fame is administered by the Scottish Football Museum. Nominations are made by the general public and the museum convenes an expert panel of football panellists and former players who reach the final decisions. The criteria that the panel uses to assess nominations include, for example, the person's contribution to Scottish football and the longevity of their career at the top level. It is not just about honours won, as that would of course favour old firm players.

However, although I understand that the hall of fame needs to control the number of people that it inducts and ensure that its inductees are of the highest-possible level and that John Thomson's career was not as long as others—although there are few players who play until the end of their working lives—I think that the longevity that matters in this case is the longevity of his memory, which lingers to this day. For that reason, he should be inducted into the hall of fame.

To reflect a point that one of my colleagues raised earlier, I understand that one of the criteria is that the person must have been born in Scotland. If it were not for that unfortunate requirement, I would also have wanted the induction of Sam English, who was equally a victim of this tragedy.

Regardless of whether John Thomson is inducted, his name and his contribution to Scottish football are unlikely ever to be forgotten. Few players who played in that era are still sung about by the supporters of their club and have their grave visited by their fans. Of course, even fewer

are celebrated in a Parliament that did not even exist at the time of their death.

Meeting closed at 17:42.

I wish Helen Eadie success in her campaign. Further, I look forward to accompanying her to a football game in the near future.

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