

MEETING OF THE PARLIAMENT

Wednesday 27 May 2009

Session 3

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SCOTTISH MINISTERS AND LAW OFFICERS

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MINISTER FOR PARLIAMENTARY BUSINESS—Bruce Crawford MSP

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PARLIAMENTARY BUREAU

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27 May 2009

Scottish Parliament

Wednesday 27 May 2009

[THE PRESIDING OFFICER *opened the meeting at 14:30*]

Time for Reflection

The Presiding Officer (Alex Fergusson):

Good afternoon. As always on a Wednesday, our first item of business is time for reflection. Our time for reflection leader today is Andy Brookes from the National Prayer Breakfast.

Andy Brookes (National Prayer Breakfast):

Many thanks to the Presiding Officer for the opportunity to address members today.

Yesterday, Michael received “the letter”—not unexpected, given the rumours and the half-year results, but a rumour is very different to having the letter in your hand. Michael knew that he was in good company, locally and nationally, but this was his letter, from his employer. It had been handed to him in a perfunctory meeting with someone from human resources. It stated:

“In our meeting today, I confirmed that following the conclusion of the consultation process, your role will become redundant on 27 June 2009.”

He read it and reread it.

Michael became a Christian only recently, committing his life, warts and all, to Jesus Christ. In that short time, one of the truths that he had come to know as bedrock was that God was God over the whole of life. Not that he had ever articulated it, but his assumption had hitherto been that, if Christians were right about God and Jesus, the deity’s interest was limited to churchy things—prayer and so forth. However, as the roots of discipleship grew into the Bible-enriched soil of his life, Michael saw how false that was. The whole of his life was under God’s loving gaze. God had commands, advice and wisdom for all areas of life, and—wonder of wonders, especially to Michael, who had always been a self-sufficient sort of bloke—the grace thing. Churchy word, grace, but Michael, in his pragmatic way, had translated it as “good stuff from God that we don’t deserve.”

So as he stood in the kitchen with his letter, he acted out that truth. He prayed, with his redundancy letter held high, the simple prayer:

Lord, I trust you. Show me the way to go; and keep my spirits up.

No flashes of light, but a reassuring sense of presence was God’s answer.

Let us pray.

Lord, we pray for all in this Parliament, for those in the public gallery, this city, this nation, for me, that today and always we would, like Michael, know your loving gaze over the whole of life; your wisdom for living; and, above all, your grace in Jesus to live humbly, obediently and with joy before you. Amen.

Business Motion

14:34

The Presiding Officer (Alex Fergusson): Our next item of business is consideration of business motion S3M-4237, in the name of Bruce Crawford, on behalf of the Parliamentary Bureau, setting out a revised business programme for this afternoon.

Motion moved,

That the Parliament agrees—

(a) the following revision to the programme of business for Wednesday 27 May 2009—

after

2.30 pm Time for Reflection – Andy Brookes,
National Prayer Breakfast

followed by Parliamentary Bureau Motions

insert

followed by Ministerial Statement: Open Prisons

and (b) the following revision to the programme of business for Thursday 28 May 2009—

delete

2.55 pm CashBack for Communities:
Investing the proceeds of crime back
into our communities

and insert

2.55 pm Commissioner for Public
Appointments in Scotland –
Reappointment

followed by CashBack for Communities:
Investing the proceeds of crime back
into our communities—[Bruce
Crawford.]

The Presiding Officer: I thought that a member wished to speak against the motion, but they did not.

Motion agreed to.

Open Prisons

The Presiding Officer (Alex Fergusson): The next item of business is a statement by Kenny MacAskill on open prisons. The cabinet secretary will take questions at the end of his statement, which will last for 10 minutes, so there should be no interventions or interruptions during it.

14:35

The Cabinet Secretary for Justice (Kenny MacAskill): I would like to take this opportunity to address Parliament on a matter that I know is a cause of considerable public concern, namely the abscond of Brian Martin from Castle Huntly open prison on 18 May 2009. I am pleased to confirm to Parliament that Mr Martin has been returned to custody and that he appeared in court at Perth yesterday to face charges of being unlawfully at large. He received an additional four-month sentence.

Mr Martin absconded from Castle Huntly open prison on Monday 18 May 2009. He had been transferred to the open estate on 27 April and his community access had not yet been approved. Martin is serving a sentence of 10 years and qualifies for parole in September 2010. Prior to being transferred to the open estate, he was located in Her Majesty's Prison Shotts.

Last year, I confirmed to Parliament that I had instructed the Scottish Prison Service that when an individual absconded from open conditions there would be a presumption against that individual returning to open prison, and that any decision to the contrary would have to be authorised directly by a senior member of staff in SPS headquarters within the prisons directorate. Those changes and tighter criteria have resulted in a significant—indeed, a record—decline in absconds. The final decision on and responsibility for the transfer to open conditions rests with the prison governor. However, as I have said, when there is a history of previous absconding, that decision should be referred to SPS headquarters.

As a result of Brian Martin's absconding, I wrote to the SPS on the morning of 21 May and asked it to review the circumstances surrounding his transfer to Castle Huntly. I was advised by SPS on Monday—the same day that Martin was returned to custody—that he had absconded previously, albeit 22 years ago. The SPS has apologised to me for what appears to have been a failure in its information-sharing processes.

The SPS has already instructed a senior governor from another prison to carry out an internal review into the circumstances surrounding the transfer of Brian Martin. However, I believe that it is essential that the process that is in place

is as robust as it possibly can be. With that in mind, Professor Alec Spencer, who was governor of Peterhead, Glenochil and Saughton prisons, has agreed to conduct an independent review of the circumstances surrounding the transfer. Professor Spencer has the practical experience of dealing with some of Scotland's most hardened criminals. He is also a respected academic and widely acknowledged expert on prison matters.

As I said, tighter criteria for transfer to the open prison estate were introduced last summer. I have asked Professor Spencer to conduct an independent review of the decision to send Brian Martin to open conditions, and, in light of that review, to consider whether the new criteria for transfer to the open estate are being properly applied in all cases.

It would appear that the process that I put in place following the Foye case last year was not, in this instance, properly followed by staff within the Scottish Prison Service. That is not a situation that I or, indeed, any of us finds acceptable. If the process had been properly followed, the likelihood is that Martin would not have been transferred to the open estate.

Since the introduction of the new criteria post Foye, we have seen the smallest ever number of absconds from the open estate. In 1993 there were 95 absconds, in 2006-07 there were 79 absconds and in 2008-09 there were 16 absconds. I am happy to place the figures in the Scottish Parliament information centre today. As I have said before, one abscond is one too many, and I still believe that to be the case, but as long as we have an open prison estate, there will be occasions when individuals betray the trust that has been shown in them by absconding. We must ensure that the processes that we put in place are as robust as they can be.

There is a consensus in the Parliament and beyond that the open estate plays a valuable role in preparing long-term prisoners for eventual release. Henry McLeish said in his report:

"Scotland also needs a well-run open estate because it is not in the public interest to release long-term prisoners from closed institutions without preparing them for release and training them for freedom."

In January, the chief inspector of prisons, Andrew McLellan, said:

"the criteria for admission to the Open Estate have been tightened considerably."

It would be wrong of me or any of us to prejudge Professor Spencer's findings. Nevertheless, if he confirms that there has been a significant failure of process in this instance, I would expect the SPS to address that failure. Given that that may include disciplinary action, it is appropriate that we await Professor Spencer's findings before drawing any

further conclusions on the point. I have asked Professor Spencer to submit his report to me before the summer recess. I intend to publish that report and I will meet the chief executive and senior management of the SPS to review the findings of the inquiry and to agree with them whatever actions may be necessary.

The Government has gone further than ever before in ensuring that the most robust safeguards possible are applied when it comes to transferring prisoners to the open estate. The measures that I have outlined today will ensure that those safeguards are subject to even closer scrutiny.

The Presiding Officer: The cabinet secretary will now take questions on the issues that have been raised in his statement. We have around 20 minutes for such questions.

Richard Baker (North East Scotland) (Lab): I thank the cabinet secretary for the advance copy of his statement.

Does the Cabinet Secretary accept that the escape of this violent offender has, once more, damaged people's confidence in the open prison estate and in his ability to provide leadership in ensuring the protection of the public in this country? Only last year, after Robert Foye's escape from Castle Huntly, the cabinet secretary said that mistakes would be learned from, so how and when was it decided that Martin was fit to be introduced to an open prison environment? Who authorised that move? In his statement last year, the cabinet secretary said that such decisions would be made at the most senior levels. Was he involved in the decision or even aware that it was being made? Is it not simply unacceptable to blame civil servants when such issues of public safety are ultimately the cabinet secretary's responsibility? If Professor Spencer's report confirms that there has been a significant failure of process in the Martin case, will the cabinet secretary seriously expect us to believe that he bears no responsibility for that?

The issue concerns not simply the number of prisoners who abscond—one abscond is one too many—but the question of who, in the light of experience, is deemed to be fit to be placed in the open estate. If the cabinet secretary now accepts that it was wrong for that man—who had a history of violence and going on the run—to be placed in the open estate less than halfway through his sentence, is it not self-evident that only a year after he gave similar assurances to Parliament after the Foye case, that response has been found wanting? In that light, how can we now accept his assurances that the mistakes will not be repeated?

Kenny MacAskill: My position on the issue as cabinet secretary is the same position that was taken by the Minister for Justice during the Liberal-

Labour Administration—the position has not changed. I cannot prejudge Professor Spencer's report, but I assure Mr Baker that we will take on board any issues that it raises. Any points that relate to general presumptions and criteria will be dealt with, if necessary. If, as I said, matters relating to internal discipline are raised, they will be considered.

With regard to the decision to transfer Mr Martin to the open estate, I must say that such decisions are approved by the governor in charge or by his or her nominated representative. Following the Foye case, the initial decisions are now taken at a multidisciplinary case conference, which is attended by a range of individuals from within the establishment. The membership of that group includes prison managers, a social worker, a psychologist, a member of the health care team and a representative of the prisons security department, to ensure that the fullest possible information is available. We will deal with any matters that need to be reconsidered following an internal review and Professor Spencer's review, but that is currently how decisions are taken. We should all take on board the fact that absconds are now one fifth of what they were when Labour was last in office.

Bill Aitken (Glasgow) (Con): I thank the cabinet secretary for early sight of his statement.

It is a serious matter that Mr MacAskill has to appear before members in the chamber to explain for the second time in a year how a dangerous prisoner has been able to abscond from the open estate. On the previous occasion that a prisoner absconded, there was a tragic consequence, but fortunately that did not happen in the Martin case. That would have been not only tragic but probably terminal for the cabinet secretary.

Does the cabinet secretary agree that it is absolutely outrageous, and an affront to justice, that a man with a violent history should, under any circumstances, be transferred to the open estate only three years into a 10-year sentence? Should it not be a requirement that any prisoner who is serving a high-tariff sentence for violent or sexual crime should spend at least 80 per cent of that sentence in the closed estate?

Mr MacAskill cannot be held responsible for the errors that might have arisen in the Martin case through lack of communication. However, does he agree that the present situation is simply unacceptable and that, instead of asking Professor Spencer to review the particular circumstances of the Martin case, it might be better to have a more general review of the policy that the SPS applies to such transfers?

Does Mr MacAskill agree that it is high time that he exercised a much more hands-on approach to

the running of prisons in general, and to the transfer of prisoners to the open estate in particular? In short, does he agree that the buck stops with him?

Kenny MacAskill: I have made it clear on previous occasions and again today that any abscond is a matter of concern and must be addressed and tackled. We must recognise, however, that there is still a requirement for an open estate—I take it that whatever Mr Aitken is suggesting, it is not the abolition of the open estate.

As Mr Aitken will appreciate, the Parole Board for Scotland recommends people to be placed in the open estate. That happens so that the Parole Board can be assured that people have been tested to see whether they are suitable for parole. The very fact that someone appears before the Parole Board shows that they are there not for a parking offence but because they have committed a serious offence.

We live not just in a world of the European convention on human rights but in a world that we inherited from the Administration of Mr Aitken's party. People are given determinate sentences, which means by definition that they will be released. If we are to release them, it is clear that the open estate can play a significant role in ensuring that they restructure their lives and have opportunities to re-engage with their families. We have an opportunity to see what can be done to ensure that they are fit to be released back into our communities, because they have to be released, just as people had to be released under the Tory Administration.

I assure Bill Aitken that we have tightened up the criteria. Following the Robert Foye case, we introduced a presumption against abscondee's returning to the open estate. Under the Liberal and Labour regime, and indeed under the Conservative Government at Westminster, there was no presumption against going back to the open estate. We have tightened things up. I assure Bill Aitken that we will learn from Professor Spencer and take his findings on board. As I said, however, the number of absconds is a fifth of what it was in the last year of the Labour Administration and an eighth of what it was in the last year of the Conservative Government.

Robert Brown (Glasgow) (LD): I, too, thank the Cabinet Secretary for Justice for an advance copy of his statement.

Does the cabinet secretary accept that the first and primary role of the justice system is to ensure public safety? Will he clarify what changes he has made to the arrangements since the previous major escape, and will he place in SPICe any relevant documents that confirm the position, for

the information of members and the public? As he said, the open estate exists partly to enable long-term prisoners—who have to come out of prison at some point—to be prepared for release as they near the end of their sentences. By definition, that includes some prisoners who have been a danger to the public, including some with a significant history of violence.

Can the cabinet secretary assure the Parliament that the instructions that the Scottish Prison Service is given allow the open prison estate to fulfil its valuable and necessary function within a framework of robust and challenging risk assessments, to ensure that the wrong people are not sent to Castle Huntly? Can he assure us that Professor Spencer's remit will keep things in balance? Finally, how will prisoners who represent a higher than normal risk and perhaps have a record of absconding from the open estate be assessed with a view to the maintenance of public safety?

Kenny MacAskill: I confirm that public safety is paramount in all action that the Government takes on justice. We made changes following the Robert Foye case, which I remind the Parliament was investigated not only by the Scottish Prison Service but by the McLeish commission.

The seven key recommendations that were made following the Robert Foye case have been implemented: first, that a multidisciplinary progression meeting should take place before the transfer, involving prison managers, social workers, psychologists and other professionals; secondly, that a home background report should be provided before the transfer; thirdly, that clear protocols should be established to ensure the sharing of relevant intelligence information; fourthly, that standard report formats should be introduced; fifthly, that a case management meeting should be held in the open estate as soon as possible after transfer; sixthly, that a standard abscond risk assessment should be introduced; and seventhly, that training should be increased for SPS staff who conduct risk assessments. We also made it clear that there would be a clear presumption against the SPS's returning to the open estate anybody who had absconded.

I reassure Mr Brown that, as I said earlier, we will consider carefully Professor Spencer's conclusions. He will consider how the system has perhaps let us down. The criteria were working until the glitch, and we have to ensure that that is addressed. If there are broader lessons to be learned from Professor Spencer, we will take them on board. I accept Mr Brown's point that the open estate is necessary and that we have to check those who go to it. Ultimately, that is a judgment call for individuals, who must be as well versed

and well trained as possible. That is why there is broad input and a variety of criteria.

We must recognise that, sadly, some people will breach the trust that is placed in them. Thankfully, however, the number of absconds is at a record low, and I hope that that remains so.

The Presiding Officer: We move to open questions. Time is against us, so I am going to have to hold each member strictly to one question.

Stewart Maxwell (West of Scotland) (SNP): The cabinet secretary has described in some detail the process leading to the decision to send someone to an open prison. What procedures are followed when prisoners abscond?

Kenny MacAskill: I acknowledge members' great concern about what are operational matters. The SPS and the relevant police authorities have their own procedures which, in this case, are all about co-operation, synergy and integration. The SPS ensures that all its information on the abscondee is made available to the police, who are, after all, the ultimate guardians of public safety.

Helen Eadie (Dunfermline East) (Lab): Last Friday, at my surgeries at Ballingry and Keltie, I witnessed the fear and consternation of local people, who told me that, after hearing that Lord Wheatley had described Brian Martin as the most dangerous man in Britain in sentencing him, they were locking and bolting their doors and windows. Those people want the Parliament to ask the cabinet secretary many questions, but on their behalf I want to know whether, given the cabinet secretary's statement that Professor Spencer will submit his report before the summer recess, he will require that report to be with him a week before the recess to ensure that the Parliament can have a full debate on it in the last week.

In addition, on 1 July last year, Henry McLeish said in his report to the Scottish Government that violent prisoners should not be placed in open prison. What does this incident say about the value judgments of the cabinet secretary and the First Minister?

Kenny MacAskill: I cannot prejudge any decision about the timing of parliamentary debates, because that is a matter for the Parliamentary Bureau. However, I give Mrs Eadie the same assurance that I gave in my statement: we have asked Professor Spencer to ensure that the report is available before the summer recess. If it is the Parliament's will that the report be debated, I am sure that the Parliamentary Bureau will consider and reach a conclusion on that. However, I assure Mrs Eadie that we will try to ensure that the report is available for appropriate consideration at that time.

John Lamont (Roxburgh and Berwickshire)

(Con): The cabinet secretary has confirmed that the responsibility for the final decision on transfer to an open prison rests with the prison governor. However, given that a governor might be subject to political pressure to free up prison space, will the Government consider giving complete responsibility for such decisions to the Parole Board?

Kenny MacAskill: No, that would not be appropriate. The Parole Board's task is already significant. In any case, there are checks and balances. For example, the board might ask for a prisoner to be tested in the open estate, but the prison governor or those on the multidisciplinary group or at SPS headquarters who have specialist advice and know the prisoner better might conclude that such a move would be wrong.

We must ensure that the system operates appropriately. Professor Spencer will examine whether the SPS's structures and processes are being followed properly, and we will learn any lessons that have to be learned. However, I think that it is appropriate for the Parole Board, the SPS and prison governors to continue to play their particular and separate roles. In certain instances, they will work together and conclude that it is appropriate to test someone in the open estate. However, we need the fail-safe because, as I said, the Parole Board might ask for someone to be tested but the prison governor might say, "That's not wise." Frankly, I will stick with the judgment of the governor who has the prisoner in his institution.

Andrew Welsh (Angus) (SNP): Will the cabinet secretary acknowledge the work, expertise and dedication of the open prison staff at Castle Huntly and agree that, although the blame rests with the prisoners who abuse their privileged prisoner status, the onus is on multidisciplinary progression management groups to adopt the precautionary principle and ensure that they take the greatest care in choosing prisoners for a privilege that has to be earned—and, indeed, has to be seen to be earned?

Kenny MacAskill: Absolutely. I am already on record as praising SPS staff, and I do so again. Those who work in the open estate, not just at Castle Huntly but at Noranside in my colleague John Swinney's constituency and in the independent living unit at Cornton Vale, where female prisoners are entrusted with preparing themselves for going back into their communities, do a valuable job.

Andrew Welsh is correct. Indeed, I said in response to Mr Baker's questions that the precautionary approach must be primary. At the end of the day, the issue is the safety of our communities and the public. The criteria have

been tightened up and they have been working—as I said, the number of absconds is at a record low—but we must ensure that the procedures operate appropriately. That is why I have asked Professor Spencer to conduct a review. We will learn from that and act on any advice and recommendations that he gives us.

Mike Pringle (Edinburgh South) (LD): People who live in the Castle Huntly area have to live with Castle Huntly prison on their doorstep. How will the cabinet secretary address public concerns and reassure people who live in that area that their safety is paramount?

Kenny MacAskill: I say to Mr Pringle that their safety is paramount. He makes a valid point. Those who live in the area are closest to the coalface, and we must ensure that their safety is addressed and that their worries and concerns are dealt with. From my experience of visiting Castle Huntly and meeting its staff, the visitors committee and local authority representatives from the area, I know that there is acceptance of the benefits that can be obtained from the prison, such as jobs for locals in that area.

I return to the point that Mr Welsh, Mr Baker and others have correctly made: we must take a precautionary approach, because the safety of members of the public, especially those who are located closest to the institution, is paramount. The Scottish Prison Service, the prison's staff and I are more than happy to work with the community to allay its fears. Mr Welsh and others know about that.

Cathie Craigie (Cumbernauld and Kilsyth) (Lab): Less than nine months ago, following Robert Foye's brutal attack on a young girl in my constituency, the cabinet secretary said:

"We ... want our communities to be kept safe from harm and from dangerous individuals ... We must learn from mistakes".—[*Official Report*, 26 March 2008; c 7310.]

The cabinet secretary has told us today that the process that he put in place was not followed. It is outrageous that, again, a dangerous criminal has been let loose in our communities. Will the cabinet secretary say exactly what lessons have been learned? Did the Government learn anything from the Foye case?

Kenny MacAskill: It appears that there has been a process failure. That is why there is an internal review by the Scottish Prison Service—which has already brought some information to light—and why Professor Spencer will conduct an external review. Action was taken and lessons were learned post the Robert Foye case.

I have narrated the seven criteria that were introduced and talked about the presumption against returning individuals to the open estate. We have significantly reduced the number of

absconds—it has fallen to 16 from 79, which was the number in 2006-07, when we took over from the Administration of which Ms Craigie was a member. The clear lesson that we learned from the Robert Foye case is that there should be a clear presumption against returning to the open estate somebody who has absconded. That does not mean that the presumption cannot be overridden, but there must be clear evidence for doing so. Such a presumption did not exist during eight years of a Labour Administration or under a Tory Government south of the border. We acted and introduced a clear presumption, and we have delivered a reduction in the number of absconds from 79 to 16.

Margo MacDonald (Lothians) (Ind): The cabinet secretary has acted entirely properly in this instance, but, without compromising Professor Spencer, will he expand on his statement that

“If the process had been properly followed, the likelihood is that Martin would not have been transferred to the open estate”?

It seems to me that there may be room for exceptions, as indicated by the very short additional sentence that was handed down to Brian Martin afterwards.

Kenny MacAskill: As I have said, criteria were brought in post the Robert Foye case to tighten up a system that had existed for more than 50 years. It is clear that people can go to the open estate in the very early part of their sentence. Many members accept—indeed, I presume that members uniformly accept—that some people should be sent to the open estate relatively early.

I do not want to prejudge the outcome of Professor Spencer's review. All we can say is that there was a process error, and whatever it was and however it came about will be brought out in Professor Spencer's report. The presumption against returning absconders to the open estate should have applied to Mr Martin and should have resulted in his case being considered at SPS headquarters, but that did not happen. That must be examined. If broader lessons are to be learned, we will learn them, but it is fair to say that people can be sent to the open estate two years before the earliest possible consideration of their parole.

The Presiding Officer: I will take a little time out of the next debate to take a final question from Joe FitzPatrick.

Joe FitzPatrick (Dundee West) (SNP): I welcome today's statement, particularly the announcement that Professor Spencer will conduct an independent review. Although the events of 18 May were of some concern to my constituents, we have to be careful not to react without consideration. An independent review will

ensure that we learn properly any lessons that can be learned.

What would the impact be on the Parole Board if the open prison estate did not exist?

Kenny MacAskill: The impact would be substantial. The difficulty would be that the Parole Board would not be able to test individuals who ultimately have to be released. Mr Aitken might shake his head, but we live in a world where people are given determinate sentences that mean they can be released, either because their sentence expires or they are serving a life sentence and are subject to review under the ECHR.

We must recognise that we can no longer transport such people to Botany Bay; we have to address their needs and wants. The importance of the Parole Board is to ensure that we test those people. As I said earlier, they are not in prison for parking offences. We have to ensure that specialists, whether in terms of security, health, knowledge of the locality or mental health, are involved in the decision. Ultimately, we have to recognise that at some stage prisoners have to return to our communities, and we have to ensure that returns are dealt with based on the precautionary principle and according to a flawless process. That is why we will have both an internal review and a review by Professor Spencer.

Influenza A(H1N1)

The Presiding Officer (Alex Fergusson): The next item of business is a debate on motion S3M-4217, in the name of Nicola Sturgeon, on influenza A(H1N1).

15:08

The Deputy First Minister and Cabinet Secretary for Health and Wellbeing (Nicola Sturgeon): I am grateful for the opportunity to open this debate on the H1N1 virus. In doing so, I acknowledge that there might be some who question the necessity of the debate, given the cross-party support for our preparations so far, for which I am grateful. Others might believe that the threat from the virus and, in particular, the threat of a flu pandemic, has gone away. However, it is important for Parliament to stay engaged with the issue for two reasons.

First, as events in the past 24 hours have reminded us, the threat has not gone away—I will update members shortly on developments in the past 24 hours and on what more has been learned about the H1N1 virus since my most recent statement. Secondly, our preparations for a possible pandemic later in the year involve some big decisions with substantial financial implications. It is therefore right that Parliament is not only kept informed but given the opportunity to comment.

I begin with an update on the current situation. As of this morning, the World Health Organization has reported some 13,000 cases in 46 countries across the world, including 92 deaths. The virus is spreading rapidly around the globe and the WHO expects that pattern to continue. It is worth pointing out that the number of laboratory-confirmed cases is likely to be an underestimate of the true situation across the world. In the United States, for example, the number of laboratory-confirmed cases stands at just under 7,000. However, the United States is no longer doing routine laboratory testing and it is believed that the actual number of cases there might be significantly higher than the official statistics suggest.

In the United Kingdom, as of today, there are 185 confirmed cases. As members are aware, that includes the 47 new cases that were confirmed yesterday, 44 of which were in one school in Birmingham. In Scotland, we have 13 confirmed cases, one probable case and 10 possible cases. Five of those possible cases are travel related, while the other five are related to the individual who is in hospital in Glasgow. There is a chance that some of the possible cases will become probable cases later today, but test results are not yet available.

As members are aware, the latest probable case is a 37-year-old Glasgow man who remains critically ill in the intensive care unit of the Victoria royal infirmary in Glasgow. The patient had pre-existing health problems when he was admitted to hospital. Routine testing for a number of viruses identified that the patient was positive for influenza A. He has not yet been confirmed as positive for the H1N1 strain, but that is highly probable. We hope to have test results from the Colindale laboratory later today or, possibly, this evening. Public health officials are tracing and contacting those who have been in close contact with the individual. I will of course keep members informed as the situation develops and I know that everybody will want to send our best wishes to the patient and his family.

Since the first cases were identified in Scotland towards the end of April, transmission has mainly been travel related or through known contacts. However, as the recent cases in Greenock—and perhaps the new case in Glasgow—have shown, we now know that the virus can also spread without any obvious known contact.

Notwithstanding the troubling case in Glasgow, the fact is that we have managed thus far to limit the spread of the virus in Scotland. That is largely due to two factors. The first is the detailed planning and preparations on how best to handle a flu pandemic, which have taken years to complete. The pandemic flu framework, which we published in November 2007 and work on which started under the previous Administration, has stood us in very good stead. So far, we have been successful in preventing any large-scale onward spread to the general population using the containment measures that are outlined in the framework.

The second factor is, of course, the tremendous effort of the health service, local authorities and partner agencies in rising to the challenge and ensuring that the measures that are outlined in the pandemic flu framework are implemented effectively in practice. A third, more fortuitous, factor that might be at play, of course, is that we are heading into the summer period, which—even in Scotland, hard though this can be to believe—is known to slow down considerably the progress of the flu virus.

In any event, the bottom line is that we have not yet seen large numbers of confirmed cases in Scotland. With the obvious exception of the man who is in hospital in Glasgow, it would also appear from the cases that we have had that the strain is relatively mild. However, a key message that I wish to stress is that we cannot afford to be complacent.

That brings me to the science. International understanding of the virus continues to grow. However, many questions about it remain

unanswered. As the director-general of the WHO said last week:

"Influenza viruses are the ultimate moving target. Their behaviour is notoriously unpredictable. The behaviour of pandemics is as unpredictable as the viruses that cause them."

What do we know at this stage? First, the emerging evidence from across the world suggests that younger people are more susceptible to the virus. Accordingly, we need our young people in particular to be vigilant, to be aware of the threat that the virus poses and to follow the advice that has been given on good hygiene practices.

Information from the United States of America and Mexico suggests an attack rate of 22 to 30 per cent, which compares with a seasonal flu rate of 5 to 15 per cent, although, as I have said, recent seasonal flu attack rates in the United Kingdom have been much lower than that. The hospitalisation of confirmed cases ranges from 4 to 6 per cent, and the mortality of confirmed cases ranges from 0.1 to 1.9 per cent. I stress, however, that health care provision in the USA and Mexico is not directly comparable with that in this country, and it is likely that there is a significant number of undetected cases in those countries.

As we know, early experience points to this being an illness with relatively mild symptoms, leaving aside the obvious exception of the current case in Glasgow. However, we need to be quite clear that even mild flu can be unpleasant and debilitating and that, in exceptional cases, flu can cause complications or even deaths.

All in all, although we cannot be certain about anything, we must be prepared for an illness that might affect large numbers of people with symptoms that, although mild, might see them confined to bed for a few days. Members will appreciate that the impact of such a situation on our national health service and our economy could be significant. Even in a normal flu season, the demands on the NHS can put severe pressure on services.

Of course, there is a risk that the virus might mutate and become more virulent during the autumn and winter months. That is why, in collaboration with the other UK Administrations, we are preparing for all eventualities. The biggest decision that we have taken so far is to secure early supplies of vaccine. The day after my last statement to Parliament, letters of intent were signed with drug manufacturers GlaxoSmithKline and Baxter Vaccines to secure up to 90 million doses—on a UK basis—of a pre-pandemic vaccine. That is the first step to achieving 100 per cent vaccine coverage for all the Scottish population. It will take time to reach 100 per cent coverage, but those arrangements provide the

opportunity for us to have, by December, enough pre-pandemic vaccine to protect priority groups and perhaps up to 50 per cent of the population. Precise delivery schedules would be influenced by any decision of the WHO to move to phase 6 of alert, at which point our advance supply agreements will be activated.

Of course, our ability to respond effectively requires much more than the securing of vaccine supplies, and we are doing more. For example, a web and telephone-based system—which will be available, if necessary, until flu line is ready in October—is in the advanced stages of development and will be able to facilitate large-scale distribution of antivirals, should that be necessary. We have also assessed the level of preparedness across individual sectors on a local and national basis. We are confident that organisations are as ready as they can be for a pandemic, with processes in place to take forward identified non-health issues. We will, of course, continue to work closely with our counterparts elsewhere in the UK, to ensure that we are sharing best practice and that we are learning continuously from work that is done elsewhere.

As I said, some of the decisions that we are making have substantial financial implications, so I want to address the question of funding. The measures that we are putting in place to deal with this issue have significant financial implications. Along with the other devolved Administrations and the UK Department of Health, we have prudently budgeted for what can be done in advance of knowing when a pandemic might strike—principally, the stockpiling of antivirals, antibiotics and face-masks. However, like the other UK Administrations, we have not and could not have budgeted for other costs, such as vaccine procurement, as it was impossible to know when or whether those costs might be incurred.

It is our view that those additional costs should be met from UK contingency funds. John Swinney has written to the Treasury to set out that case, as have the ministers with responsibility for finance in Wales and Northern Ireland, and we await a response. I will of course keep members informed of progress in that regard.

In conclusion, our success thus far in limiting the impact of the virus is testimony to the hard work of staff in the NHS, Health Protection Scotland, local authorities and partner organisations. However, we cannot be complacent and must be prepared for all eventualities. I pay tribute again to staff for their outstanding efforts to stop the spread of the virus and to the level-headedness of the public in their response to the evolving situation.

I move,

That the Parliament acknowledges the work of NHS Scotland, local authorities and other stakeholders in handling the recent outbreak of Influenza A (H1N1); commends NHS boards and Health Protection Scotland for the success so far of the containment strategy in limiting the spread of the virus by quickly and effectively treating confirmed cases, tracing contacts and dealing with possible and probable cases; accepts that we must maintain a high state of preparedness given the potential seriousness for the nation's health and economy of a full-scale pandemic, and supports the collaborative approach of the Scottish Government and all its partners, both within Scotland and beyond, in minimising the spread of A (H1N1).

15:19

Dr Richard Simpson (Mid Scotland and Fife)

(Lab): I join the cabinet secretary in congratulating all the NHS staff who have been involved to date; in particular, I congratulate staff in NHS Forth Valley on their initial prompt actions, in Inverclyde, and in all the Government agencies that are involved.

The general thrust of my speech is that the Labour Party will support the Government motion. We do not want to be critical in any way of the Government at this stage. Alan Johnson has led the call for the World Health Organization to consider whether lethality should be a factor in determining alert level 6. Does the Government support an early review of alert levels?

The name that is now being given to the virus is swine-origin influenza virus, or S-OIV, which is unpronounceable. Thus far, one thing that is for certain is that it is a novel virus. In a recent article, Hugh Pennington referred to swine flu being acquired in 2005 by the Mayan population in Yucatan, which—like other populations in south-east Asia—keeps pigs and birds in its backyards. A mild form of swine flu may have gone unnoticed in significant numbers of people before it was formally identified. That reference is important in forming our exact knowledge of what the virus is about. For example, we have established that the current mutation does not produce PB1-F2 protein, which was the virulent factor in the 1918 flu outbreak.

Much of our planning worldwide was based on the supposition that the new virus would arise from an avian source in south-east Asia. It came as something of a surprise, therefore, that it was first found in Mexico and that the source was the pig. Much greater research is needed into pig viruses as the melting point for the triple reassortment of viruses from humans, birds and pigs. In that regard, what input will the Scottish Government make to that worldwide research effort?

The three areas of concern are the rate of spread, the degree of contagion and lethality. The cabinet secretary referred to them in detail, so I

will not go into the same level of detail. On the rate of spread, the number of cases has risen from 1,000-odd cases at the beginning of May to 13,398 cases as of this morning. The spread from only a few countries to 46 indicates that we have problems in this regard. That said, the spread rate seems to be slowing. Is that accounted for entirely by an absence of testing in countries such as the United States of America, or is the rate naturally occurring? I do not expect an answer today; I simply pose the question for consideration.

Clearly, if the rate of spread is slowing, that says something about the second area of concern, which is the level of contagion. As the cabinet secretary indicated, the level of contagion looks like being somewhere between two and 10 times the normal flu rate for severe winter flu—not the mild flu outbreaks that we have had. What is the Government's estimate of the future level of contagion? Again, that question probably cannot be answered today; I simply pose it for future consideration. Labour Party colleagues will address the impact on education and on prisons and other closed units.

I turn to lethality. It is clear that, outside Mexico, the outbreak is very mild. I assume that we still do not know why that is. Certainly, there is nothing on the WHO website to indicate the reasons for the outbreak. As of this morning, there have been 95 deaths, 85 of which have been in Mexico. As the cabinet secretary said, the rate is considerably lower than that which applies at the top end of pandemic predictions. We do not know quite what is happening—there is a wide variation in the assumptions on lethality.

Unlike in previous pandemics, assessment of the three factors of spread, contagion and lethality is considerably complicated by new variables. First, there has been a massive increase in air travel since the last pandemic in 1968. Secondly, there has been the application of successful containment policies using antivirals that disrupt the normal development of the virus.

The one thing that we know about pandemics is that they tend to encircle the globe in at least two and sometimes three waves. From the three pandemics in the 20th century, we know that the first wave is always mild. The second wave of the Spanish flu outbreak of 1918 was particularly lethal. The 1957 pandemic, which also started in a mild form, returned in a form that was somewhat more severe but not nearly as severe as the 1918 outbreak. The 1968 pandemic was not severe in most countries in its second wave, but it was in some countries.

As the cabinet secretary indicated, we cannot predict what further genetic shift or drift might occur in the novel virus that confronts us today; nor can we predict what effect the intermix of

H1N1 with H5N1 avian flu in south Asia will have, because there are only a few cases—some, in Taipei, for example, have only been reported in the past week. Very few cases have been reported in south-east Asia. The pressure on the virus to mutate, with the mix in pigs, birds and humans in south-east Asia, might present us with a severe challenge in the second phase.

The emergence of an inherently much more virulent virus in phase 2 can never be ruled out. The cabinet secretary and the UK Secretary of State for Health, Alan Johnson, are absolutely right to say that we must continue to plan on the supposition that the second wave could be more virulent, while continuing to hope that it will not be.

Do we have sufficient capacity in Scotland to maintain rapid diagnostic testing to ensure that, in the event of severe reaction, individuals can be tested for any new, potentially lethal, mutation of the virus? I understand that, at some point, we will probably have to drop general testing, although we need to maintain adequate testing facilities to look for that possible mutation.

As is clear from the cabinet secretary's speech, we have not yet moved from containment to disruption, or even to an open situation. However, I have some concerns. First, from the outset there has been an overreliance on Tamiflu—I make that criticism of all Administrations. The single purchase of Tamiflu, which has been augmented only recently by Relenza, might lead to our being overreliant on it. There has already been some resistance to Tamiflu in response to some cases of flu in Japan. I hope that stocks of Relenza, and indeed of amantadine, may be maintained. Amantadine was the original antiviral and although it was not particularly effective, perhaps for the very mild form of flu that we have at the moment, the use of amantadine—or of Relenza—could protect against resistance to Tamiflu. Is the Government considering that point, which has been raised in academic debate?

I will address some further issues related to pre-planning for a possible second wave, no matter how virulent it is. All the elements of the report that I did for the Health and Community Care Committee in 1999—published in 2000—and of the subsequent planning will be tested to a level beyond that of the winter willow simulation exercise that was carried out previously.

I ask the cabinet secretary to respond to a number of further questions, on the basis of continuing to hope for the best while preparing for the worst. First, I thank the cabinet secretary for her letter to me in response to my question regarding the register of retired doctors and nurses. Her letter indicated paragraph 27 of the guidance. Further to that, is the cabinet secretary satisfied that all health boards have such lists in

place? As a semi-retired doctor, I have not yet been contacted. Will health boards offer training over the summer, as has been suggested, so that we are prepared for the second wave, should it occur?

Secondly, are there similar provisions for the temporary reregistration of nurses and allied health professionals, as there are for the General Medical Council, which has established a rapid reregistration system? Hopefully, such a system will be made available to nurses and allied health professionals. In addition, we have a number of unemployed allied health professionals, such as physiotherapists. Do we have a list of people who are currently not employed, but who are qualified and who might be able to help out in the second wave?

From previous correspondence with the cabinet secretary, I know that the Government has had discussions with, and has involved, the British Red Cross, the WRVS and other voluntary organisations at a national level. Have health boards and local authorities engaged with those two organisations in their plans? When I corresponded with the cabinet secretary on the matter last year, the Red Cross and the WRVS were indicating their satisfaction with national discussions, but they believed that local discussions were very patchy. Preparation must be made more adequate over the summer.

In my report, I suggested that we needed adequate supplies of pneumococcus vaccine for all relevant vulnerable groups. We should consider the potential for a summer programme of pneumococcal vaccination, rather than waiting until autumn, when the second wave might hit us and we might be otherwise occupied. I make the suggestion because a number of the deaths of young adults in Mexico have been associated with the pneumococcus virus and because, during the moderately severe pandemic in 1957, research in Holland showed that pneumococcal pneumonia was a significant factor in deaths. The preparation that I suggested might therefore help.

The new vaccine must be properly tested. The most recent significant swine flu outbreak, at Fort Dix, in America, in 1976, resulted in rapid production of a vaccine that had to be withdrawn because of its association with deaths and Guillain-Barré syndrome.

Will the cabinet secretary consider whether we have an adequate supply of ventilators? The health service in Mexico has had problems in that regard. We know from an Audit Scotland report that there is a significant maintenance backlog. If ventilators are to be replaced during the next two years, it might be worth bringing forward the purchase of replacements, to increase capacity.

As the cabinet secretary said, dealing with a pandemic is about managing uncertainty. Sam Goldwyn said:

“Making predictions is very difficult, especially about the future”.

The remark has never been more applicable. We are only weeks into the outbreak—pandemic or not—and many of our assertions and plans have already been negated. We must be on guard and continue to plan and prepare, and we must be ready to be flexible. The Labour Party will support the Government motion.

15:31

Mary Scanlon (Highlands and Islands) (Con):

I commend the work that has been done, particularly by the NHS staff who have assisted in the cases to date.

It is difficult to assess whether a debate is needed on the Government's preparations for the current H1N1 outbreak and the potential threat of pandemic influenza. The Royal Society of Edinburgh summed up the issue well in its briefing, which makes the point that

“the only thing certain about influenza is that nothing is certain”.

Recent news from Birmingham confirms that.

The RSE said:

“With the benefit of hindsight it is clear that greater attention should be paid to influenza viruses in pigs and from a diverse series of sources, and their transmission to humans.”

I hope that current efforts and energy are focused not only on addressing H1N1 but on developing a more preventive approach for the future, given that there is no doubt that we have learned a huge amount from the current situation. There is an emergence of zoonotic diseases of viral origin that can be passed to humans from wild and domesticated animals, so the issue is important and should not be lost in the Government's collaboration with other parts of the UK.

The RSE recommends that

“Scotland must have access to rapid diagnostic testing to inform an effective surveillance programme so that individuals with flu symptoms can be investigated at an early stage”.

Richard Simpson made that point. Such an approach might not have been justified in the past, and I would welcome the Government's response to the suggestion in the context of future planning.

The RSE highlighted that H1N1 can be passed from humans to pigs. I think that that issue has been lost in the debate. What discussions have taken place with the Scottish farming industry, and particularly with pig farmers, about the current

circumstances? Has agreement been reached in that regard?

The final point that I took from the RSE's paper was that the society is concerned that the UK has chosen to stockpile only Tamiflu, given that there is always the possibility that the virus will mutate and become resistant to the drug. Richard Simpson mentioned that issue, too. Further clarity on that issue would be welcome. I am grateful to the RSE for helping me with this speech and raising those excellent points.

As I have said before, I commend the Cabinet Secretary for Health and Wellbeing for her competent and professional handling of the issue. I attended one of the briefing sessions in the St Andrew's house bunker room and was impressed by how positively the range of representatives from the public and private sectors throughout Scotland worked together.

Although that level of the system is undoubtedly efficient, the British Medical Association has raised concerns that health boards need to do more planning with front-line clinical input. It also seeks greater clarity on distribution protocols—which it says must be communicated to the public effectively to avoid confusion about patients obtaining antivirals when they are ill—as well as how general practitioners and their staff can get immediate access to Tamiflu in case of infection by patients with flu. It is reassuring to know that national communications are good, and I commend that, but it is disappointing to hear the BMA state that there has been difficulty engaging some health boards in the planning process and that, in some areas, planning continues without GP input although the GP is probably the first port of call for the majority of patients.

Nicola Sturgeon: Perhaps Mary Scanlon will accept a point of information. I have read the BMA briefing, and she may be interested to know that we have asked health boards to give us an update on their plans, including their engagement with primary care contractors. In addition, if Mary Scanlon or any other member is aware of particular and specific local problems, I would be more than happy to address them if they raise them with me.

Mary Scanlon: That is helpful and I commend the approach that the health secretary has taken.

In her opening speech, the cabinet secretary mentioned the financial issues. If the flu outbreak is contained and does not become a pandemic, who would pay for all the vaccines and antivirals that have been ordered but which may never be used—the Government or the pharmaceutical companies?

I seek clarity on the storage of existing vaccines, which was covered in *Scotland on Sunday*. There

are concerns about unstable temperatures affecting vaccines' effectiveness, so will the cabinet secretary confirm that the storage facilities for existing and future vaccines comply with the manufacturer's guidelines? It is of serious concern that the Scottish Government's health department found that, during a three-month period, 503 out of 1,030 GP practices were not fully compliant with the regulations on storing vaccines. Of those 503, 148 were reported as not storing their vaccines in accordance with manufacturers' instructions. I noted Richard Simpson's comments in the newspaper—I hope that he will forgive me for quoting him:

"The question is whether people who have been vaccinated are actually immune, or whether we have been given a false sense of security."

When people are given a vaccine, they need to be secure in the knowledge that it is effective.

As Richard Simpson said, in the previous major outbreaks in 1918 and 1957, the virus returned in a more virulent form in the autumn. Is there a point or date at which we will know whether the virus will mutate into something more serious? To put it another way, is there a safe date in the autumn when we will know that the current H1N1 strain will remain as it is? The cabinet secretary is shaking her head, so I think that the answer is no.

15:39

Ross Finnie (West of Scotland) (LD): My party and I wholly support the Government's motion. I do not doubt that many of the points that the RSE raised in its paper are excellent—Richard Simpson and Mary Scanlon referred to them extensively—but I think that there is a slight trend, because things appear to have gone reasonably well, to scour about looking for things to say that might not necessarily be critical but, rather, give the impression that there are many things that we just simply have not thought of before.

To my certain knowledge, because statisticians have been well aware for some time that the incidence of a pandemic is statistically very probable next year or the year after, Government planning has by and large been in place for some time. To be fair to all parties involved, the general proposition that we were somehow unaware that a pandemic had come upon us, and that everyone was unaware that the 1918 virus and its mutations were serious, is not the case. Those things were well known.

My other general point is that we should be careful about the two principal reasons for activating our civil contingency procedures. The first is the obvious one—referred to by the cabinet secretary, Richard Simpson and Mary Scanlon—that, if we face the threat of a disease and there is

uncertainty connected to that, we must take those civil contingency steps. Even if it becomes clear in the early course of the outbreak, as occurred in this case, that the particular strain is not that serious, that does not in any way reduce the possibility that a highly virulent infection will give rise to considerable civil contingencies. We have only to close a few schools to discover suddenly that, statistically, we have also closed a ward in a hospital, because half of the people whose children are at the schools have to go off their work to look after their children.

We should not underestimate the need to deal with any potential threat that is raised to a WHO level. There is a need for calm reflection to address what the health risks are, but we should in no way lose sight of the fact that, as I said, a highly virulent infection can have a very serious effect on the civil population.

We are fortunate in the way in which the virus has developed, although in Inverclyde, where I live, we have managed to produce the highest proportion of cases in the country. Although she is not surrounded by us, the cabinet secretary may not necessarily be comforted to know that Stuart McMillan and I have travelled extensively in Greenock and Inverclyde and are perhaps the bearers of bad news—but there we are.

I want to pay a particular tribute because, while I welcome the tremendous efforts of NHS staff throughout the country in addressing the larger number of incidences, I am in no doubt that the way in which the health and education services and the general population have remained calm in the situation has been a great credit to all involved.

We then move forward to saying, "Well, okay, where do we go from here and what are the lessons that we must learn?" Clearly, this is one of the first times that such a virus has been subjected to careful investigation and analysis at such an early stage. We do not know the results of that, but our hopes and expectations must clearly be that, should the virus reappear in the autumn, we have a much better handle on precisely how it emerges. Indeed, it is apparent from one or two of the rogue cases, particularly in Greenock, that we are still not entirely clear about the epidemiology relating to how the virus emerges, which is slightly worrying, should—I stress "should"—a more virulent strain emerge at a later stage.

Once the decision has been made to go for one vaccine, the clever suggestion will be made that six others could have been stored, but I am not sure that anyone has second sight in that regard. However, an important principle emerges in relation to the funding of vaccines, and I will be very interested to see how the United Kingdom Government addresses that point. None of the

current financial arrangements that relate to the devolved Administrations creates a reserve in any of those Administrations. Although the situation during the most virulent outbreak of foot-and-mouth disease in Scotland is not analogous, as someone who was the minister responsible for such matters at the time I know that it was extremely important that Scotland had access to a reserve so that it could meet the costs that had to be borne. Our party will therefore be highly sympathetic to any advances and overtures that the Government might make to the UK Government in that regard. One reason why animal health policy was never fully devolved was that it was necessary to have access to the reserve in the case of an emergency. The cabinet secretary alluded to that important principle.

I do not have the expertise to discuss diagnostic testing, but I am fully aware that the laboratory down south that we access represents the benchmark when it comes to testing for the virus. That does not come easily. One cannot just suddenly spend a sum of money and establish a laboratory, because without a reference point it will not be able to perform that role. Although I understand fully the concerns that the process of determining the rate of advance of the disease slows down without such a facility, we should not kid ourselves that it is simply a question of money. A number of other procedures would have to be put in place if such a proposal were to be given full vent.

By and large, the measures that have been adopted and rolled out have been successful. We know from what the cabinet secretary said that lessons have been learned. Lessons are always learned: every time one unveils procedures, there are things that can be done better once they have been looked at afresh. I hope that we take the time to do that over the summer. We should refresh our approach in the knowledge that, if the virus returns, it is unlikely to return in the same form in which it first manifested itself, with the result that we might be presented with a much more challenging position.

In general, the Liberal Democrats are content with the action that has been taken. We have given our full support to the Government's measures. We are particularly pleased that, through the arrangements that have been adopted, the cabinet secretary has been able to secure enough pre-pandemic vaccine to vaccinate at least half the Scottish population by December. As I understand it, the timing of that process means that it will not in any way interfere with the production of normal flu vaccine. I rather suspect that we are dealing with two different vulnerable groups: members of the group that is generally the most vulnerable, the elderly, are more likely to be protected by the traditional flu vaccine, whereas it

appears from what the cabinet secretary has said about a possible outbreak of A(H1N1) early in the winter that younger people are the more vulnerable group and will need to be protected if that transpires.

We are satisfied with what has been done, but we are not suggesting for a moment that there is a scintilla of room for complacency. For the moment, we are happy with the general direction of travel and we support action to secure the nation's health should the virus re-emerge. That is why the motion before us is wholly supportable.

15:49

Stuart McMillan (West of Scotland) (SNP): I have a strong interest in the debate because there have been six confirmed cases of swine flu in Greenock, which not only forms part of the region that I represent but is where I live, as Ross Finnie alluded to.

I hope that all members will recognise that the way in which confirmed and suspected cases across Scotland have been handled by the Scottish Government and NHS staff has been a credit to the Scottish system for dealing with such outbreaks. That has certainly been recognised so far, but I am keen for there to be unanimity on that point throughout the debate.

Although media coverage of the outbreak has slowed down somewhat over the past week or so—other items appear to be leading the media agenda—we should not expect anyone to become complacent or assume that the issue has gone away. In her opening speech, the cabinet secretary highlighted the case of the individual who is in the Victoria hospital in Glasgow, and people are still being diagnosed in Scotland and elsewhere. I am pleased that the Scottish Government has not opted to overplay or underplay any of the dangers surrounding swine flu.

We have been able to cope admirably so far because we have had a pandemic flu framework in place since November 2007. The swine flu outbreak has been a test of that framework, which has proven to be successful so far. I am one of the co-conveners of the cross-party group on funerals and bereavement; the other co-convenor, Nanette Milne, is also in the chamber. The membership of the group was grateful to the previous Scottish Executive and the current Scottish Government for their work on the framework, which is important, and was content that the funeral services industry had an input into it.

The swift action of working together with the UK Government and at European Union level appears to have allowed the Scottish response to be prompt and extremely efficient—so much so that

the Scottish Government has been able to make just fewer than 1.5 million surgical face-masks available to England and Wales to cover the shortfall there. There are obvious public concerns, some of which have been touched on, about the possible resurgence of flu-like symptoms in autumn and over winter. However, the calm way in which all of us—especially the cabinet secretary and her officials—have conducted ourselves should be commended. I expect that to continue and that there will be no scaremongering tactics from anyone—politicians and the media alike. Such an atmosphere would not help in any circumstances.

The fact that the Scottish Government is prepared for the possibility of a future pandemic reaching WHO level 6 should be welcomed as a precautionary measure. The Scottish Government has advance agreements in place with manufacturers, should a vaccine be developed and pandemic level 6 be reached. I welcome the fact that we are going beyond that and buying supplies for the entire population early, as a precaution. As we have heard, the vaccine can be expected by December, but perhaps as early as September. We know that it will be offered on a voluntary basis in addition to the normal seasonal flu vaccination. All of us are now well aware that the symptoms of swine flu are no more dangerous than those of common flu.

As I said earlier, like Ross Finnie, I live in Greenock. The way in which the Inverclyde public, education staff, Inverclyde Council and all local health professionals have dealt with the situation has been nothing short of highly commendable. There has been no hysteria, but a tremendous amount of understanding and appreciation of the need to do whatever needs to be done. Coverage in the local newspaper, the *Greenock Telegraph*, has not overplayed the situation in any way, shape or form. People to whom I have spoken who have links, in one way or another, to local individuals involved in the situation have been tremendously appreciative of what has been done. Ultimately, the episode has shown the people of Greenock and the whole of Inverclyde at their best. I am sure that that will continue to be the case if other cases are uncovered in the future.

15:54

Helen Eadie (Dunfermline East) (Lab): I echo the thanks that the cabinet secretary and other members have offered to the national health service. I, too, pay tribute to the cabinet secretary and the Minister for Public Health and Sport for the calm, controlled approach that they have taken to the issue, which unites the Parliament and is of continuing concern.

There are two concerns for all of us today. First we have to protect our citizens, and secondly we have to play our part in dealing with a world pandemic, especially in poorer and developing countries that may not have access to the drugs that we have. I hope that, as Scots, we will do as we have always done and consider how we will lend a helping hand to those poorer and developing countries. *[Interruption.]* Excuse me. I do have a cold, cabinet secretary, but I hope that I will not be needing a doctor in the house. I have had a sore throat for four weeks.

I agree with the cabinet secretary that this debate gives us an opportunity to discuss the issues—as distinct from an opportunity to ask questions—following the statement that the cabinet secretary kindly made. Certain issues are important for parliamentarians to consider.

Our critical care capacity, when compared with that of other countries, is an important matter, and I hope that the cabinet secretary will be able to tell us what measures the Government has taken to support additional critical care capacity. Dr Richard Simpson said earlier that we have to ensure, for example, that additional ventilators are available, as well as additional beds.

The latest data on adult critical care services in a number of the most developed health economies are found in the Society of Critical Care Medicine's 2008 study. The study set out the number of adult intensive beds per 100,000 people, which is the relative measure. France has 9.3 such beds per 100,000 people; Canada has 13.5; the Netherlands has 8.4; Spain has 8.2; and the United Kingdom has 3.5. The Parliament will note the apparent substantial disparity between the availability of critical care capacity in this country and the availability in many other countries. What will the Scottish Government do to address that critical issue?

Anyone who has visited critical care units recently will know that they are generally full. The ethical and prioritisation impacts of a pandemic are therefore likely to be encountered rather faster in this country than in many others. Because we do not have spare capacity in our critical care units, we will fairly quickly have to turn beds that would otherwise be occupied by elective patients into beds that offer some degree of high-dependency support for patients who are suffering the complications of flu.

What discussions is the cabinet secretary having with Her Majesty's Government on advice for people travelling to the United States if there is a rapid increase in the number of cases there? People may be planning holidays now, and they will need advice on whether to go and on what precautions they should take when they get there. A report that appeared in *The New York Times* a

couple of days ago refers to a leading American infectious disease expert who has been in Mexico to help the Mexicans tackle the swine flu outbreak and learn the lessons from that. The report says that many people who are suffering from the disease appear to show no symptoms of fever. That makes screening much more difficult and increases the difficulty of controlling the disease. I am not sure whether the cabinet secretary and the authorities in this country are fully aware of what is being discovered in Mexico, but it is critical that we rapidly learn the lessons. According to the report, half of those with the milder cases did not at any stage develop fever.

It is also reported that 12 per cent of patients in two Mexican hospitals are suffering from diarrhoea as one symptom of their condition, together with respiratory problems. The point is made in the report that there are implications for infection control, particularly in poorer countries, if diarrhoea is one symptom that emerges from this strain. The advice is that stools should be tested for the presence of swine flu virus. Will the cabinet secretary say whether any such advice is coming from health officials in Scotland? There has been no reference so far to such testing, so has that been properly monitored?

It is also reported in the article that the expert doctor from the United States, Dr Wenzel, suggests that there should be testing to determine whether people are carrying the virus but showing no symptoms. Newspapers tell us of one case in the UK of someone who has had a confirmed diagnosis but who has had no apparent contact with anyone who has suffered from the condition. Is a possible explanation that some people who are carrying the virus may not show any symptoms? That would make control much more difficult.

It is also reported that an unusual feature of the Mexican epidemic is the fact that there are, apparently, five different influenza viruses circulating at the same time, which makes it much more difficult to plan and to judge how the swine flu virus will develop.

All the things that I have mentioned from that article are happening in Mexico. Will the minister comment on the international learning process to ensure that what we are finding out from Mexico is fed into public health messages in this country and that the appropriate advice is disseminated? It is also reported that the number of pneumonia cases at one hospital was 120 a week, compared with an average of about 20 a week. That is clear evidence of the complications that can emerge from flu, as the cabinet secretary mentioned earlier.

That significant increase in the number of pneumonia cases reinforces the importance of

preparedness for such complications. Will the minister comment on the development of the purchase of antibiotics? We discussed that after previous ministerial statements, and I know that the cabinet secretary has addressed the matter, but I should like to know where we have got to on that.

The final, really important, point in the report is the fact that Mexican doctors have apparently activated a programme to allay the anxieties of health staff. The expert from the United States commented that that matter had not been sufficiently addressed in the US. It is critical to remember that there will be health and social care staff in this country who are extremely anxious about their own health and family circumstances. The programme has been activated to provide an information hotline for staff, psychological support, which is critical, and medical examinations. I am sure that that is part of the planning process, but will the cabinet secretary reassure us that the matter is fully recognised as a priority?

16:01

Jamie Stone (Caithness, Sutherland and Easter Ross) (LD): I, too, pay tribute to the professionalism of NHS staff both in my constituency and throughout Scotland. One cannot but be impressed by the professional way in which they carry out their work.

The tone of the debate, as set by the cabinet secretary, has been appropriate. There has been no scaremongering; the debate has been balanced and thoughtful. She is right to say that there should be cross-party support on such issues. She also said that Parliament must stay engaged—that is absolutely correct. We are where we are, and although the appropriate measures have been taken, the situation is, as other members have said, constantly changing. Therefore, we must be constantly vigilant.

I also pay tribute to the cabinet secretary for the way in which she has been prepared to meet MSPs such as me to discuss the issue and to engage with us. That is very much appreciated by me and by my constituents. She spoke about containment, which is the policy at this stage, and she was good enough to pay tribute to the work of the previous Administration. That is appreciated.

My colleague, Ross Finnie, rightly drew our attention to the issue of financial reserves, which are not there at the moment. The BMA has paid tribute to the fact that all four Administrations in the United Kingdom have worked together. The virus does not respect borders, so there is a responsibility on the UK Government to consider—I hope fairly and properly—the issue of reserves,

which will have an effect on the Scottish Government.

I turn to two briefings that I have received, one of which has been mentioned already. The first, which we have all read, is the BMA parliamentary briefing. Two issues sprang out at me as being worthy of note. The briefing talks about the large number of the “worried well” who are ringing in, which is having an impact on the workload of general practitioners and their staff. I know of someone in my constituency who felt ill in the middle of the night and rang the health service. They turned out to have the common cold followed by bronchitis, but they wondered what was wrong. Such calls take up the time of our health professionals. The BMA rightly points out that, if staff become ill, some smaller GP practices will bear quite a heavy burden.

The BMA also tells us that, with the Department of Health, it is developing a database of retired doctors who could be brought into action if necessary. I would be interested in the cabinet secretary’s comments on that. Would other appropriate retired health professionals—perhaps people who worked in the nursing profession—be included? A skills update would be absolutely essential if such a policy were taken forward, although it is very attractive.

The second briefing paper is from NHS Highland, which describes the position fairly and accurately. I thank NHS Highland for its paper, the final paragraph of which states:

“There are particular challenges for the Highland CHPs because of sparsity and distance. Delivery of anti-virals to patients who cannot travel, and who cannot attend on their own behalf, is particularly challenging in rural areas. Each CHP is considering this, and it is likely that a range of options will be required across the NHS Highland area.”

Exactly: we need to consider what happens if the people who do the deliveries, such as the drivers, get sick. We also need to consider what happens if, as has already been said, children or family members get sick and people have to stay behind to look after them.

Distance is a big issue. Some of my constituents—young and old—live in very remote areas that can be pretty inaccessible even with the most up-to-date forms of transport. The motto “Be prepared” applies to the pneumococcal vaccine and should apply in this situation, too. We must evaluate the likely impact of distance on a programme of rapid diagnostic testing, if such a programme is to take place.

As members have said, we are lucky that we are entering the summer period, which is beneficial in slowing down the spread of such a disease. However, as we have been warned, we must be careful about phase 2. If it occurs in the autumn as

winter descends, when roads become difficult to drive on and transport becomes more difficult in the Highlands, it will be a big issue for us.

If someone becomes sick, an evaluation must be made of whether and for how long they should stay at home. We need to bear in mind the proximity of medical facilities, if those are necessary, as some people live very far from hospitals.

The cabinet secretary has generously said that she will respond to any problems and points that individual members raise. I do not view the disease as a problem—I do not want to see it in the wrong light—but we need to be aware of it and think about it as we go through the summer. I am grateful for the cabinet secretary’s offer to work with me.

As a member who represents a remote and very large constituency—which, according to the Boundary Commission for Scotland, might be about to become larger still—I will be keeping a close eye on the issue, as will my Highland colleagues, no doubt. I reserve the right to come back to the cabinet secretary—if that becomes necessary, and only then.

I join Ross Finnie in associating our party with the motion. We should give credit where it is due—there has been a degree of professionalism by NHS staff, and the Scottish Government has handled the issue pretty well so far.

16:07

Ian McKee (Lothians) (SNP): The danger that flu viruses present, and always have presented, is their ability to mutate frequently into a different form. That poses two challenges: vaccines that have been developed to protect against yesterday’s virus may be ineffectual today or tomorrow; and it is entirely possible that a relatively benign virus that causes symptoms that are little more than those of a severe cold may mutate into something much more serious, such as the pandemic of so-called Spanish flu that swept the world after the first world war.

We must always be on our toes, and I congratulate the cabinet secretary and national health service staff on the measures that they have taken so far in an attempt to contain H1N1 in Scotland. Pandemic level 5 means that the World Health Organization considers a pandemic to be imminent, and it is right that we take the matter very seriously indeed.

However, pandemics know no international boundaries, and people in developing countries are liable to suffer even more intensely from what is going around than those in the first world, as Helen Eadie has already mentioned. The spread

of the disease from Mexico and the USA so far seems to have occurred mainly in developed countries, but it is suspected that that is simply because developed countries have more sophisticated surveillance and diagnostic facilities. Citizens in the third world are more likely to be malnourished and to suffer from chronic illnesses, which makes them more vulnerable, and health control measures in their countries are often rudimentary.

In Scotland, we may well have adequate supplies of antiviral drugs for our population, but there are only enough in production for less than 5 per cent of the world's population. Relying on those drugs to curb a global pandemic will lead to great disappointment. Not that we can afford to be complacent in Scotland. I do not intend to scaremonger, but we must consider the potential drawbacks to the measures that we are taking or which have been suggested.

We are waiting for a vaccine to be developed that gives protection against H1N1. Work on that continues apace, but it will take many months, and then we will face the not inconsiderable difficulties of producing the vaccine in big enough quantities for it to be useful, and administering it. By that time, the virus might have mutated into a version against which the vaccine is not as effective, although I accept that that is unlikely.

We can provide antiviral drugs such as Tamiflu and Relenza. Roche, the manufacturer of Tamiflu, tells us that it has the potential to decrease the likelihood of flu or to shorten an episode by an average of 1.3 days if it is taken within 48 hours of the development of symptoms. The preparation inhibits the protein neuraminidase, which is found on the surface membrane of the influenza virus and facilitates its multiplication and spread. The hope is that the inhibition of that protein will confine the infective virus to the host cell and prevent it from spreading elsewhere. However, the manufacturer says that the drug has not yet been shown to reduce the incidence of hospitalisation or morbidity, and its effects on new viruses on the block such as H1N1 cannot be predicted.

There is another concern about relying on antivirals during a pandemic. If large swathes of the population are ill or isolated as contacts, can we confidently predict that our supply and distribution chains for antivirals will work effectively? Not only will some personnel who service those chains be off work, but others might well shy away from exposing themselves and their families to increased danger when a virulent flu virus is rampant.

We can wear face masks and pay careful attention to hygiene. The latter is good basic practice to prevent the transmission of all sorts of diseases, but the jury is still out on face masks, as

the pores are big enough to allow viruses to enter, and the disposal of sodden masks presents a problem. One rather cynical observer stated that the only purposes of wearing face masks are to prevent transmission by kissing and to mask any signs of panic on the clinician's face.

Do we have the facilities and staff that we would need to cope with a major, virulent pandemic? As Helen Eadie said, does any nation have them? The patient in Glasgow needs intensive care treatment. Would we have the skilled staff that we would require if there was a bigger number of such patients? We hope that the H1N1 variety of influenza will not mutate into something more terrible and that the cynics will laugh, as they did when excitable experts warned of catastrophe on a huge scale because of severe acute respiratory syndrome—SARS—and new variant CJD. We must strike the right balance between making cautious preparations and forecasting inevitable doom, like Private Frazer.

Unlike in many previous health scares, the World Health Organization is taking a positive lead, although inconsistencies abound. Holidaymakers who return from Mexico are greeted by relatives in Britain but by masked and gowned airport staff in Tokyo. Egyptians are hard at work slaughtering pigs even though the disease, at present, is transmitted from human to human. There is uncertainty about whether immunisation against influenza last year will give any protection against H1N1. It might give some, but we just do not know.

Here at home, I am not a huge fan of NHS 24 in general, but it makes sense to make full use of that organisation rather than advising those with symptoms and the worried well to cram into their nearest GP surgery and risk spreading viruses to those who already have other illnesses. That is already happening in other countries.

As with so many other threats today, we have to learn to live with uncertainty. Our Government is making the best possible preparations, and for that we should be grateful. The truth is that, despite the huge advances in medical knowledge in recent years, we do not have all the answers to flu pandemics and we probably never will.

16:14

Rhoda Grant (Highlands and Islands) (Lab): It is fair to say that the public are at best bemused by the flu pandemic. At first, there was fear about what was happening, but people are now almost annoyed that their worst fears have not been realised. We should be delighted about that. I am sure that it is due to a number of factors, including the time of year, the steps that our Governments

have taken to manage the spread of the virus, and the work of our health professionals.

However, there are issues of concern and confusion. Why were people not told when they might have come into contact with people at concerts or on aeroplanes? What is close contact? Why have some passengers been traced while others have not? I dare say that the episode is a learning curve, but we need to be clear about the lessons to be learned so far and ensure that that information is in the public domain. Although this debate might not appear to be the timeliest, it gives the opportunity for that information to be aired and put into the public domain.

People need to be able to understand what has happened, what difference the management of the outbreak has made and what precautions they should take for the future. For example, why, as we have been told, could the virus recur later in the year with very different consequences? We need clear information to ensure that people do not become blasé about the threat and relax their vigilance during a subsequent outbreak.

I will concentrate on how remote and rural areas will be served during an outbreak. The Government has suggested that people organise a network of flu friends, made up of neighbours who would get shopping and medicines for those affected. In an urban area, that might mean just a quick run down the road, but in rural areas, it requires a much greater time commitment. After all, shops, GP surgeries and pharmacies can be many miles away. In fact, for those who live on some of our islands, a ferry trip can be required. Although neighbours in rural areas tend to go the extra mile, I am not sure that the flu friends proposal will always be such a practical solution.

Indeed, Jamie Stone highlighted concerns about “sparsity and distance” with regard to NHS Highland; the health board says that it is looking at the issue but, as far as I can see, no one has found a solution. We must find ways of distributing medicines quickly to remote areas and of ensuring that there are sufficient medical professionals to administer them when required.

At today's meeting of the Health and Sport Committee, we considered a statutory instrument that will relax the regulations on medicine storage if we happen to find ourselves in a pandemic. However, as Mary Scanlon has pointed out, the press at the weekend reported concerns about the storage of vaccines. Has the issue been resolved, and will it have any impact on the availability of vaccines and medicines in a flu outbreak? Are there special conditions for the storage of vaccines and Tamiflu? If so, is the Government satisfied that they can be met in enough locations?

Given that medical professionals in rural locations have to cover very large geographical areas, have plans been drawn up to deal with the real challenge of finding replacements if they fall ill? Moreover, a lot of staff time in rural areas is being taken up with travelling to and attending planning meetings. We need to find ways of spreading information that do not require taking staff away from their day-to-day work.

Other public services face the same challenges. For example, the home care staff who deal with vulnerable people need to have their roles carefully considered as part of those plans; after all, if carers fall ill, vulnerable people might be left without a lifeline. We need emergency provision to ensure that that does not happen.

We also need to consider the role that home carers, who often have several clients, might play in spreading the virus to vulnerable people. What training have they received in preventing the spread of the virus, and what support is in place to ensure that they have the information that they need? Furthermore, although most home carers are employed by local government, that is not always the case, and we need to be able to reach those who work only for private clients.

We also need to consider the many other public services that involve contact with a large number of people. Will front-line staff and people who work in jobs where they are likely to come in to contact with people be treated differently from the majority of the population? For example, because they come into contact with a lot of people, those who work in our transport system must be more vulnerable to infection than others and more likely to spread the virus. When a vaccine becomes available, will those people be given priority? Indeed, will people with chronic illnesses also be given priority? The general public need to know the answers to those questions if they are to be prepared for any deterioration in the situation. Dealing with a real situation over a long period of time will show us where our systems are working and where they need to be updated and changed.

When the outbreak has passed, we will need to scrutinise fully what has taken place and learn from it. In the meantime, the most vulnerable in our society and the front-line staff who deliver public services must be protected if the outbreak escalates. I hope that in her summing-up the Minister for Public Health and Sport will clarify some of the issues that I have raised.

16:19

Nigel Don (North East Scotland) (SNP): I come to the debate knowing very little about anything medical. Basically, I know that people should keep themselves as fit as they possibly

can, as doing so is probably the best defence against most of the things that might come their way.

As I tend to do quite often, I would like to follow Ross Finnie in developing some thoughts about civil contingencies and what we have to do as a society. I will come at those matters by reflecting on what NHS Grampian has been up to, as it has been good enough to tell me. I have a report that I think will be considered by its board—or its operational management team, at least—this afternoon.

I detect several things in the report that I would like to share with members. It states:

“At Phase 5, Health is lead agency.”

It is known who is in charge. The strategic co-ordinating group is chaired by the board’s chief executive. The individual concerned—Richard Carey—knows that he is in charge. The report says:

“The responsibility for the overall tactical coordination of the response is delegated to the Director of Public Health”.

Again, it is entirely clear who is responsible.

The report continues:

“In the weeks since the implementation of the Pandemic Plan, a high level of activity has resulted from the need

- to respond to reports of possible and probable cases;
- to establish control room functions;
- to communicate across the NHS ...
- to respond to and communicate guidance developed by Health Protection Scotland;
- for all sectors and cross Grampian services to implement and review the readiness of their plans;
- to review plans for antiviral distribution.”

NHS Grampian has done those things. In other words, it has stopped and thought about what it will have to do in the future.

The board has also considered the risks and recognised that the risk aspects

“include:-

- Communication
- Public Health management ...
- Travel and Port Health
- Operational preparedness of NHS Grampian Sectors
- Monitoring stock and access to antivirals
- Patient Pathways
- Infection Control”.

It has considered the control room and—crucially—NHS Grampian workforce issues. I would like to develop that point.

It seems to me that, over the past few weeks, the health professionals have got themselves organised. I do not say that in any disparaging sense. They have seen that they not only need to respond as health professionals, but need to know how to respond when life gets tough.

I have doubts about whether the wider community is getting on board. I am pretty sure that the NHS knows how to respond if 20 per cent of its staff are affected and off work, and I am quite sure that people in the public emergency services—the police and the fire brigade, for example—have thought about the same issues. They will have an emergency plan. I am also pretty sure—although I would not guarantee this—that every one of our 32 local councils has at least thought about the same things, although they may have thought that they will worry about them when they get there. It would be nice to be reassured that local councils really have thought their way through such matters, although it is hardly fair to ask the cabinet secretary for reassurance on that wider issue.

How is the business community responding? That is not the Government’s problem, but it could quickly become a collective problem. The point has already been made that quite a lot of parents will be at home if a school has been closed or a couple of schools have been closed, and that that will have a knock-on effect in other areas of public service. I am grateful to Rhoda Grant for making the point that those in the transport business are more likely to have contact with the general public. What will happen if half the buses are not running? What will happen if the drivers or conductors are simply not available? Somebody somewhere needs to be thinking about those questions. What will happen if the trains simply cannot run because there are not enough signalmen to keep them running? I am not scaremongering; I am talking about contingency planning, which is quite straightforward.

People in businesses are probably thinking about such things. However, is the wider business community thinking about what will happen if the post does not arrive, the goods that have been ordered from suppliers simply do not get to people, or a third of the staff simply do not turn up for work because they are ill or cannot get in? I wonder how many businesses have seriously thought through such matters. I suspect that the really big businesses have probably done so—I used to work for a really big business—and that one-man bands probably have done so. One-man bands know that they will simply have to soldier on.

However, I suspect that most of those in the middle are too busy trying to survive the downturn in business to give thought to the matter. Therefore, my question for ministers—this is not quite the portfolio of the health ministers, but I ask them because they are in the chamber, on the front bench—is whether the Government is taking the opportunity to communicate to the wider community, and the wider business community in particular, the need to carry out some contingency planning. All businesses need to think this through.

We all hope that this one will go away—we have heard all sorts of comments about whether the second wave will be worse, although the truth is that we do not know—but we know that the current outbreak might be a trial run for an epidemic or pandemic of some proportions at some stage. Therefore, all the contingency planning that people can do would be well done now. Given that life might get quite difficult through the winter—although we all hope that it will not—now would actually be a very good time for small and medium-sized businesses to carry out the contingency planning that they might not have done so far.

The Deputy Presiding Officer (Alasdair Morgan): We move to wind-up speeches.

16:26

Ross Finnie: We have, very properly, had a thoughtful debate. Scotland has been part of a worldwide outbreak of H1N1. Thankfully, the outbreak has not developed to a great extent but, to the extent that it has developed, things have by and large been dealt with effectively and efficiently. It is right that Parliament should in no sense give any hint of complacency to the general public but, on the other hand, neither must we exaggerate the situation or contribute to any uncertainty. Nevertheless, despite all the many and varied speeches this afternoon, we are still left with the conundrum that is posed in the briefing that Mary Scanlon quoted from, which references the WHO high-level consultation of 18 May:

“the only thing certain about influenza is that nothing is certain”.

Try hard as we might to remain calm, collected and focused on the task in hand, any influenza outbreak remains a very considerable challenge.

It is interesting indeed that the two doctors in our midst, Dr Richard Simpson and Dr Ian McKee, both raised issues that, without in any sense giving cause for alarm, drew on their extensive experience of having to deal with such outbreaks. They pointed out the extent of the conundrum that is posed by the fact that nothing is certain with influenza. I regret to say to them both that, despite

their excellent attempts to explain the issues to me, I remained deeply uncertain when each of them closed his respective remarks. Perhaps that was their intention, but in any event their thoughtful and helpful speeches highlighted the extent and nature of the problem.

In the context of a debate that seeks to address how we in Scotland respond to the outbreak, it was right and proper that both Helen Eadie and Ian McKee gently reminded us that, as in all things, those who are most vulnerable and at risk suffer the most when there are problems and trouble. In this case, those in the underdeveloped countries are more likely to be attacked if the outbreak develops at a much greater pace. Therefore, we have a duty not only to share our knowledge and experience within the United Kingdom but to ensure that our Government contributes to greater worldwide efforts to ensure that all such information is shared. Given that we have some experience of the early development of the virus, there must be a way in which we can at least contribute to that process.

However, the general thrust of the debate has been simply to consider the extent to which our contingency planning has been tested to date and to examine both what lessons, if any, might be learned and what outstanding issues have emerged in the outbreak that require further consideration, given that the only thing certain about this uncertain influenza is that it will probably return in a worse form.

The debate has been helpful. We are not many weeks away from the summer recess. We are not looking for great advances, but we and, I suspect, many others would welcome the cabinet secretary reporting to us by some mechanism, possibly in the recess, her assessment of where the current episode has taken us and where she needs parliamentary support to develop other measures.

Our current policy of targeting antiviral prophylaxis has to be assessed; we have to be able to take account of it. Some members have mentioned access to diagnostics. My point was that benchmarking makes that difficult. It might be a question of trying, in conjunction with the other UK authorities, to increase existing capacity, rather than suggesting that we can replicate it, which would be difficult.

As Dr McKee said, we must participate in the development of an effective vaccine against H1N1, but we must be cautious, because that will not happen quickly. We should not try to suggest that it will solve the problem entirely.

The debate has been helpful. It has raised issues for further reflection. It has also allowed us an opportunity as a Parliament to express clearly where we believe we have got to. We are

extremely concerned by the latest case in Glasgow, which is worrying, and we all share the cabinet secretary's concerns for the individual and their family. Nevertheless, by and large, the current phase appears to be broadly under control. Given the great uncertainty, we must be vigilant. We must reflect on this current phase. Should anything return in the autumn, we must be even better prepared then.

16:32

Jackson Carlaw (West of Scotland) (Con):

Given that this is the first full health debate since the Easter recess—I make no complaint about that, given that I felt like I was in possession of a weekly season ticket in the term before that—during which I turned 50, I thank the cabinet secretary for the communication that I received from her. It was not all that I had hoped for, given that it was an invitation to present myself for bowel cancer screening but, nevertheless, it was gratefully received. I confirm that I will take up the invitation and, once again, I encourage all members to do all they can to encourage Scotland's male population to take their health seriously and to take advantage of the screening opportunities that are designed to save their lives whenever they are offered.

The debate follows various statements, all of which the Government has addressed competently and pretty comprehensively. Scotland's unenviable position in finding itself host to the first UK instances of the virus had the unforeseen consequence of catapulting the cabinet secretary's daily briefings to the screens of 24-hour news channels worldwide. I am told that there were even calls from around the globe for her to become health secretary for this or that nation. That is a prospect to contemplate, although I suspect that the cabinet secretary will resist the opportunity to have her head turned. I trust that, in days to come, she will not lament the passing of these dizzying heights of international fame. However, I congratulate her on setting a tone of calm and authority, which we can all be satisfied has been followed largely by the media and the public.

We can contrast that tone with the rather lurid hysteria that accompanied the previous avian flu outbreak, when rather alarmist and apocalyptic visions dominated media coverage. Although they certainly attracted the public's attention, they did rather less to enhance public understanding. In any event, today it is avian retreats—bird-houses—rather than avian flu, that occupy the favours of media attention. The contrast is important because, as we watch the outbreak progress, witness our reaction to it and measure the response of everything that we have put in

place to deal with it, we can be quietly pleased at the collective efforts of all those who have been responsible for preparing the ground.

Mary Scanlon quoted the Royal Society of Edinburgh earlier. I was struck by this observation in its briefing:

"The current events in Scotland ... are providing a real life test of plans for pandemics and it is crucial that we learn from it. Never before has the importation of a new influenza virus been studied so early in its progress and in such detail and with so much media attention. The targeted use of antivirals is new. It is also crucial that when the current outbreak subsides both the science of the outbreak and the response by international agencies and governments are reviewed in detail."

Although there are around 13,000 cases worldwide today, the overwhelming majority remain centred on one continent. It seems that, in preparing for a pandemic, we have done much that is required. However, the debate has illustrated the strong will of all participating to avoid any complacency, learn the appropriate lessons and improve further our response plans.

Richard Simpson brought his professional experience to the debate, with a comprehensive narrative and a series of well-informed questions, including points on diagnostic testing that were also raised by Mary Scanlon. She and Richard Simpson asked sensible questions regarding the possible reliance on one antiviral, Tamiflu.

Ross Finnie made a thoughtful speech on funding, on which we need to reflect.

Ian McKee posed a query on how the distribution of antivirals might be sustained if large numbers were affected, including those who are doing the distributing.

Mary Scanlon asked a number of important questions regarding the preparation of antivirals and vaccines, should there be a recurrence later in the year.

As the Royal Society of Edinburgh points out, there would need to be the much wider infection rate that we are doing so much to prevent for any recurrence to be classed as a second wave. However, we must prepare for eventualities and it would be useful to know how the cabinet secretary's observation that the flu appears to be affecting those who are not typically in the priority vaccination groups will be reflected in any vaccination programme, given that those people are not the people who might expect to be invited to present themselves for vaccination.

There has been no absence of candour or information throughout this episode. All parties and the public have been kept well informed. However, there is some concern that local health boards have been slightly less comprehensive in the information that they have disseminated. As

Jamie Stone noted, it is important that general practitioners are closely involved. Candid, honest, calm and regularly delivered updates have enhanced the authority of those in charge in the public's minds—a lesson that might be learned by others, including some health boards that are less disposed to such an approach.

NHS teams have prepared and coped well, and we can be proud of them. A fortnight ago, I visited the Vale of Leven hospital with my Westminster colleague Andrew Lansley so that he could learn lessons at first hand following the *Clostridium difficile* tragedy there. I can confirm that the hospital has made spectacular progress in implementing the investment recommendations that were made. However, the teams on the ground were talking about their preparations for any H1N1 outbreak, and were keeping a close watch on events across the water in Greenock. We can all be impressed with their attention to detail and willingness to respond as required.

Stuart McMillan remarked on the response of a community at the centre of the outbreak, and congratulated those people on their forbearance, in which tribute I happily join him.

As an Opposition party, we have a responsibility to examine the conduct of the Government and question progress that is made. In so doing, we will assist in ensuring not just that this outbreak is dealt with effectively but that lessons are learned to improve further on plans that are already widely regarded as being well prepared and effective.

It is also our responsibility to offer support to the Government and ministers as they seek to map a route through the issue. We have been happy to do that, and we particularly welcome the easy relationship and willing partnership that have developed in this area between the Scottish Government and Administrations throughout the UK.

It might be a relative expression, especially to those who have been affected, those who are currently suffering and those who are at risk, but so far, so good.

16:38

Cathy Jamieson (Carrick, Cumnock and Doon Valley) (Lab): I would like to associate myself with the comments that have been made about the hard work and dedication of NHS staff and all the other staff who have been involved in tackling the outbreak.

The debate has been interesting and useful. When I first learned the subject of the debate, I wondered whether we might all just say pretty much the same thing. Common themes have been brought out during the afternoon, such as issues

to do with the science of the possible pandemic, civil contingencies and the health service's preparedness and ability to respond, and I will pick up on a few of those points.

One theme has been the importance of not overreacting. I think that everyone recognises that, in dealing with the situation, the Scottish Government has not overreacted; we have been given information and the opportunity to participate. That perhaps contrasts with what happened during the avian flu outbreak. The Cellardyke swan incident remains imprinted on my memory, as I am sure it is on Ross Finnie's. Any "hysteria", as it was described, around the avian flu outbreak was certainly not for want of trying on Ross Finnie's part. He was a model of calm in trying to ensure the right response. If a slightly wrong approach were to be taken, however, we could again find ourselves in a very difficult situation.

The danger is that, in trying to strike a balance in any crisis situation, ministers get no credit. If there is no disaster, they are accused of having overplayed the dangers in the first place and, even if they do everything by the book, they get the blame if something goes wrong. Nicola Sturgeon has been in politics and—indeed—government for long enough to know all that, so I do not need to labour the point.

We should take comfort from the fact that we are still in the containment mode, particularly given that the planning assumptions were of a more aggressive and virulent strain of flu leading to a pandemic and of a much shorter timescale—perhaps only a few weeks—from containment to mitigation and dealing with the consequences. However, as many members said, we cannot be complacent. As we heard in the debate, there are concerns that the virus will return in a more aggressive form later in the year. We must be vigilant and prepared for that. Again, evidence suggests that, even though those who are most likely to be affected are younger than is traditionally the case with flu outbreaks, there is no saying what will happen in the event of a recurrence of the virus. Of course, if a further outbreak were to coincide with normal seasonal flu pressures, there would be an impact on health service and services for the elderly in particular. We would have to be prepared for that.

A number of members commented on the impact of an outbreak on rural areas and the need to ensure not only the availability of drugs and medical treatment but the provision of care, particularly, though not exclusively, for our elderly population. Rhoda Grant highlighted some useful points in that regard. When we think of a pandemic that affects the elderly, we tend to think about the impact of an outbreak in the care home

sector. Nowadays, however, many elderly people live in their own homes and are absolutely reliant on carers. It will therefore not be enough simply to line up the medical professionals to deal with their part of the picture if social services, the voluntary sector and everyone in the community are not prepared to play their part in the process. As we heard, part of the preparation lies with Government and health agencies. They have to ensure that the necessary equipment, training and resources are in place and that partner agencies and, to an extent, the public are involved.

Nigel Don made a particularly thoughtful speech. He talked about the responsibility of the emergency planning authorities that are put hard at work to ensure that all the contingencies are covered. He also spoke of the business community, some members of which may have the outbreak on their radar but have not put in place any detailed planning.

The Government needs to strike a balance in planning for a pandemic. On the one hand, it must not go overboard and ask everyone to cross every t and dot every i but, on the other, it must not let people become blasé and think that, because the outbreak has not gone the way that everyone feared, it might not happen at all. If people become blasé in that way, they might do nothing by way of preparation. Another member mentioned that.

A number of points were raised in the debate. I hope that the Minister for Public Health and Sport will answer them in her summing up. For example, have changes been made to the planning process and the planning assumptions based on experience so far?

Particular issues were raised about improving access to rapid diagnostic testing. As we have heard, that is not simply a case of setting up another laboratory; nonetheless, if the pandemic were to arrive, as we fear it might well do, how will that matter be dealt with?

There are also issues to do with the supply of antivirals. We have heard discussion this afternoon about whether we should be focusing only on Tamiflu. Is there a case for considering Relenza or other options?

We need further debate and discussion on the issue of priority groups for vaccination, if and when the pandemic arises. I know that the cabinet secretary will wish to keep us all up to date about that.

In her opening speech, the cabinet secretary mentioned the setting up of the web-based and telephone-based system, and the need to ensure that the flu line would be there to provide information for people. That sort of information cannot be given out often enough in advance of a

situation arising, when people have to use it. The information will not be on the public's general radar if it is not put out into the public domain time and again.

When planning for the future, it is important that we have some idea of what will happen with schools and other public services in the event of a pandemic. It is not simply a case of schools closing and the associated issues around what happens to pupils and children; if young people are going to be out of school or college for an extended period, what knock-on effect would that have on their overall education, exams and so on?

There are serious issues to be addressed regarding civil contingencies, and there are big decisions to be taken regarding prisons in the unfortunate event that something happened that meant that we had to consider the steps that were required for the prison population and for those who work in prisons.

I hope that, in the weeks ahead, the cabinet secretary will be able to pick up on the points that Ross Finnie and other members have raised about keeping Parliament up to date. It has been useful to have had the opportunity to participate in discussions. I also hope that the cabinet secretary will send a message to health boards that they need to be slightly more proactive in engaging with their local MSPs. A number of people have said that they have needed to go and look for information from health boards. It would be useful to get the message out that it would be helpful if, in managing the process, health boards kept local MSPs up to date on local plans.

We will be supporting the Government motion today—we have no reason to divide the chamber. There are some difficult questions and decisions ahead, however, and we look forward to further discussion on them.

16:48

The Minister for Public Health and Sport (Shona Robison): I thank everyone who has contributed to the debate, which has been good and constructive. It is clear that the Scottish Government cannot tackle an influenza outbreak, a pandemic or any major emergency, on its own; dealing with such an event requires effective joint working with a wide range of partners. We need to work closely with those partners, and we are doing so through the eight strategic co-ordinating groups, with the key principle of integrated emergency management.

Over the past four weeks, the arrangement has worked very well. Local agencies have risen extremely well to the challenges that have been presented by a fast-moving and unpredictable set of circumstances and we have seen the benefits of

strategic co-ordinating groups, which have been working collaboratively. The existence of the groups has made communication so much easier. We have been able quickly to identify, discuss and resolve a range of questions on an on-going basis.

Following the events of the past month, Scotland has achieved a high state of readiness for dealing with the worst effects of a flu pandemic. We are acting now to ensure that we maintain that state of readiness over the coming months. For example, we are securing supplies of vaccines. We want to procure as much vaccine as possible to enable us to start a vaccination programme as soon as we can. Perhaps more important, however, is the fact that we have had the chance to test out the country's preparedness. We will learn from that experience so as to be even better prepared for future flu outbreaks.

We have put in place enhanced co-ordination arrangements, to lead and co-ordinate planning for a possible pandemic later in the year. The arrangements will be informed by and take account of the developing scientific analysis of the A(H1N1) virus and assumptions about prognosis, risk assessment and planning.

Our links with stakeholders will be key to collaborative working during the coming months. Although our work is not yet over, I thank stakeholders whole-heartedly for the efforts in all sectors of Scottish life that have enabled us to work together so effectively. I reassure Nigel Don that we have been in contact with the business community. Preparations by councils are well advanced and councils are involved in local emergency planning groups. The Convention of Scottish Local Authorities has joined us at national emergency planning group meetings. We have done as much as possible to ensure that all key stakeholders have been involved and are at a good state of preparedness in their plans.

I visited NHS Tayside's pandemic control room at King's Cross hospital on 8 May, to learn about local preparations for a possible flu pandemic. I was impressed by the effort and rapid response of everyone who is involved in the multi-agency team.

We have worked closely with the other Administrations in the UK. That has allowed us to keep in close touch with developments throughout the UK and enabled learning about processes and science to be shared quickly among the four countries. However, we have based our decisions on the best outcomes for the people of Scotland.

So far, the symptoms have not been too severe in most cases, but we need to remember that they can be severe for a person who has an underlying medical condition, as appears to be the case with the patient in Glasgow. I can inform the Parliament

that in the past few minutes the probable case in Glasgow has been confirmed positive for H1N1. We cannot afford to be complacent.

At local level there has been the temporary and precautionary closure of a primary school and a nursery in Greenock. We acknowledge the potential for disruption when schools are closed but we are confident that local decision makers based their decisions on the expert advice that was available. Although it is still early days, the measures appear to have reduced the potential for contact spread.

I will talk about issues that have been raised and I will write to members about matters that I do not deal with. Richard Simpson asked too many questions for me to be able to respond to them all in my speech, but I will write to him. On the worldwide research effort, Scotland inputs data to the Health Protection Agency, which in turn submits data to the WHO. The collation of information worldwide is important in enabling us to understand as much as possible about the virus. This afternoon, a research meeting of the scientific pandemic influenza advisory group took place. Scotland is a partner in the group and our chief scientist office will share developments with Scotland's research fraternity.

Mary Scanlon asked about discussions with the farming industry. The chief veterinary officer for Scotland has been closely engaged in discussions. Communication has been important, to ensure that key stakeholders, including the farming community, are as informed as possible.

I welcome Ross Finnie's helpful comments about access to Treasury funding for vaccine procurement and about the precedent in relation to foot-and-mouth disease. We welcome his support in that regard.

Helen Eadie asked about travel advice. We encourage people to use the Foreign and Commonwealth Office website, which gives the most up-to-date travel advice. The FCO is best placed to provide such advice.

To assist with communication, a new pandemic preparedness planning team is being set up in Government, to co-ordinate our response, support responders and facilitate the identification and resolution of difficult issues. I hope that that provides Nigel Don with the reassurance that he sought.

The Edinburgh and Glasgow virus laboratories are completing validation work in conjunction with the Health Protection Agency's internationally recognised virus laboratory. We expect that to allow them to confirm H1N1 samples after 1 June—if the validation work completes satisfactorily. I hope that that responds to Cathy

Jamieson's point about setting up another laboratory.

Many other issues have been raised—too many for me to respond to now, but we will try to respond to some of them in writing.

Scotland has shown itself to be ready to cope with an emergency. I commend the pace and willingness of all those involved, across a wide range of agencies, in dealing with the influenza H1N1 outbreak. It has also been helpful for the Government to have the support of other parties. We have tried our best to keep the other health spokespeople informed of developments. We will continue to do that and we welcome their support for the measures that we have taken.

I encourage local health boards to keep local MSPs as updated as possible, although I am sure that members realise that the priority for health boards must be getting their plans in place, ensuring that everything is done that must be done and ensuring that communication is accurate. I am sure that they will be able to respond to local MSPs' requests to be kept up to date as much as possible, but I ask members to bear in mind the fact that the situation is fast moving.

I thank all members for their speeches. We will respond to their specific points in writing in due course.

Business Motion

The Presiding Officer (Alex Fergusson): The next item of business is consideration of business motion S3M-4238, in the name of Bruce Crawford, on behalf of the Parliamentary Bureau, which sets out a business programme.

16:57

The Minister for Parliamentary Business (Bruce Crawford): Motion S3M-4238 deals with the business for Wednesday 3 June, Wednesday 10 June and Thursday 11 June 2009. Members will be glad to know that the Parliament will discuss some extremely important matters, such as the stage 3 proceedings on the Sexual Offences (Scotland) Bill and the stage 3 proceedings on the Offences (Aggravation by Prejudice) (Scotland) Bill, and make the rather novel decision to hold question time on Wednesday 3 June.

I move,

That the Parliament agrees the following programme of business—

Wednesday 3 June 2009

2.00 pm	Time for Reflection
<i>followed by</i>	Parliamentary Bureau Motions
2.05 pm	General Question Time
2.25 pm	First Minister's Question Time
2.55 pm	Themed Question Time Rural Affairs and the Environment; Justice and Law Officers
3.35 pm	Stage 3 Proceedings: Offences (Aggravation by Prejudice) (Scotland) Bill
<i>followed by</i>	Business Motion
<i>followed by</i>	Parliamentary Bureau Motions
5.00 pm	Decision Time
<i>followed by</i>	Members' Business

Wednesday 10 June 2009

2.30 pm	Time for Reflection
<i>followed by</i>	Parliamentary Bureau Motions
<i>followed by</i>	Stage 3 Proceedings: Sexual Offences (Scotland) Bill
<i>followed by</i>	Business Motion
<i>followed by</i>	Parliamentary Bureau Motions
5.00 pm	Decision Time
<i>followed by</i>	Members' Business

Thursday 11 June 2009

9.15 am	Parliamentary Bureau Motions
<i>followed by</i>	Scottish Government Business

11.40 am	General Question Time
12 noon	First Minister's Question Time
2.15 pm	Themed Question Time Finance and Sustainable Growth
2.55 pm	Scottish Government Business
<i>followed by</i>	Parliamentary Bureau Motions
5.00 pm	Decision Time
<i>followed by</i>	Members' Business

Motion agreed to.

Parliamentary Bureau Motions

The Presiding Officer (Alex Fergusson): The next item of business is consideration of a Parliamentary Bureau motion. I ask Bruce Crawford to move motion S3M-4239, on the approval of a Scottish statutory instrument.

16:59

The Minister for Parliamentary Business (Bruce Crawford): It gives me pleasure to tell the Parliament that, if we agree motion S3M-4239, we will agree that the draft Scottish Public Services Ombudsman Act 2002 (Amendment) Order 2009 be approved.

I move,

That the Parliament agrees that the draft Scottish Public Services Ombudsman Act 2002 (Amendment) Order 2009 be approved.

The Presiding Officer: The question on the motion will be put at decision time.

The next item of business is consideration of a Parliamentary Bureau motion. I ask Bruce Crawford to move motion number S3M-4240, on the approval of an SSI.

Bruce Crawford: Presiding Officer, in moving S3M-4240, I should let you know that the Parliament will today agree the draft Crime (International Co-operation) Act 2003 (Designation of Participating Countries) (Scotland) (No 2) Order 2009. We ask for it to be approved.

I move,

That the Parliament agrees that the draft Crime (International Co-operation) Act 2003 (Designation of Participating Countries) (Scotland) (No. 2) Order 2009 be approved.

The Presiding Officer: The question on the motion will be put at decision time. I commend the Minister for Parliamentary Business for the thorough way in which he moved those motions.

Decision Time

17:00

The Presiding Officer (Alex Fergusson): There are three questions to be put as a result of today's business. The first question is, that motion S3M-4217, in the name of Nicola Sturgeon, on influenza A(H1N1), be agreed to.

Motion agreed to,

That the Parliament acknowledges the work of NHS Scotland, local authorities and other stakeholders in handling the recent outbreak of Influenza A (H1N1); commends NHS boards and Health Protection Scotland for the success so far of the containment strategy in limiting the spread of the virus by quickly and effectively treating confirmed cases, tracing contacts and dealing with possible and probable cases; accepts that we must maintain a high state of preparedness given the potential seriousness for the nation's health and economy of a full-scale pandemic, and supports the collaborative approach of the Scottish Government and all its partners, both within Scotland and beyond, in minimising the spread of A (H1N1).

The Presiding Officer: The next question is, that motion S3M-4239, in the name of Bruce Crawford, on the approval of a Scottish statutory instrument, be agreed to.

Motion agreed to,

That the Parliament agrees that the draft Scottish Public Services Ombudsman Act 2002 (Amendment) Order 2009 be approved.

The Presiding Officer: The final question is, that motion S3M-4240, in the name of Bruce Crawford, on the approval of an SSI, be agreed to.

Motion agreed to,

That the Parliament agrees that the draft Crime (International Co-operation) Act 2003 (Designation of Participating Countries) (Scotland) (No. 2) Order 2009 be approved.

Sheep (Electronic Identification)

The Deputy Presiding Officer (Trish Godman): The final item of business is a members' business debate on motion S3M-4150, in the name of Liam McArthur, on the electronic identification of sheep. The debate will be concluded without any question being put.

Motion debated,

That the Parliament notes with concern that the EU Council of Ministers has voted to press ahead with the introduction of compulsory electronic identification (EID) of sheep across the European Union; recognises that this decision was taken despite outright opposition from some member states and growing unease among others about the cost and practicalities of such a scheme; doubts that a system of EID can be found that is workable on most of Scotland's sheep farms, particularly those in the Highlands and Islands; further notes that £3 million has been committed to a large-scale pilot to try to find a workable and cost-effective solution, and believes that the European Commission has much to learn from observing the pilot and, should a solution not be identified, that a derogation from a compulsory EID scheme would be in the best interests of Scotland's sheep farmers.

17:02

Liam McArthur (Orkney) (LD): I am delighted that Parliament has an opportunity to debate this important issue this evening. I thank those members who signed my motion, who probably included David Whitton, and those who are present in the chamber for what I am sure will be an interesting exchange. I am grateful to those who took time earlier today to meet Kelvin Pate and a small but boisterous delegation from his flock. Rumour has it that *Holyrood Magazine* is seeking no more photographs for the caption competitions for the rest of the year.

Important though this debate is, some might question its timing, given the decision by the European Council of Ministers in March to end our derogation and press ahead with introducing compulsory electronic tagging of sheep in the United Kingdom. It could be argued that we are locking the pen after the yowe has bolted, but even if the European Commission does not get its way on sheep EID we stand a fair chance of tracing her. I believe that the debate is still live and that there is a great deal to play for. More important for our sheep farmers, many of our remote communities and rural economies and our environment is that there is much to lose if we do not win the argument between now and 31 December. Success will require a concerted and genuinely collaborative effort over the coming months. I hope that this evening's debate will send a clear message about the cross-party support for such an effort.

As farming representatives made clear to MSPs earlier today, much of the onus lies with the Scottish ministers to act decisively and to stay the course for as long as it takes. Evidence must be gathered, arguments crafted and alliances fashioned with other member states and farming industries. Most of all though, the Scottish ministers must engage directly and urgently with Commissioner Vassiliou, who has offered to consider a more flexible approach. Her officials have reiterated that to the industry; the Scottish ministers must now make the political sell for a voluntary scheme on farm, with controls at various critical points where the risk of disease and the need for traceability are demonstrable.

Much of the legwork has already been done. NFU Scotland and Nigel Miller are to be congratulated on developing proposals that may stand a chance of being workable in the context of how sheep are farmed in this country.

Rob Gibson (Highlands and Islands) (SNP):

This issue has been going on since about 2003, so can the member explain why it has reached a point now, according to his speech, whereby the Scottish Government must deal with it at the 11th hour?

Liam McArthur: Absolutely. This debate was kind of pre-empted by yesterday's SNP press releases. The previous Administration sought derogations for unworkable proposals; it is now up to ministers in the current Government to make the sell for, if not further derogations, then at least the flexibility that we now need.

The industry's anger is understandable, not least because of the timing of the proposals. We already face the challenge of trying to stem and reverse the haemorrhage of sheep from our hills and island areas. The economic and social impact of a further loss of sheep from those areas could be devastating for many fragile communities, some of which have lost up to 60 per cent of their sheep since 1999.

The environmental cost, too, must not be overlooked. RSPB Scotland points out in its briefing:

"additional labour and costs implied by the proposed compulsory introduction of electronic sheep ID could contribute to the difficulties in keeping sheep in"

some

"areas and so further impact on biodiversity".

European Council regulation 21/2004 was designed in response to tracing issues that were highlighted by the foot-and-mouth disease outbreak in 2001. Since then, in 2007, we have had a further reminder of the cost and disruption that such outbreaks can cause. I do not think that any member would dispute the need for good

traceability of sheep. As with cattle, good traceability of sheep is an essential part of disease control and helps to underpin public and consumer confidence, but any regulation must be evidence based, proportionate and targeted. In all three respects, regulation 21/2004 is defective. Indeed, the 2007 FMD outbreak demonstrated that lessons had been learned since 2001 and that contingency measures were effective in controlling the spread.

As NFU Scotland makes clear in its briefing and has been pointing out for months, the regulation is undeliverable in its current form. There are many reasons for that. The principal ones are the challenge of maintaining individual identity within large flocks; cross-compliance issues that will arise from a failure to achieve high levels of identification in extensive systems; and the high cost of implementation relative to the value and profitability of the sector and the benefit that will ultimately be achieved.

Anyone who has even a rudimentary understanding of sheep farming in Scotland can see the impracticalities of what is being proposed, particularly in the Highlands and Islands. My colleagues Jamie Stone, John Farquhar Munro and Tavish Scott can doubtless provide graphic examples of why the proposals are impractical, some of which may even be publishable in the *Official Report*. Orkney might not boast the wide untamed expanses of the west Highlands—where satellite navigation rather than EID might be called for—but it presents its own challenges to local sheep farmers.

The North Ronaldsay sheep, which are reared on seaweed and kept off the better-quality grassland by a sea wall around the island, are probably the most famous Orkney ovine. One of my earliest memories after I moved to Orkney in the late 1970s was of my father taking North Ronaldsay—rolly—sheep in his creel boat over to Lingaholm, off Stronsay. As there was no pier and a fairly basic approach to loading and unloading, it is fair to say that the life expectancy of your average tag—EID or otherwise—would have been fairly limited.

The truth is that, from the Borders to the western and northern isles, sheep farming in Scotland is—for practical, geographic and climatic reasons—very different from sheep farming in other parts of the European Union. To reflect that, the NFUS has developed a series of counter-proposals. The Commission has shown itself willing to respond to the demands of other member states for flexibility, and the commissioner has declared her willingness to do likewise in the case of the UK. It is now imperative that, over the coming months, a similar case is made successfully on behalf of Scotland's sheep industry.

The NFUS's proposals identify levels of risk and target accordingly, which has the benefit of reducing the burden on individual farmers, increasing producer acceptance and improving compliance. As a result, high traceability can be more successfully delivered. The basis of the NFUS's proposals is that sheep that are based on the farm where they were born present no health risk and that it is only once they move off the holding that traceability becomes a factor. Until such movement occurs, it is proposed that a simple flock identifier would be the only required form of identification. After that point, various options have been suggested, from full compliance with the regulation through to the use of a single EID under the so-called slaughter derogation, which allows for batch traceability. Those are practical and workable solutions that would deliver disease control and robust traceability and reduce some of the costs to individual farmers and crofters but, as the NFUS makes clear,

"at a political level, this will only work with further pressure from the Scottish Government on the European Commission and on the UK Government and other Member States' governments to re-visit the issue in the Council of Ministers".

Therefore, it would be helpful to know what meetings have taken place or are planned with UK ministers to discuss the NFUS's proposals, and what specific steps have been taken to put and keep the issue on the agenda of the Committee of Permanent Representatives and the Council of Ministers. Has a meeting been sought with Commissioner Vassiliou? If so, when will it take place? What meetings have been sought or secured with other member states to build support and to discuss the impact and cost of introducing such measures?

The threat that the EU's proposals pose should not be underestimated—Kelvin Pate was clear about that earlier this afternoon—and if they are implemented in their present form sheep farmers will leave the industry in droves. The Scottish ministers have the evidence and the counter-proposals from the industry and they have received an invitation from the commissioner. Thanks to this evening's debate, I hope that they will recognise that they have the full backing of this Parliament. It now remains to be seen whether they have what it takes.

17:09

Peter Peacock (Highlands and Islands) (Lab):

I am happy to support Liam McArthur's motion and to add my voice on this important issue. I am especially pleased that our expert, David Whitton, is with us tonight. Members may mock, but his expertise on particular aspects of the sheep flock

will be exposed fully in a few moments' time, when he makes his contribution to the debate.

It is easy to understand that at one point some well-intentioned EU official was clear about the origins and intention of the proposals. Of itself, traceability is not a bad thing—the NFUS brief makes it clear that it is important. Disease control is also important. It supports the guarantees that people get for stock that comes from markets that have traceability, which can improve the price in the marketplace. I am sure that someone thought that electronic identification was the way in which to ensure traceability in the modern world, to save paperwork and to ease administration.

I can see how the proposal originated but, as Liam McArthur set out, it is utterly impractical in the Scottish context and adds cost to an already fragile industry that is suffering badly at present. That is cost to the producer, which cannot easily be passed down the rest of the chain. The proposals are impractical because of the terrain in which most of our people operate, especially in the Highlands and Islands. Gatherings can never be complete in such terrain—when people lose stock there, they may never understand how they have lost it. The technology is not yet fully proven. Naturally, people are worried that, if they infringe, there will be cross-compliance issues that will affect their potential income.

For the reasons that I have set out, the UK Government has opposed the proposals for many years. Clearly, it believed—and still believes—that the costs outweigh the benefits. It has questioned the proposals from the outset, with the support of the Scottish Government, and the issue has been raised in the Council of Ministers. The responsible UK minister has met the Commissioner for Agriculture and Rural Development and urged a rethink; I am sure that Scottish ministers have done the same. At recent council meetings, the UK Government has supported others in urging a rethink and has secured a delay in the proposals' implementation, the phasing-in of certain recording requirements and agreement that sheep under one year of age will not be tagged for slaughter.

As Liam McArthur indicated, at the most recent council meeting, the Commission began to show signs of keeping open the door to greater flexibility on how the proposals would be implemented, if not on whether implementation would take place. I understand that the UK Government is happy to keep raising the issue for as long as it takes to get a resolution.

As Liam McArthur indicated, the NFUS has developed the strategy that it will contribute to the debate. Rightly, it is trying to get the support of other farming unions across the EU, so that those unions can put pressure on their state Governments. As long as the UK, with the support

of the Scottish Government, has raised the issue in the European Union, it has done so with little support from other member states. That is a key point. Until we get support from other member states, the hard reality is that we will be stuck with the current situation. However, flexibility is now opening up—we need to walk through that door.

I know that the Scottish Government has been working closely with the UK Government on the issue. I urge it to continue to do so until we find solutions. I know that the UK Government has been active in trying to recruit more support from other member states, but some states have already implemented the proposals. Others, as I am sure Jamie McGrigor will tell us, do not really worry about the issue, because they are below the thresholds at which the proposals apply.

The most worrying aspect is that, unless practical solutions are found, it will be yet another reason for people to leave sheep farming in the areas that we represent, on grounds of cost, practicality, worries about cross-compliance and the like. That would impact on the many other services—including transport, veterinary services and feed supplies—that support the industry and rural communities, and would be another reason for the industry's decline. That is why we need to find an answer; I trust that the minister will indicate what further measures will be taken to secure one.

The Deputy Presiding Officer: I call Allan Alasdair, to be followed by John Scott.

17:14

Alasdair Allan (Western Isles) (SNP): Thank you, Presiding Officer—I will give way to Scott John in a moment.

I thank Liam McArthur for bringing forward this pertinent topic for discussion and for ensuring that there were sheep at the door of the Parliament this morning to illustrate the point of tonight's debate. I cannot help feeling that, if we were in the legislature of France, the animals would have been driven into the chamber to make that point.

Liam McArthur: Maybe next time.

Alasdair Allan: Well, there are sheep.

Only this morning I was contacted by a crofting family, who made it plain that the system of electronic tagging—certainly as originally agreed by Europe—would be the final straw for him and some of his neighbours. In island constituencies such as mine, crofters practise a highly marginal form of agriculture. In general, the number of animals is small when compared with a commercial sheep farm; many of my constituents have only 40 or 50 sheep. Proposals to bring in, from January 2010 onwards, the compulsory

electronic identification of sheep will therefore have a huge practical impact.

The delay in introducing the electronic identification of sheep allows the Scottish Government to continue to work with the European Commission and with the Scottish agricultural industry to try to find workable solutions. I know that the Cabinet Secretary for Rural Affairs and the Environment and the Minister for Environment have already made significant representations on this issue, pressing for a workable interpretation of the ruling to be found.

In the community where I live, people have rightly not been slow to let me know their views. They are simply not convinced of any practical benefits from electronically identifying sheep. The cost burden might be easier to bear if crofters could see some point to the exercise in their setting. The task facing an elderly crofter in a place such as Harris to gather and tag sheep electronically is not to be underestimated—especially when that task might follow in the wake of weeks of associated form filling. I believe that similar examples are being cited from around Europe—or at least from places such as the Pyrenees. That makes the case for geography and culture to have at least some bearing on how European directives are implemented.

The stated aim of the sheep identification proposals is the more effective monitoring of individual animals, for disease control in particular. As others have said, part of the criticism levelled at the proposals stems from real doubts about the effectiveness of the technology. However, as well as the cost implications, there will be a negative effect on the general morale of small-scale crofters.

Mike Rumbles (West Aberdeenshire and Kincardine) (LD): A number of speakers have concentrated on the Highlands and Islands, but does the member agree that the proposals for sheep identification are a real issue in areas such as West Aberdeenshire and other parts of Highland Scotland?

Alasdair Allan: I have no difficulty at all in agreeing with that point. I have been speaking about my constituency, but the points stand for other parts of Scotland too.

As I was saying, there will be an impact on morale, especially at a time when sheep and lamb prices in island and other communities have been slow to recover from the catastrophic low points of recent years.

Electronic identification and individual movement recording far exceed what is genuinely needed, and the implementation of EU regulation 21/2004 will not, in many cases, achieve the Commission's aims. Instead, the regulation will add cost and

inconvenience to an already fragile way of life. Worse, it will dispirit potential new entrants if they are faced with yet another level of bureaucracy.

After considerable lobbying by the cabinet secretary and the minister, high-level meetings have been held with the Commission and with Commissioner Vassiliou to discuss an alternative interpretation of the regulation or perhaps even an opt-out for Scotland. I hope that sense will prevail and that the European Commission will acknowledge that the scheme cannot be made mandatory. It cannot be forced on crofters and farmers against their will and better judgment.

17:18

John Scott (Ayr) (Con): I declare an interest as a sheep farmer and as someone who is directly affected by these proposals. I, too, congratulate Liam McArthur on securing this debate on sheep EID. We should remember at the outset that the alternative to EID is manual recording. However, we are where we are, and the derogations that were sought in the 1990s in relation to tagging, which I helped to negotiate, have now been lost to the UK. However, that was not because Scottish farm recording was found wanting on inspection.

As things stand, the Government is committed to the introduction of electronic sheep identification if it is possible, while 9,000 farmers—led by the Teviotdale Farmers Club, NFU Scotland and *The Scottish Farmer*—are opposed to it. The minister will concede that that represents significant opposition.

Implementing regulation 21/2004 will give rise to significant challenges for the sheep sector. Among those challenges will be the maintaining of individual identities within large flocks, and the identification and recording of individual sheep in extensive systems. Concerns have arisen to do with tag losses, training and workability on farms, and also to do with the cost relative to the profitability of sheep production. Much of the cost will fall on the primary producer, with the benefits, such as they are, being secured by others—at the very time when the Government acknowledges the problems that face a diminishing sheep industry.

Many farmers and farmers' wives have told me that they will either reduce or completely disperse their flocks if individual recording is introduced. If the minister is to proceed with this project, she will have to make it work, and quickly, or she will face further huge reductions in Scottish sheep-breeding numbers.

In the first instance, if sheep EID is to be introduced, it must work and be able to replace a paper system that everyone dreads. In favour of EID is the fact that paper-based systems that are manually inputted always have an error rate of 10

per cent, and the longer the paper trail, the larger the error becomes. EID, on the other hand, gives more than 95 per cent accuracy on each reading in trials and, if batches are read twice, the accuracy rate rises to 99.9 per cent, which is statistically significant enough for animal disease traceability purposes.

If EID is to be introduced, that must be done at a reasonable cost. It would be pointless to tag breeding ewes or ewe lambs at birth that will not leave the holding until they are five years old or older. Identifying how and where costs can be minimised and made affordable, and where the benefits to the industry can be maximised, is a prerequisite, assuming that EID can be made to work in the first place.

The minister has pledged financial support for the introduction of EID. That money must, at least in part, go towards the establishment of critical control points where readings can be taken to keep producer costs to a minimum. Those will be at markets, abattoirs and larger farms that report their own and, perhaps, others' movements and on docksides. They will also be provided by hauliers and approved agents. Government support must go towards further developing the technology to levels at which producers' fears are allayed and costs are acceptable. Unless and until that is the case, the proposal will encounter only hostility from sheep producers. Derogations must therefore be sought in line with the NFUS proposals and, to be acceptable, they must remove or reduce to a minimum on-farm scanning and recording costs.

If introduced, EID must work easily and effectively, and adequate training will need to be provided. Problems associated with different types of tags, the incompatibility of systems and data transfer will need to be overcome. I understand that the Scottish Agricultural Organisation Society believes that, in time, the system can be made to work. However, today, the ball is in the minister's court. She must persuade producers not only that EID can be made to work but that it can be made to work in producers' best interests. Outright hostility to EID proposals as they stand remain, so a lot of work still needs to be done for that to be overcome. I look forward to the minister outlining in her closing remarks how she intends to achieve that.

17:22

Jim Hume (South of Scotland) (LD): I declare an interest as a sheep farmer, like other MSPs, and as a past director of NFU Scotland. I congratulate Liam McArthur on securing this important debate at a time when we need action.

Sheep farming has a long history in Scotland. We have heard about the Highlands and Islands, but the history is nowhere longer than in the south of Scotland, where famous flock names such as the Cheviots came from and where the expertise of husbandry grew. That expertise was taken to the Highlands and into Galloway when they had their clearances and it was exported around the world to New Zealand, where there are many Scots-named farms and farmers. Of course, our premium textile industry also grew up with the sheep industry—it is no coincidence that tweed is so named.

We now face new clearances. The Scottish Agricultural College, the Royal Society of Edinburgh and the NFUS have all recently published figures showing an alarming decline in the sheep stock of Scotland, which directly correlates to the decline in active farming in the hills. We are losing sheep and working people from the hills. There are 25 per cent fewer sheep than there were 10 years ago and the figure is still falling, even with the recent, long-awaited rise in prices due to the falling value of the pound.

The last thing that we need is more unnecessary burdens. Unlike the Conservatives, I am not lying down to electronic ID. The recent pilot project that is referred to in Liam McArthur's motion found three things that we practitioners knew before—the expense of EID, the needless time taking of it and how poor it is for animal welfare. Various electronic readers and tags would need to be bought, and none of those costs would be paid by retail buyers—and I doubt whether they would be paid by the Government. They will all come out of the industry. That is fine when the money is there but disastrous when it is not.

It takes time to insert the tags properly—it is no easy job, especially on a cold, wet morning. Sheep do not normally keep their heads still. Think how impractical it is when a shepherd has 1,500 ewes and a similar amount of lambs to tag by himself or herself. In fact, the job is near impossible. There are neither the spare staff nor the time on farms to implement electronic sheep ID in any form. As Mr McArthur mentioned, our flocks are now larger and more numerous than those of most of our European neighbours. Sheep EID therefore acts as an additional pressure on farmers to decrease their sheep numbers, and the knock-on effect that that has on our rural communities and related industries can only be negative.

There are concerns about fines if the system fails. As Peter Peacock mentioned, cross-compliance is an undue pressure on hard-pressed communities. I have already mentioned animal welfare—necrosis in a sheep's ear is not a pretty sight. It is most unpleasant for the animal, which will be pestered by flies and mackit, although that

is perhaps not a problem in the islands. There are also impracticalities in relation to sheep that are affected with yellowosis, and torn ears in hedges.

Those issues are all important, but the main problem with sheep EID is that it is totally unnecessary. We have in place a system that works—if it ain't broke, why fix it? We should consider the madness that will ensue if the system is introduced: a hill sheep will have to be electronically tagged; it will go nowhere from the hills in its working life; and if it still has its microchip and that chip is still working, the chip will not be read until six years after tagging. It is far better that sheep are tagged only when they leave their holding, which is a practice that works and can be audited.

We desperately need a derogation now—our own Liberal Democrat minister succeeded in getting one in 2005, in relation to double tagging. It is now Mr Lochhead's responsibility to achieve what has been achieved before. Article 68, as proposed by the Government, would split the agricultural industry. Failure to achieve a derogation in relation to electronic sheep ID would decimate the sheep industry, which is one of Scotland's oldest industries. I welcome the motion, which highlights this important issue.

17:26

Jamie McGrigor (Highlands and Islands) (Con): I refer to my agricultural interest, which appears in the register of members' interests.

I thank Liam McArthur and all those who have been campaigning to ensure that the issue has remained at the forefront of politicians' minds. They include the Scottish Crofting Foundation, the NFUS and the National Sheep Association in Scotland; people such as George Milne, and Sybil and John Macpherson, from my native Argyll and Bute; and *The Scottish Farmer* newspaper. They are all fighting hard for our sheep industry.

As my colleague John Scott said, EID offers no real benefit in relation to traceability in Scotland. We in Scotland need to be able to move sheep on a batch basis through markets and between farms, and a tag that includes the UK herd number should be sufficient. The current system is simple, efficient and—crucially—cost effective. The whole concept of EID for sheep is a classic example of how a one-size-fits-all policy can be disastrous for particular European Union member states, and of the real lack of understanding in the EU about the nature of the sheep flock in the UK and Scotland, which will be more affected by these plans than the flock of any other state.

Indeed, 16 EU member states will not have to introduce EID, as their national flocks comprise fewer than 600,000 sheep. Given the rate at which

we are losing sheep from Scotland's hills, the number of states that will not have to introduce EID could soon rise to 17. It is hardly surprising that many of those 16 states are voting for compulsory EID, as it helps their sheep industries by putting extra constraints on ours.

Jamie Stone (Caithness, Sutherland and Easter Ross) (LD): Will the member give way?

Jamie McGrigor: I cannot.

The extra costs that farmers and crofters will face are significant. As we have heard today, the set-up costs are estimated at £1,000 to £2,000 per farmer, with the cost of tagging one sheep put at £3. That is an extra £3,000 per year for a farmer who has 1,000 sheep, at a time when there is real financial pressure on sheep farmers and when everyone is rightly concerned about the serious decline in sheep numbers. My biggest concern is that EID will simply increase the rate of decline.

I point out to members that the microchip in the proposed tag does not contain the same number as the tag itself, and therefore information from the reader has to be transferred to a computer to ensure that the different numbers coincide with the actual number on the tag. If members find that confusing, they should consider how many items do not register on a supermarket reader when they are doing their shopping. What happens when a sheep does not register? Should we just call for the manager? What happens when the tag falls off? How can a lost tag be traced? We have no objection to EID as a voluntary scheme for those who like it, but most of those are small farmers, whereas many Scottish flocks consist of hundreds—if not thousands—of sheep. The scheme is simply not practical for Scotland.

A constituent of mine from Sutherland, Mrs Gow, who has been a sheep farmer for 45 years, wrote to me earlier this year to say that electronic tagging would bring "death to the industry". She warned that, if the measure goes ahead,

"I will certainly get rid of my sheep and most likely the shepherd as well"—

although I do not think that she means to kill the shepherd.

Many other farmers have the same intentions. Mrs Gow is right. This year, the NFUS carried out a detailed survey of sheep producers and found that 73 per cent would reduce their flock if EID and individual recording were introduced. One in three of those who said they would reduce their numbers said that they might get rid of their flock altogether. That is the stark and frightening reality of the situation.

Jamie Stone: Does Jamie McGrigor agree that, as well as leaving sheep farming, people might leave remote parts of the Highlands altogether?

School rolls would fall, and the small, marginal communities that he and I represent would decline. Electronic identification would be a fatal blow for fragile communities.

Jamie McGrigor: I agree. This is not just about sheep. It is about people.

We are looking for ways to keep Scotland's sheep on Scotland's hills for food and environmental reasons, and we have seen a light at the end of the tunnel for the sheep industry. Let us not blow it out now. Even at this late stage, ministers must put pressure on ministers at the Department for Environment, Food and Rural Affairs to raise the issue again in Europe as a matter of extreme urgency. The future of our sheep sector and the people and communities that depend on it is at stake. We look to the minister.

17:31

David Whitton (Strathkelvin and Bearsden) (Lab): I, too, congratulate Liam McArthur on securing this evening's debate, despite what he said about my expertise in sheep farming.

As we approach the European Parliament elections, which will take place next week, it is important to note the impact that European legislation can have on vital industries such as farming, including sheep farming, here in Scotland. It is also important to note that British MEPs, including those from Scotland, did not want the introduction of compulsory EID from January next year and worked closely with the National Farming Union to raise awareness of the matter and put pressure on the European Commission and national Governments in the Council to reverse the decision.

As we heard, the latest attempt was a letter to the commissioner, which was signed by British MEPs from all parties as well as MEPs from various member states. The letter pleaded with the Commission to reconsider the matter and introduce voluntary modulation. At last month's Council meeting, the commissioner made it clear that there could be room to explore ways in which to minimise the impact on the UK sheep industry through derogations. I hope the minister was listening to the questions that Mr McArthur posed at the end of his speech.

It has already been remarked upon that it seems strange for a member with a largely urban constituency such as mine in Strathkelvin and Bearsden to take part in this evening's debate. However, there is a substantial rural area within the boundaries of my constituency, and within that are a number of farming interests including sheep farms. Some months ago, I had a meeting with several members of the NFUS, and among other

matters we discussed the forthcoming introduction of an electronic ID system for sheep.

Among those present was local farmer Archie McGregor, who has 1,300 black-faced sheep, although he told me that at times the number can be as high as 4,000. He explained in graphic agricultural detail the difficulties that he envisages in wrestling with such a large number of unco-operative ruminants while trying to affix electronic tags to them. Mr Hume also mentioned that. That aside, Mr McGregor's main concern was naturally the cost. The cost of electronic tagging his flock would be about £6,000 in the first year and as much as £4,000 in each subsequent year. As we heard, considerable investment in new technology will be required to make the system work. Electronic identifiers and hand-held and static readers will be required to enable the new system to function.

As members know, my Westminster colleague Hilary Benn, the Secretary of State for Environment, Food and Rural Affairs, was the first to raise concerns about the introduction of the policy with the European Council. The UK Government has managed to have the introduction of the scheme to the country postponed at least until the beginning of next year. Labour continues to hold the view that the cost of implementing an EID scheme in the sheep flock in the UK and Scotland, which represents a quarter of the entire European stock, is disproportionate to the benefits.

Another problem area is rare breeds. Two weeks ago, I had the good fortune to attend the 150th annual Kirkintilloch show to present the prizes. I was pleased to give the best of breed trophy to Mr Alistair Wilson and his Shetland sheep Summerside Jemima. Mr Wilson, who keeps 60 of those sheep on his small holding near Shotts, is not sure what the future holds, as he cannot afford to introduce electronic tagging for such a small number. Indeed, Dr Allan made the same point in relation to the crofting communities. I hope that there is still time to address that anomaly.

As a result, I support Mr McArthur's motion, in particular the reference to a possible

"derogation from a ... compulsory scheme"

if

"a workable and cost-effective solution"

cannot be found for Scotland's hill sheep farmers and others, such as Mr Wilson, who are doing their best to keep rare breeds thriving.

17:35

John Lamont (Roxburgh and Berwickshire)
(Con): I, too, congratulate Liam McArthur on

securing this important debate. Last week, Mr McArthur and I had the opportunity to meet many of the sheep that will be affected by the proposals as we crossed the southern upland way during the Poppyscotland hearts and heroes challenge. I was certainly reminded of the importance of sheep to the Borders' rural economy.

The compulsory electronic identification of sheep has been raised with me a number of times by representatives of my local NFU and individual farmers in my Borders constituency. As members have pointed out, the proposals will be costly and impractical for the farmers who will be forced to comply with them.

We should recognise that there is cross-party support in the UK for the view that the EU proposals should be voluntary at most and certainly not compulsory. With nearly 33 million sheep—and 90,000 producers—the UK accounts for one third of the entire EU sheep flock; Scotland has more than 7 million sheep and the nation's sheep farming sector is worth an estimated £150 million to the economy. As a result, the industry plays a vital role in maintaining the landscape and economy of Scotland's hills and uplands.

We should acknowledge the pressures that the industry has faced in recent years. In the past 12 months alone, sheep numbers in Scotland have dropped by 368,000 and, in the past nine years, there has been a 24.5 per cent decline in the number of breeding ewes. With that backdrop, it is clear to me that the regulations make no sense and might actually decimate the sheep industry, devastating the environment and the rural economy.

The additional costs that are involved in the scheme, coupled with the recording requirements, will force many producers out of business while having absolutely no cost benefit. Indeed, much of the cost will fall on the farmers, with the benefits being delivered further down the chain to the markets and processors. Farmers throughout Britain will be expected to cover 92 per cent of the estimated £65 million costs, while markets and collection centres will contribute 5 per cent and slaughterhouses 3 per cent.

The NFU has expressed concern about the standard of the current equipment, which a number of members have mentioned; the available training; and the scheme's workability on farms, where a particular challenge will be to maintain individual identities within large flocks. Some of those concerns will be resolved as the technology develops and as volume production reduces costs, but some concerns about the regulations are so fundamental that it is hard to see how they can be overcome.

I will not repeat what other members have said, but I would be grateful if the minister would respond to the following points. First, like Liam McArthur and other members, I am interested in finding out what discussions the Scottish Government has had with the UK Government and other member states as they attempt to persuade their politicians of the dangers of the regulations. Secondly—perhaps more important—I understand from correspondence with the Scottish Government that the intention is to introduce the regulations in a negative instrument. Does the Government intend to impose the regulations? If not, can the minister explain the Government's strategy in that respect?

Again, I thank Liam McArthur for securing this important debate, which has provided a useful opportunity for us to air the concerns of sheep farmers throughout Scotland.

17:39

The Minister for Environment (Roseanna Cunningham): I congratulate Liam McArthur on securing a debate on what we all recognise is an issue of enormous importance to hard-pressed sheep farmers. Indeed, we should acknowledge at the outset the importance of all sheep producers to Scotland, for example in the retention of population in many rural areas; in rural development, which in many ways hinges on their work; in food production; and in the environmental benefits of that kind of farming.

The Government is committed to supporting the sheep sector through measures including the less favoured areas support scheme. We are also committed to the control and eradication of animal diseases in Scotland. That is shown by our approach to bluetongue, in partnership with industry, and the subsidy of vaccines to the tune of £3 million.

Before I proceed, I ought to put on the record that we recognise the importance of traceability. I think that we all acknowledge that effective traceability matters as a key component of disease prevention and control. However, our approach must be practical or it will not work. During the foot-and-mouth outbreak in 2001, the gaps in our traceability systems led directly to the spread of the disease. If we had had a better system for tracing livestock movements, many farms would have been spared, and it is possible that the outbreak could have been nipped in the bud. The benefits of an improved system were demonstrated in the more limited foot-and-mouth outbreak in 2007, when we were able to lift restrictions earlier.

We cannot be complacent, because we will face critical exotic disease situations in the future. Foot-

and-mouth disease remains a threat. As bluetongue demonstrated, it is never the things that we expect that catch us out. Climate change potentially brings new dangers, and if we do not know where animals move to and from, we cannot effectively stem the flow of diseases. If anyone is still unsure about the importance of traceability, they should talk to any Dumfriesshire farmer who went through the trauma of the foot-and-mouth outbreak in 2001.

Traceability is important, but the proposals that we are discussing are something else entirely. With the current EU regulations on EID, we are faced with a system, which previous Administrations agreed to, in which the marginal benefits to traceability are vastly outweighed by costs and bureaucracy. We have therefore fully supported our industry in negotiations to secure a far more workable solution that reflects the unique nature of the Scottish sheep industry. I still wonder whether that is understood across Europe. Although constant efforts are being made to bring the reality home in Europe, one wonders whether people there really see what is happening. It is important for us to have empathy with the sheep production sector and to express that empathy, because the sector faces enough challenges on Scotland's hills without what has been proposed. Peter Peacock recognises that. The danger is that the proposals may be seen, in many cases, as the straw that breaks the camel's back.

The approach that we have taken has secured a number of concessions so far. The Administration has secured a further two-year delay in implementation, from 2008 to 2010, with a phased introduction between 2010 and 2012, and we have secured a derogation for animals that are intended only for slaughter.

Liam McArthur called for more engagement by Scottish ministers. I am sure he knows that, just last month, Richard Lochhead met Commissioner Vassiliou, who agreed to explore further concessions within the regulations. He also knows perfectly well that the cabinet secretary is doing his utmost to turn round the EU juggernaut on the matter. That is not easy; indeed, a number of issues that have been raised today show that it is not simple.

Liam McArthur: I acknowledge the complexities that are involved and the engagement that has taken place, but Commission officials are saying to the industry that the flexibility for a voluntary on-farm scheme will require a political steer from the commissioner. Therefore, it is imperative that, over the coming weeks, a meeting is scheduled and takes place, evidence is brought to bear, and a decision is taken.

Roseanna Cunningham: Liam McArthur should allow me to continue a little. We have secured a

commitment from the commissioner to explore an option to reduce the recording burden on farmers through the use of critical control points such as markets and abattoirs. Such things are on-going. However, any proposal would need to go to a standing committee on food and animal health.

Jim Hume raised the issue of tagging animals at the point of moving off farm. We are still exploring that issue as a potential way of moving forward. However, there is no doubt that we have inherited an extremely challenging situation. We continue to battle with the Commission to secure the best outcome for Scotland, and we continue to put pressure on Hilary Benn and the Commission to have the regulations changed. Richard Lochhead intends to raise the issue with Hilary Benn when they meet again next week. Scotland and the UK are working together to deliver as much flexibility as possible. However, as Peter Peacock pointed out, the problem is that if the support of other member states cannot be secured, we will, under our obligations, be required to implement the regulations. In those circumstances, it is helpful that the NFU is trying to engage its counterparts in other countries to lobby their Governments. That will provide additional support for the work that Hilary Benn and Richard Lochhead are trying to do.

Whether we like it or not, membership of the EU means that we need to implement EU decisions. Absent an independent voice in Europe, we will continue to stand up to Brussels as best we can, but we need to be aware that, when all the shouting is done and everyone goes home, we will be left to deal with the future. With that in mind, we have committed £3 million to a pilot scheme to find out what sheep EID would mean in practice and what alterations would be required to make it work, if it will work at all. The results of phase 1 of the pilot will be due next month and will, I hope, be available to members. The Scottish industry, from producers to markets and abattoirs, has actively engaged in the pilot. Feedback from the industry and the pilot is highlighting and solving some of the practical and technical implementation issues that will need to be dealt with if we end up being forced down that road.

We remain ready to act on any and all opportunities to engage with the Commission—at official level, as well as politician level—to secure further changes to the regulations. Members may rest assured that we will do absolutely everything in our power to work in partnership with the industry to fight the battle on all fronts.

Meeting closed at 17:46.

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