



The Scottish Parliament
Pàrlamaid na h-Alba

Official Report

MEETING OF THE PARLIAMENT

Thursday 7 March 2013

Session 4

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Scottish Parliament

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[The Presiding Officer *opened the meeting at 11:40*]

General Question Time

Housing Benefit Changes (Homeless People)

1. Margaret McDougall (West Scotland) (Lab): To ask the Scottish Government what the impact of the housing benefit changes in April 2013 will be on the number of homeless people in Scotland. (S4O-01882)

The Minister for Housing and Welfare (Margaret Burgess): We cannot be certain what the United Kingdom Government cuts to welfare will mean in terms of homelessness. The extent to which people are likely to become homeless will depend on tenant and landlord behaviours. That is why we are doing all that we can to help landlords and tenants respond in a way that minimises impacts on homelessness. We have been working closely with the Convention of Scottish Local Authorities and others since the UK Government first announced its reforms in August 2010 to protect tenants and help landlords prepare. However, should it come to it, we have one of the best homelessness safety nets in Europe, of which we are justly proud. All households that are deemed to be unintentionally homeless are entitled to settled accommodation.

Margaret McDougall: Has the Scottish Government considered utilising its powers to amend section 16 of the Housing (Scotland) Act 2001 to allow rent arrears accrued as a result of the bedroom tax to be treated as ordinary debt in law instead of as contributing to rent arrears? That would help prevent increased numbers of eviction proceedings and prevent people from being evicted because of bedroom tax arrears. That option has been proposed by Govan Law Centre and is supported by Shelter Scotland, Money Advice Scotland and Oxfam. If the Scottish Government is not supportive of that option or is unwilling to introduce the amendment, what are its plans using its current powers to limit the damage that will be done to 100,000 Scots who will be directly—

The Presiding Officer (Tricia Marwick): I think that we have got the question, Ms McDougall.

Margaret McDougall: —worse off and 40,000 who are likely to face rent arrears?

Margaret Burgess: The Scottish Government does not want to see people running up debt from rent arrears, but the member's question is based

on the presumption that there will be mass evictions because of rent arrears, which is simply not the case. I speak to landlords throughout Scotland and I know that they look at evictions and rent arrears on an individual basis, which is how it should be. It is about the individual and their circumstances, and whether it is appropriate to take the ultimate action of eviction, which will not happen often.

We cannot look at rent arrears arising from the bedroom tax separately from rent arrears arising from any other part of welfare reform. We have to look at the issue of rent arrears in total and consider what is happening to individuals and their full circumstances. We do not want to see people building up ordinary debt and then being pursued for it and having their bank accounts arrested or, ultimately, being bankrupted. That is why we have put £5.4 million into advice services to assist people who are struggling in the current circumstances.

We also continue to lobby the Westminster Government, because we should not forget that the welfare reforms are UK legislation that we have constantly asked the UK Government to scrap. We have highlighted to it the points that have been raised about that legislation. I was in London yesterday, as was the Deputy First Minister, and we made some very strong points on behalf of the people of Scotland to the UK Government, which is well aware of the feeling here on the issue.

I do not want people suggesting that there will be mass evictions because of rent arrears—that is simply not the case. Everybody who is struggling to pay their rent will be looked at sympathetically. Through the pre-action requirements that we set last year, we will ensure that people will get every support if they are struggling to pay their rent.

The Presiding Officer: This is an important subject, so I am prepared to take supplementaries, but I would be very grateful for brief questions from members and brief answers from the minister.

Kenneth Gibson (Cunninghame North) (SNP): On 17 September last year, Ms McDougall issued a press release calling on the Scottish Government to show some sense of urgency by putting in place new housing stock so that people would not be hit by the bedroom tax. Does the minister agree that it is ludicrous to suggest that 100,000 or so homes could magically be put in place in a few short months and that Labour is simply using the bedroom tax to attack this Government, rather than finding realistic solutions or criticising the UK Government that introduced this unwanted measure?

Margaret Burgess: I absolutely agree. The suggestion was ludicrous. Nobody could put houses up in the timescale that was suggested by Margaret McDougall.

However, there is a serious point to be made. The Labour Party is accepting the UK legislation and allowing it to impact on the policies that we decide are right for Scotland. For example, we have a policy of two-bedroom houses—a house for all. Yesterday, I asked Lord Freud to treat that as the minimum requirement in Scotland. Housing is a devolved responsibility and the UK legislation is impacting on it negatively.

Alex Johnstone (North East Scotland) (Con): What capacity exists in the Scottish Government's policy to ensure that we work in conjunction with benefit changes to ensure that Scotland's underutilised housing capacity is matched with the demand for social housing?

Margaret Burgess: That is nonsense. The changes to housing benefit mean that we are suffering because of a problem in London and the south of England. That is highlighted by the fact that the Department for Work and Pensions and the Westminster Government say that a minimum of 80,000 people will be affected in Scotland, when we know that the figure is more than that—it is 105,000. In London, 80,000 people will be affected, and it is getting £56 million in discretionary housing payments. Scotland, however, is getting £10 million. It is not a problem in Scotland; it is a problem in the south of England, but we are suffering because of it.

Fairtrade Nation

2. Clare Adamson (Central Scotland) (SNP): To ask the Scottish Government what difference being named a Fairtrade nation will make to the people of Scotland. (S4O-01883)

The Minister for External Affairs and International Development (Humza Yousaf): At the start of Fairtrade fortnight 2013, I had the great pleasure of announcing that Scotland had been declared one of the world's first Fairtrade nations. That achievement was possible because of the hard work and commitment of grass-roots activists across the country.

Achieving Fairtrade nation status for Scotland is a significant step and highlights Scotland's collective commitment to fair trade. It is also welcome recognition of the hard work that the people of Scotland have done in coming together to meet the tough criteria. I congratulate the people, businesses, MSPs, community organisations and others who have helped to achieve that accolade. This year's theme for Fairtrade fortnight was to go another step in

support of fair trade. Scotland's achievement of this milestone is just such a step.

All of that demonstrates our continuing commitment to ensuring that we pay producers in the developing world a fair price for their goods.

Clare Adamson: I recently visited St Elizabeth's school in Hamilton on a committee visit with the European and External Relations Committee and found it to be a vibrant and innovative school. It was no surprise to find that, on 26 May, all the pupils were invited to bring in Fairtrade wrappers to stick on to the school astronaut. Far from taking an additional step, they intended to launch into infinity and beyond. Does the cabinet secretary agree that that is one of the many exciting and diverse examples of Fairtrade celebration in 2013?

Humza Yousaf: I do. At the risk of a bad pun, I think that it is out of this world. [*Interruption.*] I said that it might be a bad pun.

Schools have been pivotal in pushing forward fair trade and helping us to achieve Fairtrade nation status. One of the criteria that we have to meet is for 60 per cent of higher education institutions to have a group that is working towards Fairtrade status. We have exceeded that, with 74 per cent doing that.

I am delighted to hear about what is happening at St Elizabeth's. I think that our children and young people will help us to push forward to the next stage in what we can do to become a shining example for other countries.

The Presiding Officer: Question 3, in the name of Margaret McCulloch, has been withdrawn. The member has provided an explanation.

Justice of the Peace Courts (Motherwell, Cumbernauld and Coatbridge)

4. Margaret Mitchell (Central Scotland) (Con): To ask the Scottish Government what impact closing Motherwell, Cumbernauld and Coatbridge justice of the peace courts could have on access to justice. (S4O-01885)

The Cabinet Secretary for Justice (Kenny MacAskill): The Scottish Court Service's consultation paper sets out the principles on which access to justice shapes the proposals that are contained in the document. That is provided in appendix A and was set out by the judiciary. The Scottish Court Service is considering its consultation and will take account of those principles in shaping its final recommendations, including any proposals relating to Motherwell, Cumbernauld and Coatbridge justice of the peace courts. Ministers will do likewise in considering the proposals.

Margaret Mitchell: Is the cabinet secretary aware of the concerns that have been expressed

regarding the Scottish Government's recent proposal to increase the civil cases threshold to £150,000, which, combined with the proposed closures of Cumbernauld, Coatbridge and Motherwell JP courts, would impact adversely on already overstretched courts in Lanarkshire, as they inevitably become even busier and struggle to cope with cases? Has any assessment been made of the pressure on the sheriff courts estate and quick and efficient access to justice in those courts following the Criminal Procedure (Amendment) (Scotland) Act 2004, which implemented the Bonomy proposals and moved cases that were previously heard in the High Court to sheriff courts?

Kenny MacAskill: Yes. Clearly, the workload of the sheriff courts, if matters are to be transferred from any JP courts, is taken into account by the Scottish Court Service. We require to await its proposals and, when we have them, I will doubtless be able and willing to discuss matters directly with Margaret Mitchell. On her point about the proposals to be encapsulated in the Government's proposed courts reform bill, they are also matters that could theoretically put pressure on sheriff courts but, again, they are taken into account.

I assure the member that the points that she raises regarding pressures on courts are legitimate and it is appropriate that she raises them, but I also assure her that they are taken into account by both the Scottish Court Service and the Scottish Government with regard to the status of JP and sheriff courts, and indeed aspects related to the privative limit.

Elaine Smith (Coatbridge and Chryston) (Lab): If the closure of Coatbridge JP court goes ahead in an area of low car ownership, reducing bus services and unemployment, does the cabinet secretary have any comment on how my constituents will be able to meet the extra costs that will be incurred in gaining access to justice?

Kenny MacAskill: Again, these matters are taken into account by the Scottish Court Service. As part of its consultation review, it has been considering how access to alternative courts can be enabled, be it by bus, rail or other transport, and what the costs would be. Again, I can only say that the Court Service is looking at the matter. It is a factor that will be taken into account, and I have no doubt that both the Court Service and I will be happy to engage with the member.

Miners' Strike (Arrests)

5. Neil Findlay (Lothian) (Lab): To ask the Scottish Government whether it will carry out a review of arrests made during the 1984-85 miners' strike. (S4O-01886)

The Cabinet Secretary for Justice (Kenny MacAskill): The miners' strike, which took place nearly 30 years ago, was a traumatic experience for the communities that were involved. Members will appreciate that it would not be appropriate for me or other Scottish ministers to offer a view on any individual case or set of criminal cases arising from the strike.

For issues around arrest, an established system is in place to consider and investigate complaints against the police in Scotland. Any concerns about police conduct should be directed in the first instance to the chief constable of the relevant force. The independent Police Complaints Commissioner for Scotland can also consider any case in which someone is dissatisfied with the response that they receive from the police about their complaint.

Where someone has been convicted of a crime, the independent Scottish Criminal Cases Review Commission, which was established in 1999, provides a critical part of the checks and balances in our justice system. Where the commission considers it appropriate, it can refer an individual case back to court for a further appeal if it considers that a miscarriage of justice might have occurred and it is in the interests of justice for the case to be referred back. That can include historic cases where evidence is available.

Neil Findlay: Having been involved at the time, the cabinet secretary will be well aware of the fact that many of the convictions were very questionable. I know that the cabinet secretary is tired of marching, but will he take a few more steps and rejoin the campaign for justice by initiating a review of these cases to help to put right these historic wrongs?

Kenny MacAskill: The member is right to say that I had personal involvement, as I supported and represented both individuals and miners collectively. However, it would be inappropriate for me to comment on cases in which I appeared or represented people, or indeed to comment on any cases, as would be the situation for any other minister.

The member is right to say that matters have been raised in jurisdictions other than Scotland that give considerable cause for concern, but the reason why a system was introduced in 1999 by the then Labour Government with regard to criminal case convictions was to avoid politicisation by ministers of whatever colour of those who are involved in policing and those who are in charge of the courts.

I refer the member to the opportunity to approach the Police Complaints Commissioner for Scotland and the Scottish Criminal Cases Review Commission, which was set up by a Labour

Government in 1999. That is the appropriate approach to avoid ministerial involvement in matters that have to be fundamentally separated from the Executive.

Structural Funds

6. David Stewart (Highlands and Islands) (Lab): To ask the Scottish Government how many recent meetings it has had with the United Kingdom Government on the future structural funds programme. (S4O-01887)

The Deputy First Minister and Cabinet Secretary for Infrastructure, Investment and Cities (Nicola Sturgeon): In the past three months, Scottish Government ministers and officials have had five meetings face to face or by teleconference with the UK Government regarding structural funds. I have personally spoken to Michael Fallon, who is the responsible UK minister, regarding the funding allocations and the need to ensure a fair settlement of structural funds across the UK. That issue was also raised at the recent joint ministerial committee on Europe and has been discussed regularly by officials. Since the autumn, a programme board of senior officials from the UK Government and the devolved Administrations has been meeting to prepare for the next round of structural funds.

David Stewart: Does the cabinet secretary share my view that the new category of structural funds transition status for the Highlands and Islands is good news for both the region and the rest of Scotland, as it opens up new opportunities to invest in training, skills and infrastructure?

Nicola Sturgeon: Yes, I think that transition status is good news, and David Stewart is right to point that out. He and other members will be aware of the Government's concerns about the possible allocation of structural funds across the UK. For some time, we have been anticipating a reduction in structural funds, not least because of the overall reduction in the European Union budget, but we want to see a fair allocation for Scotland and we are working very hard to achieve that. I will keep Parliament fully updated on the matter.

Liam McArthur (Orkney Islands) (LD): The cabinet secretary will recall that, when the issue was last raised in Parliament last month, I raised the concern that the allocation methodology could leave Orkney and Shetland excluded significantly, if not entirely, from structural funds. Can she update me on what correspondence or discussions she has had with Orkney Islands Council and Shetland Islands Council and the extent to which those concerns have been relayed to the UK Government?

Nicola Sturgeon: As I said to Liam McArthur when he last raised the concern, which he is absolutely right to raise, that is one of the issues that are very much in our minds as we get towards final decisions on the allocation of structural funds. I am happy to write to him in more detail about the extent of those discussions, and I will be happy to meet him and council representatives to discuss the matter further. It is important that we ensure not only that the Highlands and Islands benefit from structural funds, as David Stewart said, but that the allocation of funds within the Highlands and Islands recognises the particular challenges of many areas.

Commission on Women Offenders

7. Anne McTaggart (Glasgow) (Lab): To ask the Scottish Government what action it has taken to address the issues identified by the report of the commission on women offenders. (S4O-01888)

The Cabinet Secretary for Justice (Kenny MacAskill): The commission made 37 far-reaching recommendations, and we have made significant progress across a number of areas. HMP Cornton Vale will be replaced by new national facilities at HMP Edinburgh and HMP Inverclyde. Until those are ready, conditions at Cornton Vale will continue to be improved. A consultation is under way to consider the most effective structures for community justice services. We have created a £10 million reducing reoffending change fund to provide mentors for offenders, to help them to turn their lives around and live a life free from crime.

Anne McTaggart: The report cited the failure of the Scottish Government's mental health strategy to place sufficient emphasis on women in prison. Given that more than 80 per cent of female prisoners in Cornton Vale have a recognised serious mental health problem, does the cabinet secretary recognise the importance of that issue?

Kenny MacAskill: Absolutely. It is on that basis that I have had meetings with representatives of the health department. To be fair, many of those with significant mental health problems have problems that are difficult and awkward to diagnose—they tend to be borderline personality disorder or other such matters—and, equally, can be difficult to provide treatment for. That said, they have mental health issues that require to be addressed. That is why we are working with mental health agencies and colleagues in the health department. That is also why, under this Administration, the Scottish Prison Service has ensured that the national health service has taken over the provision of health treatment within prisons so that we can get a continuous link for those who need to be dealt with in prison and thereafter need to be reintegrated into our

communities. The member raises an important and valid point that the Scottish Prison Service and I—and, indeed, the Cabinet Secretary for Health and Wellbeing—are clearly aware of.

Alison McInnes (North East Scotland) (LD): Will the cabinet secretary explain what progress has been made towards maximising the availability of supported accommodation for vulnerable women leaving prison? In particular, can he detail what discussions he has had with the Convention of Scottish Local Authorities on that recommendation?

Kenny MacAskill: I had a meeting with COSLA yesterday, although that meeting was, to be fair, only tangential to the Angiolini report as it related more to the structure of criminal justice authorities. What I can say is that the Angiolini commission viewed the 218 centre as a template. We are conscious that it would be difficult to replicate that everywhere, but we recognise the significant benefits of ensuring that we have centres where health, criminal justice and education—and all other agencies that are required to play their part—can work together. I can happily give the member a further briefing, but matters are under way to ensure that we replicate the outstanding practice from the outstanding 218 centre.

First Minister's Question Time

12:00

Engagements

1. Johann Lamont (Glasgow Pollok) (Lab): To ask the First Minister what engagements he has planned for the rest of the day. (S4F-01223)

The First Minister (Alex Salmond): Later today, I will have meetings to take forward the Government's programme for Scotland.

Johann Lamont: John Swinney told the Cabinet in private that the volatility of the price of oil

"creates considerable uncertainty in projecting forwards Scotland's fiscal position."

When was he going to share that with the Scottish public?

Alex Salmond: What John Swinney pointed out to the Cabinet is that the opportunities from Scotland having control of its own natural resources will allow us to transform the Scottish economy and society.

Johann Lamont: I am absolutely astonished by that response. It appears that the First Minister has not even read the document that his Cabinet Secretary for Finance, Employment and Sustainable Growth wrote. Perhaps he was not paying attention because it did not say what he wanted it to say.

When I called for a debate on facing up to long-term spending and services—[*Interruption.*]

The Presiding Officer (Tricia Marwick): Order. Let us hear Johann Lamont, please.

Johann Lamont: The Scottish National Party is not on the best of grounds on this issue.

When I called for a debate on facing up to long-term spending and services, the First Minister derided me. We now find that, while I was talking about how we saved services—[*Interruption.*]

The Presiding Officer: Order.

Johann Lamont: The noise that is made by the SNP is in inverse proportion to its confidence in its finance secretary. [*Interruption.*]

The Presiding Officer: Order.

Johann Lamont: We now find—the SNP has read the document—that while I was talking about how we saved services, John Swinney was talking to the Cabinet about cutting them. In private, he told his Cabinet colleagues of pressure on budgets. In private, he said that that meant the need for "policy choices". In private, he said:

"We must drive these programmes forward now."

When were the other cabinet secretaries going to say in public what John Swinney had told them in private about cuts to their services?

The First Minister: Our policy choices were laid out in the budget that was passed by Parliament.

I love the new description of Johann Lamont's cuts commission as being about saving public services. Here we were, believing that is was about abolishing free education, abolishing free personal care and abolishing old age pensioners' access to transport. That is what the Labour Party has in mind for Scotland.

Let us talk about the detail of the document—*[Interruption.]*

The Presiding Officer: Order. We will hear the First Minister.

The First Minister: Let us look at the misrepresentation on public spending. Paragraph 27 of John Swinney's document states:

"From 2017-18 onwards public spending is therefore expected to grow in line with the economy. This would imply real terms growth in Scottish public spending of between 1.5% and 2% a year."

That real-terms growth in public spending is being translated by the bitter together campaign, Labour and its Tory allies into cuts in public spending. The cuts in public spending are happening now by virtue of the Tories and their Liberal allies. The cuts to come from the Labour Party are part of Johann Lamont's cuts commission, which she now pretends is to protect the Scottish people.

Johann Lamont: I asked the First Minister a serious question, and he says, "Look! There's a squirrel!" The fact is that his lack of self-awareness and his selective quoting of his own document tells us that there is something very serious at the heart of Government—it will say one thing in private and deny in public the truth that we all know.

I asked for honesty. Let us see whether we can manage some honesty about the troops who risk their lives for our security. The United Kingdom Government's decision to renege on its promise to the Scottish troops who are serving abroad that they would come home to Edinburgh was a blow. We can both agree on that. The Deputy First Minister described it as an act of "betrayal". We can agree on that, too. However, how do we describe the revelations in the leaked paper that, rather than increase the size of our armed forces, the SNP has

"made clear to the Defence Workstream that a much lower budget must be assumed"?

Should we now assume that it will be "a much lower budget" and that the Deputy First Minister was being dishonest with the troops?

The First Minister: I quoted directly from the document to indicate the misrepresentation by the bitter together campaign. I pointed out that a document projecting real-terms growth in public spending was described by Johann Lamont and her Tory allies as cuts in public spending. That is clearly not true.

Let us turn to defence. The issue indicates exactly why Scotland should have the fiscal freedom that independence will bring. I will mention two things. First, currently more than £3 billion—£3.3 billion or £3.2 billion—is allocated to Scotland as our contribution to the UK defence forces, but only £2 billion is actually spent in Scotland. Secondly, instead of the 6,000 additional troops that Scotland was promised two years ago, we are being offered 600—or even fewer, according to the calculation.

Scotland gets only a fraction of what we pay for in defence—except, of course, when it comes to weapons of mass destruction. When it comes to those, we are not underrepresented; we are overrepresented. In fact, we get all the UK's weapons of mass destruction. That is why I find it extraordinary that a Labour Party defence spokesman could not tell us on the radio how many troops the Labour Party would want to station in Scotland but could tell us how many nuclear missiles it wants to station in Scotland.

Johann Lamont: It is astonishing what a difference a day makes. Yesterday, the document was the first draft of a discussion document that was overtaken by events. Now it turns out that it confirms the First Minister's land of milk and honey under independence. It cannot possibly be both.

In private, John Swinney says that, after separation, interest on our debt will be

"a significant feature of Scotland's budget".

In private—*[Interruption.]* They have read it; you might not have heard this. In fact, I know you will not have heard it. *[Interruption.]*

The Presiding Officer: Order.

Johann Lamont: In private, John Swinney admits that, after separation, what we spend will have to be in line with policy that will be set by a foreign bank—that of the rest of the United Kingdom. In private, he asks for a study into something as basic as the affordability of the state pension in a separate Scotland. In public, he says that anyone who raises the same questions is "talking Scotland down".

We have heard a lot of numbers from the First Minister today, but the real deficit that should

worry Scots is the one between what he says in private and what he says in public. Is not it the case that what the SNP claims in public is “scaremongering”, it agrees in private is the truth?

The First Minister: The Scottish budget projections were set out in October last year at £2.5 billion in a public statement.

The “Fiscal Commission Working Group - First Report - Macroeconomic Framework” was—all 222 pages of it—published a few weeks ago. I have brought along a copy of it because I can somehow tell that Johann Lamont has not got round to reading it. It does not say that being part of a sterling area would restrict Scotland's ability to use its fiscal policy; it says exactly the opposite. It says that control over fiscal policy will allow policies to grow and transform the Scottish economy. *[Interruption.]*

The Presiding Officer: Order.

The First Minister: The fiscal commission also mentions the demographic pressures that the UK faces in terms of future social provision, but the detailed statistics show us that, right now, Scottish spending on social provision as a share of our public spending is at 38 per cent and that the figure for the UK is 42.3 per cent. In other words, we have more ability to protect the people of Scotland in social provision.

Only the unionist parties of Scotland could somehow portray our having Europe's largest supply of oil reserves, which have a retail value of £1,500 billion over the next 40 years, as being a disadvantage for the people of Scotland. Every other society across Europe would be crying out for that sort of natural resource. Is it not time for us to match the great natural and people resources of Scotland and build a society of which every one of us can be proud?

Secretary of State for Scotland (Meetings)

2. Ruth Davidson (Glasgow) (Con): To ask the First Minister when he will next meet the Secretary of State for Scotland. (S4F-01220)

The First Minister (Alex Salmond): No plans in the near future.

Ruth Davidson: Let us stick with the First Minister's seeming inability to be straight with the people of Scotland on what he knows in private to be true. The First Minister says that an independent Scotland will deliver universal benefits, that it will have well-funded public services and pensions, and that all of that will be paid for by oil—the resource that he has just extolled. *[Interruption.]*

The Presiding Officer: Order. Let us hear the member.

Ruth Davidson: However, Mr Swinney's timely document states that oil receipts

“will fall in cash terms by 50% between 2011-12 and 2016-17”.

It says that in paragraph 15. It also says that those forecasts

“have not been seriously challenged by the industry or by independent commentators”.

In other words, they are right—the oil money will halve.

John Swinney's document says that in an independent Scotland the deficit will double by 2015-16. It says that there will be a

“downward revision in current spending”.

Therefore, the document that the First Minister is extolling shows that a newly independent Scotland would have half the oil money and double the deficit, and that it would be ordinary Scots who would pay for it all. Why has none of that ever been said in public before?

The First Minister: Last week at First Minister's question time—I think that Ruth Davidson was here—I pointed out to the chamber the implications of the record surge in investment in North Sea oil and gas. I pointed out the industry projections on what that would mean for oil and gas revenues in a few years' time. I will read them out again, because they show what has happened over the past year.

I know that Ruth Davidson must be aware that we now have a record level of investment in the North Sea. I will quote exactly from the press release from Oil & Gas UK that I referred to last week. It said that, as a result of higher investment,

“thousands of jobs are now being created across Britain and the production of UK oil and gas and resulting tax revenues can now confidently be expected to rise over the coming years.”

Because of that record investment, Oil & Gas UK now expects production to reach 2 million barrels a day.

I know that Ruth Davidson will accept this point: greater investment leads to increased production, which means an increase in oil revenues. The fact that there has been a surge in investment in the North Sea over the past year and that Oil & Gas UK estimates that £100 billion is projected to be invested there means rising revenues, not falling revenues. Given that I said that last week, I can hardly be hiding that fact from the Scottish people—indeed, I proclaim that fact to the Scottish people.

Ruth Davidson: So the defence is that the report is out of date and that there have been revisions to it.

Let us look at the revisions, because the Office for Budget Responsibility has given a revised estimate of how much money we will get from oil. It gave us a revision in December, after many of the findings that the First Minister has told us about. We are talking about the OBR that has not been challenged by industry, experts or commentators. In its December 2012 “Economic and fiscal outlook”, the OBR said that the tax revenues figure for 2015-16 was not the figure of £4.8 billion that is in John Swinney’s document, but £4.6 billion, which is hundreds of millions of pounds less. The figure is worse than John Swinney’s figure.

If, as the First Minister states, he has been updating Parliament regularly on how many barrels of oil are in the North Sea, why did he not tell Fergus Ewing, who answered a question on the issue yesterday by using the same figures that the Government has been using for many, many months? That does not stack up.

The First Minister says that the oil tax revenues are enough and are growing. If the OBR’s update in December is wrong and John Swinney’s secret document is out of date and is not the latest one, what is? In the interests of transparency, will the First Minister give us the updated document from John Swinney on the fiscal position for a future Scotland? When will the First Minister publish an update to tell the people of Scotland what he has tried to hide in private?

The First Minister: I will have to pause a few seconds to disentangle those questions.

I mentioned last week that we would publish an oil and gas update document in the near future, so I am delighted to tell Ruth Davidson that that will come out very, very shortly, as I said last week.

In answer to Ruth Davidson’s first question, I read out the industry analysis that was published last week. She has said twice that the industry has not challenged the OBR’s figures. Oil & Gas UK is the industry. It represents the companies that have invested £13 billion. Why have they invested £13 billion in North Sea oil and gas in the past year? Because they believe that that will lead to increased production and increased revenues for their companies and for the Exchequer. The question is: which Exchequer will get the increased revenues?

Under the formulation of Ruth Davidson and her colleagues, Scotland will get the cuts—the welfare cuts that are coming in and the public spending cuts—but London will get the increased revenues, just as it has for the past 40 years. For 40 years, Tory politicians have told us that North Sea oil and gas are running out. We now have the evidence that the next 40 years will have greater value than the past 40 years. We will ensure that, after

London has had its turn for the past 40 years, the next 40 years will be Scotland’s turn.

The Presiding Officer: Adam Ingram has a constituency question.

Adam Ingram (Carrick, Cumnock and Doon Valley) (SNP): Will the First Minister mobilise Scottish Government support to its fullest extent to maintain the coaling operations of the Scottish Resources Group, which were reported this morning to be in severe financial difficulties? He will be aware that many hundreds of jobs and the economic wellbeing of communities in Cumnock and Doon Valley depend on those activities.

The First Minister: I share the member’s concern about developments in respect of the Scottish Resources Group and about their potential impact on employees and their families in Cumnock and Doon Valley.

Fergus Ewing, the minister for energy, has worked closely with the company and others to do all that we can to help. We will continue to do everything that we can to assist the SRG to maintain operations as a priority. We will of course provide support to employees who face redundancy through the partnership action for continuing employment initiative. The member can be sure that the issue will be a key concern of the Government as we do our best for the affected employees.

Cabinet (Meetings)

3. Willie Rennie (Mid Scotland and Fife) (LD): To ask the First Minister what issues will be discussed at the next meeting of the Cabinet. (S4F-01226)

The First Minister (Alex Salmond): Issues of importance to the people of Scotland.

Willie Rennie: We have seen the papers and we know what the people on the front bench really think. In private, the First Minister is a pessimist. On oil, they are worried; on public service jobs, they are alarmed; and on pensions, they are panicking. Of those three challenges, which his finance secretary identified, which keeps the First Minister awake at night?

The First Minister: I will tell the member what does not keep me awake at night—[*Interruption.*]

The Presiding Officer: Order.

The First Minister: That is having to face Willie Rennie on a Thursday. I sleep soundly.

The only problem is that I woke up this morning to hear Willie Rennie on the radio. If he said that oil revenues were declining once, he must have said it half a dozen times. I have now read out information from the industry’s oil and gas survey

last week and its arguments for why oil and gas production is going back to 2 million barrels a day and why revenues will rise as a result of the investment that is pouring into the North Sea.

The next time that Willie Rennie is on the radio, perhaps he will not keep me awake in the morning by going through the familiar routine that we have heard from unionist politicians since 1980—that the resource is all running out, is not really worth anything and is far, far too much trouble. It is the most enormous resource in the continent of Europe, and every other country would give its eye teeth to command such oil revenues.

Willie Rennie: The finance secretary claps, but the First Minister contradicts the finance secretary's figures. Here he goes again: excuses are at an all-time high, panic is rising and flannel is at unprecedented levels, as we have just heard.

The SNP has boasted that Scotland's deficit is £7.6 billion. Who on earth celebrates—*[Interruption.]*

The Presiding Officer: Order. Let us hear the member, please.

Willie Rennie: Who on earth celebrates when they spend more than they get? *[Interruption.]*

The Presiding Officer: Order.

Willie Rennie: No Scottish family would celebrate that, and yet the SNP does. Now we know that the celebrations are fake. There is no fizz in the First Minister's juice any more. Is it not the case that only his Cabinet colleagues get to know the truth about the real price of independence? Why does he think that the real truth is only good enough for the privileged few?

The First Minister: I will see if I can put Willie Rennie's gas at a peep along with his fizz. Neither the truth nor the deficit is the strongest suit of the Liberal Democrats at present. I read out what the document says about public spending and the real-terms increase of between 1.5 and 2 per cent a year.

What keeps me awake at night are the implications of Liberal-Tory policy in Scotland and the decline in public spending. What keeps me awake at night are the bedroom tax and the impact on social security in Scotland. What keeps me awake at night is the £1 billion that will be withdrawn from the poorest sections of the community thanks to the policies of the Tory-Liberal Administration in London. What keeps me awake at night is the thought of Trident missiles for the next 50 years in Scotland when we should be spending that money on the social and economic welfare of Scotland.

What does not keep me awake at night is the band of five Liberal Democrats, because sooner or

later Willie Rennie will work out why there is a band of only five Liberal Democrats in this chamber—because they put the Tories into power at Westminster and they foist their policies on the Scottish people.

Human Rights Act 1998

4. Jim Eadie (Edinburgh Southern) (SNP): To ask the First Minister what consideration the Scottish Government has given to the introduction of legislation regarding the implementation of the relevant convention rights if the United Kingdom Government was to repeal the Human Rights Act 1998. (S4F-01229)

The First Minister (Alex Salmond): The Scottish Government strongly opposes the repeal of the Human Rights Act 1998. We expect to be consulted by the UK Government in the event of any proposed changes to human rights legislation. To date, no such proposal has been communicated to us. In the event of a repeal, it would be open to the Scottish Government to introduce legislation that protects the fundamental rights of people in Scotland—at least in the current context of our devolved responsibilities.

Jim Eadie: I thank the First Minister for that answer. Does he agree that a proposal that is designed to pander to a right-wing, Eurosceptic minority would see Scotland isolated in Europe and that, instead of repealing the Human Rights Act 1998, we need to extend the scope and reach of fundamental human rights here in Scotland?

The First Minister: I agree. The UK Government is out of step with civilised people across the continent. Its attitude towards human rights is parochial and regressive. The European convention on human rights fulfils a valuable role in Scottish society. An independent Scotland with a written constitution would allow us to assert the positive rights that people in a modern democracy expect to have and are entitled to have.

Roderick Campbell (North East Fife) (SNP): Does the First Minister agree that, were the UK Government to repeal the Human Rights Act 1998 and withdraw from the jurisdiction of the European Court of Human Rights, it would set a unique precedent in the developed world, separating the United Kingdom from the other 46 participants in the court and putting the UK on the same level as Belarus?

The First Minister: The trend of the dominant partners in the UK Government coalition is against the trend across civilised society. It has got to the stage where they are so opposed to joint European action that they question the validity of European arrest warrants. That is happening at Westminster—they question arrest warrants that get some of the most dangerous, vicious people

repatriated so that they can stand trial and face justice. The fact that the Tory party is putting politics before arresting murderers, rapists and other people who should be brought back to face justice shows the extent to which it has lost touch not just with civilised values but with reality.

Scottish Police Authority and Police Scotland

5. Graeme Pearson (South Scotland) (Lab):

To ask the First Minister whether the Scottish Government will clarify the current relationship between the Scottish Police Authority and police Scotland. (S4F-01234)

The First Minister (Alex Salmond): The respective roles of the SPA and the police service of Scotland, as set out in the Police and Fire Reform (Scotland) Act 2012, are based on the roles that have been in place and have worked well for more than 40 years in Scotland.

Graeme Pearson: I thank the First Minister for that brief answer. In four separate interviews, the chief constable has indicated that he will be unable to maintain the 1,000 additional police officers during the forthcoming spending period, because of budgetary pressures. In addition, last night, police staff who are in Unison shared with members of the Parliament their substantial experience of job losses and insecurity. Given the evident friction between the SPA convener, Government officials and the chief constable, which has been exposed in correspondence that was belatedly released to the Justice Committee this week, is the First Minister committed to ensuring that the chief constable is appropriately empowered on human resources and finance—subject to proper accountability—to deliver on the job concerns that have been expressed by police staff and the chief constable?

The First Minister: Yes, I believe that. To quote Chief Constable House directly, on Tuesday, he said:

“I believe that Police Scotland needs a balanced and integrated workforce of Police Officers and Police Staff. I would be keen to examine ways to improve that balance within our agreed budget. But I must repeat that we do not have a strategy or plan to backfill Police Staff Roles with Police Officers. I want as many Officers as possible to be on the street in an operational role”.

Yet again, police numbers in Scotland are at record levels, but we know that that would never have happened if the Labour Party had been in office, and we can take it from that that the 37-year low in recorded crime would not have happened, either.

I saw Graeme Pearson's comments in the newspapers on Sunday about what he calls historic or belated documents. These matters were settled in January and, in terms of the detail, February. Rather than rake over what he calls

belated documents, should he not put his weight and experience behind the SPA and the new police service of Scotland, which are working effectively to bring about a police service in Scotland of which all of us can be proud?

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP):

Notwithstanding that, at the meeting last night with Unison and civilian staff, many people were concerned. They do not know what the future holds for them next week or in the coming years. Does the First Minister share my concern that, given that the single combined police force will come into being on 1 April, those matters must be addressed urgently for the sake of those employees and their lives?

The First Minister: Yes, I agree, which is exactly why I quoted what the chief constable said on Tuesday about the balance that he sees in the forces in Scotland. It has been argued that the increase in police numbers in Scotland is somehow at the expense of civilian staff in Scotland—

Drew Smith (Glasgow) (Lab): It is.

The First Minister: I hear it being said again. I had a look at the figures from England and Wales. Not only—[*Interruption.*]

The Presiding Officer: Order. Let us hear the First Minister.

The First Minister: I seem to remember that the Labour Party has some responsibility in Wales at present, so I had a look at the figures. It is instructive to see what the Labour Party actually does when it is in office, rather than what it says it will do when it is in opposition. The figures are instructive, because not only are police numbers in England falling dramatically, but police support staff numbers are falling faster than they have in Scotland.

I believe that the single police service of Scotland will allow us to make the necessary efficiencies. That is why we are setting up a single police service and delivering the correct balance of police staff and police officers to bring about a police service of which we can all be proud.

Alison McInnes (North East Scotland) (LD):

The matters to which Graeme Pearson referred are not settled. The SPA will meet tomorrow, when it will return to the core question of where power lies, but the public are to be kept in the dark, because the item will be taken in private. Does the First Minister agree that it is clearly in the public interest that the people of Scotland should be able to follow exactly how decisions that will fundamentally shape the future of Scotland's policing are being reached?

The First Minister: I am sorry, but agreement on the general principles was reached at the SPA board meeting on 18 January, and detailed agreement was reached last month. The bodies are working hard to bring about the effective launch of the police service of Scotland. Huge progress has been made in preparing for that event. Given the fears that the Liberal Democrats expressed in advance of the January SPA meeting—they said that it would be an absolute disaster, but that did not come to pass and, strangely enough, they did not return to the subject the following week—would it not be reasonable to expect the Opposition parties in Scotland to get behind the SPA and the police service in their attempts to bring huge success from the new police service of Scotland?

Schools (Reform)

6. Murdo Fraser (Mid Scotland and Fife) (Con): To ask the First Minister what plans the Scottish Government has to reform the school education system. (S4F-01225)

The First Minister (Alex Salmond): Scottish schools are consistently excellent and, importantly, there is substantial evidence that they are getting better. We can see that from last year's record-high exam passes and the positive school leavers destinations data, from which we should all take great satisfaction.

We have the right elements in place to secure that excellent, world-class system. We are making good progress with the current reform programme to deliver that aim. I compliment the inspiring and dedicated teachers who are rising to the challenge of delivering a modern education for their pupils through the curriculum for excellence.

Murdo Fraser: The glowing picture that the First Minister paints is rather contradicted by this week's publication from the commission on school reform, on which one of his party's councillors, Paul McLennan, from East Lothian Council, served. How will the Government take forward the report's key recommendations, which are that greater school autonomy and greater diversity of provision are required to improve standards and, in particular, help those who are being failed by the current system?

The First Minister: As the education secretary has said, there are some interesting proposals in the document, and they will be treated very seriously. That is why he welcomed the document.

I am sure that Murdo Fraser will accept that the figures that we have on international comparisons show that the relative decline from which Scottish education was suffering was reversed in 2009, when our position of stability in the top quartile of

Organisation for Economic Co-operation and Development countries was achieved.

I really do not think that Murdo Fraser should get into misrepresenting what the commission said. Let me directly quote Keir Bloomer, who chaired the commission—*[Interruption.]* On the radio on Monday, he said:

"It's very important I think to see this in perspective. This is not a crisis, Scotland's education system is not failing. On the contrary it has high standards, remarkably consistent high standards across the whole range of its schools."

If that is what Keir Bloomer says, cannot Murdo Fraser try, along with Keir Bloomer, to get matters into perspective? Can Murdo Fraser see the positive suggestions that are made in the report and take them forward for the good of Scottish education?

Hugh Henry (Renfrewshire South) (Lab): The commission spoke of the devastating consequences of social and economic disadvantage. Will the First Minister allocate additional resources, to enable schools in disadvantaged areas to tackle the issue head-on?

The First Minister: We look substantially at positive proposals to attack poverty and disadvantage in Scottish society, as the member well knows when he examines this Government's record in terms of our ambitions for early intervention to tackle what has been an historical failing in Scotland in not achieving the universality of excellence in education that we want to achieve.

I have to say to the member that the way to secure that universality and get every child in Scotland an educational chance is not to impose tuition fees when they try to get into higher education.

Point of Order

the member concerned and to the Parliament. However, as I said at the outset, I am not responsible for any member's speech.

12:33

Jim Hume (South Scotland) (LD): On a point of order, Presiding Officer. During yesterday's debate on national health service waiting times, the Cabinet Secretary for Health and Wellbeing suggested that I was misleading the Parliament by highlighting that health boards will now be measured against a target to discharge 95 per cent of accident and emergency unit attendees, rather than 98 per cent, within four hours. It was even suggested by the cabinet secretary—

The Presiding Officer (Tricia Marwick): And your point of order is?

Jim Hume: The cabinet secretary even suggested to Murdo Fraser that he did not understand the difference between a standard and a target.

The national standard for A and E waiting—

The Presiding Officer: Can we get to a point of order, Mr Hume?

Jim Hume: I am coming to that. I have three minutes to do that, Presiding Officer—

The Presiding Officer: No, you do not. I judge whether there is a point of order and then I judge whether you get three minutes. Will you come to your point of order?

Jim Hume: Thank you, Presiding Officer.

Scotland's Information Services Division says:

"The national standard for A&E waiting times states that at least 98% of new and unplanned return attendances at an A&E Service should be seen and then admitted, transferred or discharged within 4 hours."

NHS boards are measured against—

The Presiding Officer: Mr Hume, what is your point of order?

Jim Hume: Presiding Officer, do you agree that it was in fact the Cabinet Secretary for Health and Wellbeing who misled not only the Parliament but the people of Scotland? Do you agree that he should come to the Parliament and explain himself?

The Presiding Officer: I thank the member for the advance notice of his point of order. As I have said previously, I am not responsible for the content of any member's speech.

I remind all members to be careful about making allegations that other members have misled the Parliament. These are serious issues and I expect the members involved to look very carefully at the *Official Report*. If they have inadvertently misled Parliament, I expect them to make that known to

#Scotlandhour

The Deputy Presiding Officer (John Scott): I will move swiftly on. The next item of business is a members' business debate on motion S4M-05670, in the name of Christina McKelvie, on #Scotlandhour.

Motion debated,

That the Parliament congratulates the work done by the #Scotlandhour team as an example of individuals and business people collaborating to promote tourism in Scotland; recognises the team's use of social media, such as Twitter, to give potential tourists an opportunity to gain positive information to help make their visit to Scotland a fulfilling one; understands that this is the first time that Twitter has been used in this way to promote a destination, with an upcoming hour being devoted to walks, trails and climbs, including the West Highland Way and woodland walks of Chatelherault Country Park in Hamilton, and hopes that this event on the last Wednesday of every month will be of ongoing benefit to the tourism industry in Scotland in the future.

12:36

Christina McKelvie (Hamilton, Larkhall and Stonehouse) (SNP): It is my great pleasure to lead this debate on an effective and simple way to ensure that Scotland is recognised as one of the greatest places on this earth to visit. If you visit from abroad or live here, #Scotlandhour is the place to go to get positive and at times very local information about things to do, see and eat in Scotland.

We all know that the Scotland brand is very powerful, and that and a love for Scotland brought together the group that came up with #Scotlandhour. Created by Douglas Baird in August 2011, #Scotlandhour was the first time that Twitter had been used to promote a destination in that way, and it is refreshing and inspiring. It gives up-to-date, factual information about Scotland and, at times, lovely, quirky pointers for travellers. Douglas Baird was joined by Mark Caplin, who I am delighted to say is a general manager at the Holiday Inn Express hotel in Hamilton, in my constituency; Fiona Drane, director of Bright Light Marketing, which is an agency that works to get business noticed; Susan McNaughton, who is owner of Sandcastle Holidays and now works with social media to promote festivals and events around the Borders and Fife; and Aileen Lamb, who is a tourism manager with Scottish Enterprise and has been helping the visit St Andrews—a place very close to my heart—destination group to develop its programme.

I am delighted to invite the #Scotlandhour team to the public gallery. It has been tweeting all morning about coming along, so the Scottish Parliament has had some of the team's input to its network on what is good to visit in Scotland.

That group of people just decided that they could provide a great service to travellers to Scotland and boost our tourism trade—they did not do it for any other reason. Rather than wait for someone else to do it, they just got on and did it. That is the type of innovation and imagination that Scotland is pretty famous for.

The last #Scotlandhour tweet chat had an audience of 596,000 people. That is a huge audience and, as #Scotlandhour says, it got all that advertising for free. It is worth looking at and participating in the tweets during the monthly hour of dedicated chat on the last Wednesday of each month. On top of those tweet chats, #Scotlandhour is building up its website—which, unsurprisingly, is <http://www.scotlandhour.com/>—to make an excellent resource for people who are considering visiting Scotland or to give those who are already coming the inside information on the very best things that our fine country offers.

The #Scotlandhour team are doing that not with any backing or sponsorship, but just for the greater good of the tourism industry in our country, which is very commendable.

One of the #Scotlandhour links tells us that there are 23 reasons to visit Scotland in 2013. I think that there are many, many good reasons to visit Scotland, but here are some of the 23 that the InsiderScotland website lists: our “coast with the most”; our golf, including Gleneagles and the Ryder cup; our whisky—in small measures; our adventure sports; our prehistory; Scotland's fantastic food, to which all of us in the chamber are testament; our Celtic culture, reflected for example in Celtic Connections and Highland games; and our football. I am not a huge football fan, but I know that many are and have those memories of the Scotland team managing to clutch disaster from the jaws of victory.

We have the west Highland line—I have had the great pleasure of being on that steam train; fascinating wildlife, which is a great draw for photographers and others from around the world; and we have our seven cities, and it is worth mentioning them all—Glasgow, Edinburgh, Aberdeen, Dundee, Inverness, Stirling and our new city of Perth.

Scotland's festivals are mentioned, including Celtic Connections and the Edinburgh festival, which is the biggest arts festival on the planet. Our world-class engineering is on the list. Scottish engineering is famous around the world and highlights range from the Forth bridge to the jaw-dropping Falkirk wheel. We have our mountains, and I am a committed mountain climber myself although I do not get as much opportunity these days. However, our mountains inspire us and I do not think that anyone has driven through Glen Coe

without the hairs on the back of their neck standing up.

Our tartan—the fabric of Scotland—is on the list, as something that shows how colourful and intertwined we all are. Kilts are also mentioned—we like a man in a kilt, as well as ladies in tartan tights, which I have been known to wear in the chamber. Our monsters are on the list, and we have many of them, not just in the chamber but in our lochs and our forests.

We have our music, from Big Country to Simple Minds to Franz Ferdinand and Belle and Sebastian, as well as Rod Stewart, who would like to be Scottish but, perhaps mercifully, is not. We welcome his interest anyway.

Our literary talents make the list. Scotland overflows with talent, from the writer of “Auld Lang Syne”, Robert Burns—whom we have just celebrated—to Sir Walter Scott, Irvine Welsh and Alasdair Gray.

Scotland’s world heritage is mentioned. We have five impressive United Nations Educational, Scientific and Cultural Organization world heritage sites. Those include Edinburgh’s old and new towns, Orkney’s prehistoric sites, the Antonine wall, St Kilda and—local to me—New Lanark. We also have the fantastic movie “Brave”, which shows Scotland at its best.

There is also hogmanay. We know how to party in Scotland and we should always remember that we like to do that partying with visitors from abroad. We love to have people here, and we have our Christmas lights celebrations across Edinburgh, Glasgow and other cities.

At 23 on the list is the year of natural Scotland. The Scottish Government and VisitScotland have designated 2013 as the year of natural Scotland to celebrate this unique country of 283 mountains over 3,000ft, 800 islands and beautiful and bountiful wildlife, from sea eagles to killer whales.

I have decided to increase the list from 23 to 25. At 24 are the fantastic areas you can visit in Hamilton, Larkhall and Stonehouse. Those include Low Parks museum, walks under ancient oaks at Chatelherault, a visit to Morgan glen or a trip to the beautiful covenanters church in the stunning village of Dalserf, all rounded off with an ice cream from award winners Equi’s in Hamilton.

I extended the list to 25, because it would not be complete without a fantastic visit to our very own Scottish Parliament.

I ask that we all congratulate Dougie, Mark, Fiona, Susan, Aileen and Lesley for having the initiative to use social media to promote our land. I believe that others across the United Kingdom and beyond are now copying this great initiative. Our land—our Scotland—is better for the imagination

and drive of the #Scotlandhour team. We wish them well and look forward to 27 March, when we will all be tweeting about Scotland’s playgrounds, activities, outdoors and sports. Given that the Commonwealth games and the Ryder cup come next year, the topic is very relevant to encouraging people to come and visit Scotland.

I ask members to remember #Scotlandhour, and I move the motion in my name.

The Deputy Presiding Officer: Thank you very much. There was a lot of information in there.

12:44

Malcolm Chisholm (Edinburgh Northern and Leith) (Lab): I congratulate Christina McKelvie on drawing our attention to #Scotlandhour and the innovative use of social media that the initiative will continue to pioneer over the coming years. I would also like to congratulate those who established #Scotlandhour.

In this year of natural Scotland, we at the Parliament should look to celebrate the beauty of the natural environment around us by using our technological resources to promote our assets, which keep bringing tourists to our shores and keep me holidaying in Scotland every summer.

Spending by tourists in Scotland averages around £4 billion each year and supports around 200,000 jobs, so maintaining the interest of tourists is vital to Scotland’s economic success. That is true most of all for the rural communities who rely on a successful high season to sustain their economies through the low season of winter.

Since mid-2011, the Scotlandhour website has advertised the new hashtag and encouraged users to engage in topical tweets at a set time each month, with topics that carry their own themed hashtag, such as #active, #walk, #food or #travel. The hosts then ask a series of questions on that theme. That sorts the discussion into categories and makes it easier for visitors to navigate between the tweets in the days and months after they have been fed on to the live stream. Essentially, what is created is a catalogue of tips and links that keeps tourists up to date with what is available, and it allows them to ask the questions that will help them to make the most of their stay. It is a truly innovative way of engaging travellers with instant, reciprocal information and is a chance to create a real online community of shared interest based around our new and existing tourist attractions.

As the website reminds us,

“no one else has used Twitter to promote tourism.”

The facility has proved to be enormously popular, as the hashtag has featured in the Scottish

trending categories in the past. We could, however, perhaps consider the merits of endorsing #Scotlandhour as a promoted trend in future over the assigned time each month. That might ensure that the promotion would gain maximum traffic and would make the most of the time available.

The Scottish Government's tourism framework for change highlights that such innovation will be necessary if the ambition to increase tourism revenues to Scotland by 50 per cent by 2015 is to be realised and if we are, indeed, to succeed in making the country one of

"the world's foremost tourism destinations."

#Scotlandhour could also benefit the tourism industry by helping to achieve some of the key changes highlighted in the framework for change. For example, the tweets that feed into each session could provide a valuable resource for managing the quality of the visitor experience. Recommendations, and indeed criticisms, could be used by businesses and other stakeholders to promote certain assets and improve others. They would also help to provide greater access to information throughout Scotland in a sustained and economically efficient manner.

Twitter as a resource for promotion is free and accessible and, as most members who use it will be aware, opens up a whole new world of reciprocal information that, when managed properly, can provide a clear narrative and dialogue between thousands of people.

In its report, "Growing Pains—can we achieve a 50% growth in tourist revenue by 2015?" the previous Economy, Energy and Tourism Committee highlighted one of the key issues in achieving the growth that the sector requires, which is the need to recognise properly

"The role of technology, electronic communication and marketing."

When we look at the Government's framework for change over the coming years, it is clear how well the innovative steps being taken by #Scotlandhour fit in with our broader aims and objectives. It has a clear remit of modernising the tourism industry and making our ancient monuments and historic landscapes accessible to all in the digital realm. The ability to upload links and photos serves as a route to even more effective advertising.

As a regular tweeter and a massive fan of the Scottish countryside, I heartily endorse this great initiative and commend Christina McKelvie for bringing it to our attention today.

12:48

Fiona McLeod (Strathkelvin and Bearsden) (SNP): I thank Christina McKelvie for bringing the debate on this innovative and interesting initiative

to Parliament. I join Christina McKelvie and Malcolm Chisholm in congratulating Dougie Baird and his fellow tweeters. I am not a prolific tweeter, but I look forward to, on Wednesday 27 March, becoming one of the audience of half a million who will take part in #Scotlandhour.

It is appropriate that it is here in this very modern Parliament, which speaks for Scotland, that we are talking about something so innovative and interesting.

Members will not be surprised to hear that I want to spend most of my speech talking about the fantastic tourism opportunities that we can tweet about in Strathkelvin and Bearsden. The theme for 27 March is Scotland's playground, as Christina McKelvie mentioned, and I will be tweeting about Lennox forest in my constituency, where I regularly walk the dog. There are great trails in Lennox forest and beautiful views of the Campsies. In the future, we hope to have mountain biking in the forest through a social enterprise called Rebound.

On Wednesday 29 May, the theme is walks. That is a hashtag for me, as walking is my favourite pastime. I have already mentioned the Campsie fells in my constituency. Next week, I will meet the Forestry Commission to hear about the work that it is thinking of doing at the back of Clachan of Campsie. I find it interesting that we are managing to get different agencies to work together on the theme of tourism. When I was young, the Forestry Commission was just about growing trees to cut them down and turn them into paper, but now when it does that core business, increasingly it also talks about trails, waymarks and so on, so that folk can be brought out to the countryside.

Then there is Wednesday 26 June and #water. Kirkintilloch is the canal capital of Scotland, so we will definitely be tweeting then. Members will be interested to know that, tomorrow, Parliament will have the first marine tourism conference, which will last for the whole day. I think that around 100 delegates will attend. Therefore, we get the significance of marine tourism.

I need a historic hashtag, and I ask the innovators behind the idea for that. As most folk know, I am a history graduate. In my constituency, we have the Antonine wall, which Christina McKelvie mentioned, which is a UNESCO world heritage site. I see that we do not have a historic night in the months up to December. As a history graduate who loves Scottish castles, I put in a plea to have #historicScotlandhour next year, please.

Again, I thank Christina McKelvie for bringing a really interesting topic to us, and I thank those who are involved in #Scotlandhour. I look forward to

being one of the half a million people who will take part in #Scotlandhour.

12:52

Alex Johnstone (North East Scotland) (Con):

I, too, congratulate Christina McKelvie on bringing forward this interesting debate. I am very new to it and I am not even a signatory to the motion, but I hope to put that right by making a few complimentary comments.

My colleague Mary Scanlon should have participated in the debate but, unfortunately, she has been called away due to a family illness. However, my late arrival to the subject should not curb my enthusiasm, because what I have been able to read in the short time since I discovered that I would be participating in the debate and what I have heard in it have given me great cause for optimism.

The use of information technology in general and websites in particular is something that government is not very good at. We have seen billions wasted on planned IT systems for the health service, and we have even seen VisitScotland having serious problems in the past—it had significant inefficiencies as a result of failures in its website. However, the decentralised approach to the use of IT, modern technology and social media, in particular, lends itself to low-cost and highly inclusive advertising of what Scotland has to offer. With #Scotlandhour, we are seeing opportunities opening up for individuals to retain control of a structure that does not cost a fortune to maintain. Our tourism industry and many other parts of our society could learn from that advantage.

Like many other members, I, of course, have something to promote in the debate, and must put up my hands and say that I am guilty of having recently promoted what I hope will become a Macbeth trail around Scotland. The trail will allow individuals to follow the sites that directly connect either to the real Macbeth, who lived 1,000 years ago, or to Shakespeare's Macbeth, who, as we have discovered through the study of history, bears little or no resemblance to the real Macbeth.

There is an opportunity there to promote yet another interesting aspect of Scotland's tradition and history that will draw international visitors. I hope to take the opportunity to use at least some of the lessons that I have learned from what #Scotlandhour has achieved to ensure that we can promote that on a low-cost basis.

I thank Christina McKelvie for bringing the issue to my attention. I am delighted to offer my support for her motion and I look forward to finding out a great deal more about #Scotlandhour and to participating in some of its future activities. I look

forward to hearing the minister's response to the debate.

12:55

The Minister for Energy, Enterprise and Tourism (Fergus Ewing):

As members will be aware, I have had the opportunity to take part in possibly several hundred debates in the Parliament, but without being derogatory to any of the participants in those debates over the past 13 years, we cannot always say that they have been fun. However, I was bowled over by Christina McKelvie's opening speech, which was not only an advertorial for the manifold attractions of this country of ours for tourists but was delivered in a way that I can describe only as a sort of tsunami of enthusiasm and passion for Scotland.

Therefore, I warmly congratulate Christina McKelvie on bringing this important topic to the chamber. It is the first time, I think, that we have debated the topic in relation to tourism, so Christina McKelvie has done us a great favour. I welcome to the public gallery all those who have made #Scotlandhour such an extraordinary success.

The immediacy and relevance of social media are becoming increasingly apparent to all of us, even those such as me who have not got the hang of social media or become regular participants in it. I hope that this will not be misquoted against me in future, but I really must do better. I ask Mr Johnstone not to use that comment out of context in relation to other topics.

Social media are becoming more important and are part of everyday life now, particularly for those who are on the correct side of 30. The latest VisitScotland research showed that in 2012 no less than one in three visitors to Scotland shared their trip experiences online while they were still in Scotland—so one third of all the visitors to our country talked about Scotland online. That is entirely new. In the old days, we would send a postcard, but these days online communication by visitors goes to all their friends and family, then it can be passed on to a very wide audience all over the world. So, as a method of communicating positive messages, social media have truly infinite opportunities. As Malcolm Chisholm rightly said, we must take advantage of social media; and Alex Johnstone said correctly that Governments are perhaps not best placed as institutions to be alive to and respond quickly enough to the opportunities that derive from the new technologies.

After their trip, nearly half of all visitors to Scotland used an online platform to talk about the trip. We have seen some fine examples of truly innovative tweets in that regard. Not only can we send stunning pictures of Scotland, but recently

the Canadian astronaut Commander Chris Hadfield tweeted some from the international space station. I suppose that we could say that that tweet was quite literally out of this world. Such endorsements are helpful in attracting visitors to Scotland. We want the Scottish Government to be open and alive to the opportunities that social media provide.

VisitScotland is terrific at marketing and its efforts have been acknowledged worldwide. This year began with CNN, the international news outlet, listing Scotland as the country to go to: the top country, the best country, the leading country out of around 200 countries in the world. What a tremendous accolade! When I heard that on the early morning news, I thought that I must find out exactly what the rationale was; it was that VisitScotland's marketing of the winning years and the focus years—the year of food and drink, the year of creative Scotland, the year of natural Scotland and the year of homecoming—creates a bold vision of Scotland and gives a positive message about and a positive portrayal of Scotland. It helps to create an image and perception throughout the world that Scotland is an interesting and serious—not frivolous—place that is worth visiting and which has a huge number and variety of attractions, as Christina McKelvie correctly signified.

It occurs to me that it would be useful if those who are involved in #Scotlandhour could give us their suggestions of opportunities for other focused years. Of course, 2014 is the year of homecoming and, as I indicated earlier this week, we are thinking about opportunities for 2015, 2016, 2017 and 2018. Perhaps people could use #Scotlandhour to make suggestions for what we could do in those years. That way, we could hear from people across the country. Policies should not be set by me and a group of people in the public sector making decisions; they should be set as the result of the participation of everyone in Scotland.

I am aware that the blogmanay hashtag reached more than 3.7 million users worldwide and produced more than 1,000 images of Edinburgh's hogmanay and winter on social media channels. Increasingly, of course, all businesses that are involved in tourism are dependent on the internet for their bookings. These days, not to be online is not really to be in tourism. That raises the important question of how to ensure that internet access, at good speeds, is available throughout the country. That is another topic, but involves something to which we and other parties are committed.

Visitor satisfaction surveys are important to us. Some 94 per cent of visitors are satisfied with their trip to Scotland, overall, and 98 per cent will

probably or definitely recommend Scotland, based on their experiences. I imagine that many political parties would be quite pleased with a 98 per cent rating, although I suspect that that will not happen in this lifetime.

Those figures are valuable, and the value of social media to further improve Scottish tourism and recruit people to come to Scotland cannot be overestimated.

This is tourism week, and we have already seen a number of great developments. A new visitor centre has opened on Buchanan Street in Glasgow, in masses of time for the Commonwealth games and the Ryder cup, to which Christina McKelvie referred, and many in Scotland have taken the opportunity to promote tourism as a great career and to train young people in all aspects of tourism. The FutureChef competition, which was organised and run by Springboard, is in its 13th year. It teaches teenagers how to cook to a standard that would have been unimaginable for a teenager to attain three or four decades ago. The East Lothian Hospitality and Tourism Academy, which is a partnership between business, Queen Margaret University and the local council, gives 40 volunteer secondary 4 and 5 children the opportunity to participate in university-type lectures and industry-type training. I met four of those young people, all of whom said that their personal confidence increased massively as a result of their attendance. That is an invaluable investment and improvement whatever they do. One of them told me that she had not previously known that there was such a thing as events tourism and that she was going to pursue that as a career.

Those types of thing are the future for tourism in Scotland. I hope that they can be pursued further through the collective wisdom of those who are involved in #Scotlandhour and who participate in the hourly Wednesday evening debates.

I thank everyone who has participated in this debate, which has been a useful one. I want to see what more we can do in Government to work with the organisation that has brought so much credit to this country to develop and achieve even more for this great country of ours through the use of social media.

13:04

Meeting suspended.

14:30

On resuming—

Scottish Parliamentary Corporate Body Question Time

External Screening Facility

1. Graeme Pearson (South Scotland) (Lab):

To ask the Scottish Parliamentary Corporate Body what developments there have been since November 2012 regarding the external screening facility. (S4O-01859)

David Stewart (Scottish Parliamentary Corporate Body): The contractor's progress to date has included establishing the construction site, the temporary removal of parts of the glass roof over the concourse and wall panels, excavating and laying the foundations, and constructing the steel and concrete system frame. The project is on track and within budget.

I remind members that the decision to proceed with the project was not taken lightly and was based on the corporate body's corporate and legal responsibilities to ensure safety. The corporate body has a duty of care to all building users to put in place sufficient measures to the extent that is reasonably practical in the circumstances to do so. Failure to carry out measures that are, in law, reasonably practical could leave the corporate body and its individual members open to prosecution.

The external security facility will provide protection for more than 400,000 visitors per year and up to 1,000 passholders daily, including staff, members, the media and contractors, through a significantly safer and more secure environment for screening.

Graeme Pearson: David Stewart will realise that members are sensitive about the costs attached to such projects. Has the corporate body received an up-to-date threat assessment of the situation for which the facility was designed, and can it share with the Parliament any details of that assessment?

David Stewart: The corporate body has received clear and consistent expert security advice that, in light of current threats, it is highly advisable for the Parliament to construct an external security facility. Although Graeme Pearson will understand more than most that I cannot go into the detail of that advice, there are other indicators such as the number of incidents that our own security staff deal with. For example, more than 1,500 sharp objects such as knives were retained in the public access area during 2012. The risk profile has changed from organised groups to obsessed individuals.

Voting Consoles

2. Maureen Watt (Aberdeen South and North Kincardine) (SNP): To ask the Scottish Parliamentary Corporate Body whether it plans to upgrade the voting consoles in the chamber and, if so, when this will be carried out. (S4O-01861)

Linda Fabiani (Scottish Parliamentary Corporate Body): The current sound and voting system was installed during the 2011 summer recess and has in place a 10-year support and maintenance contract, so we have no current plans to upgrade it.

Maureen Watt: Ms Fabiani will recall that, by pressing a few buttons together on the previous consoles, members could work out how many speakers remained to speak in a debate and therefore when to be back in the chamber for closing speeches. That was preferable to the Presiding Officer having to herd people back into the chamber for closing speeches. Is it possible to do that on the current consoles?

Linda Fabiani: That is an interesting point. I remember that that was the case with the previous consoles. However, the agreement to upgrade the consoles and the specifications to which they were to be upgraded and for what we would see on the screens were decisions taken by the previous corporate body and Presiding Officers. Those decisions are reflected in what we have here today.

The Presiding Officers have clarified that if members want to know any of the things that Maureen Watt mentioned, they are more than welcome to send a note to the desk. They will be given any information that they require.

Living Wage

3. Kezia Dugdale (Lothian) (Lab): To ask the Scottish Parliamentary Corporate Body what its position is on members paying their staff the living wage. (S4O-01892)

Liam McArthur (Scottish Parliamentary Corporate Body): The SPCB is highly supportive of the principles of the living wage and, as the employer of parliamentary service staff, we lead by example in paying all parliamentary staff above the living wage.

The position on members' staff is that the employment relationship is directly between the member and their member of staff. The rate of pay is therefore a matter for each individual member to determine.

Kezia Dugdale: The member will be aware that I have previously raised the issue of the living wage at corporate body question time, particularly with regard to contract staff in the Parliament building. Will he update us on progress in that

regard and on whether that work applies to members' offices? I am sure that he would appreciate that it would be good practice for all members to pay their staff the living wage.

Liam McArthur: Not only do I recognise the lead that Kezia Dugdale has taken on the issue, I recall that she secured a debate on the issue during living wage week and, due to laryngitis, had to have John Park step into her shoes. I am glad that she has refound her voice to continue her campaign on the issue.

In relation to contract staff in the Parliament, we are aware that there are particular issues in relation to catering and cleaning staff. We continue to have discussions with the contractors over that to ensure that we are applying what pressure we can within the limits that apply in relation to procurement.

As a parliamentary corporate body, we have taken a strong lead on the issue. We hope that that sets an example for MSPs. However, all of us probably have a role to play in exerting pressure on our colleagues to ensure that they are paying the living wage to each member of their staff.

Chic Brodie (South Scotland) (SNP): There is a large facilities management company that does work for some of the Ayrshire councils. Its revenues last year were £2 billion. It paid corporation tax of 1.1 per cent, in comparison with standard corporation tax of 23 per cent. Will the SPCB ensure that full due diligence is done on all companies that we deal with so that they comply with corporate tax requirements?

The Deputy Presiding Officer (Elaine Smith): I am not convinced that that ties in with Kezia Dugdale's question. Mr McArthur, do you want to make any comment?

Liam McArthur: I will try to be helpful. It is certainly an issue that has been raised by a number of members in the past. There are limits to what the corporate body can do about the tax arrangements through which individual companies may seek to organise their affairs. Nevertheless, I reassure the chamber that we exert thorough due diligence in contractual arrangements before signing any contract.

The Deputy Presiding Officer: John Wilson has pressed his request-to-speak button. Is that for a supplementary on this issue?

John Wilson (Central Scotland) (SNP): Yes. Does the corporate body monitor how many interns are recruited at any one time in Parliament?

Liam McArthur: We will have a clear figure of the number of interns in the Parliament's departments. It is perhaps slightly more difficult to get an accurate figure for the number of MSPs'

interns. Although I am happy to liaise with John Wilson on how we could capture that figure to see what information might flow from such an exercise, I go back to the point that I made in response to Kezia Dugdale: the arrangements between individual members and their staff are really a matter for members.

SPCB Questions

4. John Wilson (Central Scotland) (SNP): To ask the Scottish Parliamentary Corporate Body how many oral questions have been (a) lodged for and (b) taken at SPCB questions in the current parliamentary session. (S4O-01893)

The Deputy Presiding Officer: I ask other members if they would mind stopping conversations in the chamber.

Liam McArthur (Scottish Parliamentary Corporate Body): Including the six questions lodged for answer today, 32 oral questions to the SPCB have been lodged in the current parliamentary session. Twenty of the 26 questions lodged prior to today have been taken at SPCB question time, with the remaining six having received written answers.

John Wilson: Would the corporate body consider either increasing the number of corporate body question sessions in Parliament or extending the length of those sessions?

Liam McArthur: I pay tribute to John Wilson's recognition that corporate body questions are one of the unheralded success stories of the Parliament. I am sure that he has the backing of many members in that regard.

The frequency of SPCB question time is really a matter for the Parliamentary Bureau. There is perhaps a legitimate discussion to be had in the bureau about whether the number of sessions that we have is adequate.

The length of the question session is set out in standing orders—it is limited to 15 minutes. I note, however, that at the previous question session in November, 10 questions were lodged and there were a number of supplementaries—principally on information technology issues—which meant that the session ran on to 23 minutes. The Presiding Officer on that day clearly got caught up in the excitement of it all.

Since the establishment of the Parliament, it has been the norm for us to have three to four question sessions over the course of a year. It is perhaps worth asking the bureau to look at whether that is adequate. However, given the number of oral and written questions that are lodged, I am not sure that there is unmet demand and a compelling case for additional sessions.

Accessibility of Parliamentary Campus (People with Autistic Spectrum Disorder)

5. Mark McDonald (North East Scotland) (SNP): To ask the Scottish Parliamentary Corporate Body what work is being done to improve accessibility to the parliamentary campus for people with autistic spectrum disorder. (S4O-01860)

David Stewart (Scottish Parliamentary Corporate Body): The SPCB is committed to an on-going programme of continuous improvement for accessibility and makes every effort to involve groups of disabled people in identifying where improvements can be made within the parliamentary campus.

Recently we have been working with Autism Initiatives UK and the National Autistic Society to enable us to respond positively to the needs of people with autism who visit the Parliament building. For example, with Autism Initiatives UK, we have developed a training programme that is aimed at our public-facing staff, which will help them to gain a better understanding of the needs of people with autism and how best to respond to their individual needs.

Mark McDonald: The member might be aware of the National Autistic Society's process of accreditation, which the Northern Ireland Assembly achieved in 2012. That involved changes being made to the Assembly building, such as the provision of a quiet room, changes to signage and warning signs being placed on such things as noisy hand-dryers. It also involved the provision of training to front-line staff and the creation of autism champions. Is the SPCB looking at how it can work towards achieving accreditation for this establishment?

David Stewart: I am very grateful to Mr McDonald for raising the issue with us. An initial meeting has taken place with the National Autistic Society and we are now exploring the matter further with the relevant business areas across the Parliament to identify whether we are meeting the needs of people with autism and where further development would be beneficial.

We also intend to make contact with the officer at the Northern Ireland Assembly who led the process for gaining the autism access award to find out how that worked for the Assembly.

We will update the member once further progress has been made.

Catering Contractor (Traceability of Meat)

6. Alison Johnstone (Lothian) (Green): To ask the Scottish Parliamentary Corporate Body what recent discussions it has had with its catering

contractor regarding the traceability of its meat supply chain. (S4O-01894)

Linda Fabiani (Scottish Parliamentary Corporate Body): There have certainly been a few recent discussions with our catering contractor, which has assured us that all meat products served at the Parliament have full traceability and are either red tractor or Quality Meat Scotland certified. That certification requires the meat product to be fully audited from the source to the plate.

Alison Johnstone: The Soil Association's food for life catering mark provides independent assurance on traceability and quality, not just of meat but of all food groups. Already one in 10 schools in Scotland hold the mark. Kitchens in the City of Edinburgh Council, NHS Lothian and the University of Edinburgh are working towards knowing where all their food comes from. Will the SPCB consider requiring the Parliament's catering contractor to work towards achieving the Soil Association quality mark and join in that good work, which looks to improve food quality, localise our food and strengthen our local economy?

Linda Fabiani: Certainly. Our current catering contract requires food standards to comply with certain assurance schemes that include animal welfare standards, such as the red tractor and Quality Meat Scotland standards. There are also the Royal Society for the Prevention of Cruelty to Animals freedom food standards.

I am interested in what Alison Johnstone has said. We can ask that it be looked into to see whether it might be worth considering in future contracts that go out to tender.

Adult Health and Social Care (Integration)

The Deputy Presiding Officer (Elaine Smith):

The next item of business is a debate on motion S4M-05838, in the name of Alex Neil, on the integration of adult health and social care.

I remind members to speak through the chair by referring to other members by their full names and not as “you”.

14:45

The Cabinet Secretary for Health and Wellbeing (Alex Neil): I hope that today’s debate will be slightly more consensual than yesterday’s debate was, but one never knows.

I am very pleased to open this debate on integrating adult health and social care in Scotland. We will introduce a bill in Parliament on that important area of public service reform by the end of this parliamentary year. During the debate, I will restate our commitment to integration and outline our priorities for the bill.

I thank partner organisations in health and local government, stakeholders across the professional organisations, the third and independent sectors, and patient, service-user, carer and staff representatives for their contributions. I also thank the Parliament’s Health and Sport Committee for its contribution in the very productive period that has led up to where we are.

Since I became Cabinet Secretary for Health and Wellbeing, it has been clear to me that the Scottish Government is by no means alone in recognising that, as society’s needs change, so, too, must the nature and form of public services. It is also abundantly clear to me that the successful delivery of integrated health and social care services depends on effective partnership working across both the statutory and non-statutory sectors. Getting that right is a priority for Scottish society as a whole, and it requires leadership, engagement and involvement across the health and social care landscape.

I was pleased to receive 315 written responses to last year’s consultation. Those responses have added considerably to our collective stock of thinking on the matter.

As part of last summer’s consultation process, the Scottish Government ran nine public and practitioner events, which approximately 900 people attended. At those events, my officials heard from health and social care professionals, statutory and non-statutory organisations, carers, users of health and social care services, and members of the public more widely, and all the

contributions were immensely valuable. On top of that, my officials were involved in around 50 local events, including focus groups, local forums and seminars. In total, around 2,000 people were directly involved in those discussions.

That shows two things: that we have gone to some lengths to ensure that the matter is thoroughly consulted on, and that the challenges that are being discussed really are important and matter very much to many people in Scotland.

Following the consultation, we published an analytical report that reflects the consultation responses, and our response to the consultation responses has also been published. That approach is consistent with our priority to continue the invaluable on-going partnership work involving the national health service in Scotland, local government, the third and independent sectors and professional bodies, including allied health professionals. We are committed to ensuring that effective integration is informed by the knowledge and experience of those in the public sector and beyond who have a key interest in health and social care. We must continue to work together to ensure that public services evolve effectively, so that people receive the support that they need both quantitatively and qualitatively, and that we use all our resources to best effect to achieve the best possible outcomes. That is why the integration of adult health and social care is a key part of the Scottish Government’s commitment to public service reform in Scotland, and why what we achieve with that programme of reform matters so much.

What do I mean when I refer to the changing shape of Scottish society? The 2011 census showed us that for the first time there are more people aged over 65 in Scotland than there are people under 15. It is great that more people are living longer, healthier lives, but for us, as for the rest of the developed world, an ageing population means that we must look carefully at how we plan and deliver services. Recent research shows that one fifth of all girls born in Scotland today will live until they are 100. As well as the ageing of the population, we have also had the increase, to record numbers, in the population of Scotland. That is a welcome development, but one that presents another challenge that we need to rise to.

However, this is about more than just older people and longevity; it is about improving outcomes for people who have a range of complex support needs and for their carers and families. Too often people in those circumstances are admitted to hospital or to a care home, when a package of care and support in the community could deliver better outcomes for them and would be more their choice. When people are admitted to hospital or a care home, the costs are human and

financial, and the consequences are not just personal but felt across the whole system and by other people as resources are tied up inappropriately in care that is not best suited to the individual.

This is also about putting the leadership of clinicians and care professionals at the heart of service delivery for people with health and social care needs. Perhaps most ambitiously, it is also about establishing a public service landscape in which different public bodies are required to work together and with their partners in the third and independent sectors, removing unhelpful boundaries and using their combined resources to achieve maximum benefit for patients, service users, carers and families.

Like other areas in Scotland, West Lothian has developed a universal reablement service, which responds to all hospital discharges, where needed. Staff come from different agencies and organisations but work in an integrated way to deliver what is a truly personalised service for the individual. Early indications are that that service has saved West Lothian more than 800 care hours per week and resulted in individuals being able to complete everyday tasks for themselves again. That is a very good example of health and social care partnership working, leadership, engagement and involvement in action.

In many ways, it was no surprise to me that the response to the consultation was so thoughtful and thorough. We have an excellent record of partnership working over many years in Scotland. Nevertheless, we all recognise that our current health and social care system still incorporates barriers relating to structures, professional territories and silos, governance arrangements and financial management. Often those have no helpful bearing on the needs of the large and growing group of service users, many of whom have multiple health and social care needs. Many barriers also work against the general aspirations of efficiency and clinical and care quality.

Our forthcoming bill will reform the system to enable delivery of care that is better joined up within health and between health and social care and which, as a consequence, will deliver better outcomes, as I have said.

Indeed, the hospital at home programme in North Lanarkshire is a very good example of joined-up working between a health board and a local authority, enabling more people to be treated in their local community. The project, which involves a team of nurses, allied health professionals, healthcare support workers, social care staff, general practitioners and consultants caring for patients at home, is to be adapted for use and rolled out across Scotland. The programme has enabled 80 per cent of patients to

stay in their home rather than be admitted to hospital. That is an example of what integration can achieve.

The bill will start from the principle of person-centred care, focusing on the importance of prevention and anticipation. That is in line with our ambitions as a Government for community planning and for the reform of children's services, and it recognises the findings of the Christie commission. It is also based on the wealth of evidence that tells us that a person-centred approach delivers the best outcomes.

Therefore, the starting principle of the bill will be a requirement on health boards and local authorities to deliver, jointly, a set of nationally agreed outcomes that are focused on improving the individual's experience of care. We will remove from the statute community health partnerships and establish health and social care partnerships to provide an environment of joint governance, joint accountability and integrated oversight of service delivery.

Each health and social care partnership will be accountable to its council and health board for the delivery of nationally agreed outcomes and any other appropriate outcomes agreed locally, using an integrated budget covering adult social care, community healthcare and aspects of secondary healthcare.

We will legislate to require health boards and local authorities to integrate those services, but we will leave to local agreement decisions on whether to include children's services within the scope of the partnership. The proposals will allow for local agreement of the range of areas of service provision to be integrated.

Two possible models of integration have been agreed with the Convention of Scottish Local Authorities. One is similar to the Highland model, which is a single agency model, and the other is a corporate model, involving a partnership between the health board and the council, with a joint accountable officer in charge of the day-to-day running of the partnership. We believe that that is the most effective way to ensure that our objectives are met by the legislation.

It is also extremely important that we totally involve other key stakeholders, such as the patients, the end users, the third sector and the independent sector, to ensure that, in every area, the design and architecture as well as the delivery of services are up to the standard that we demand.

This is a revolution in the delivery of health and social care in Scotland. It is a positive, radical step to improve the quality and quantity of service provision throughout health and social care. We believe that it is a major step forward and we look

forward to taking the legislation through to the statute book, in collaboration with others in the chamber.

I spoke at the COSLA conference this morning, and my loud and clear message to every health board, council and stakeholder in Scotland was that there is no need to wait for the legislation to pass before we get moving. Already, many parts of Scotland have their foot on the accelerator. We must encourage everyone to move on this as quickly as possible, get the partnerships established and, most important of all, ensure that we are delivering the quality of provision that our people deserve.

I move,

That the Parliament acknowledges the importance of assuring successful integration of health and social care services, on which the Scottish Government will soon introduce a bill for the Parliament's consideration; agrees that a key aim of the legislation should be to improve outcomes for people using these services; notes that the foundation of reform should be based on nationally agreed outcomes and joint and equal accountability for the delivery of outcomes by the statutory partners, and notes the importance of integrated budgets and a strengthened role for clinicians and care professionals along with the third and independent sectors in the planning and delivery of person-centred services.

The Deputy Presiding Officer: I should make it clear that there is some time available at this point for interventions.

14:58

Jackie Baillie (Dumbarton) (Lab): In what has been a busy time for the respective health teams, I am pleased to bring the parliamentary week to a close debating the integration of health and social care.

I do not think that there is a more pressing social policy concern than the care of our older people. Nobody in this chamber doubts the scale of the demographic challenge that we face, whether it is the 40 per cent increase in those who are aged 65 to 74 in the next 20 years—which includes many of the people in this room—or the staggering 83 per cent increase in those who are aged over 75. Scotland's population is getting older and people are living longer. Earlier, the cabinet secretary said that a girl who is born today is likely to live to be 100. It strikes me that, on the basis of that statistic, the cabinet secretary is going to see an awful lot of me for an awful long time.

Although the statistics are a cause for celebration, they also raise challenges. Experts suggest that we would need 6,000 more beds in the NHS and that the health budget would need to double to simply stand still if we are to meet the likely demand. Doing nothing is clearly not an

option. Our aim must be to provide the very best quality health and social care to enable people to live their lives in their local community, enriched by family and friends.

Scottish Labour set out our policy intentions almost three years ago and we followed that up with an expert group chaired by Sir John Arbuthnott that drew in members with expertise in health and social care. Their work has helped to shape the agenda, and I thank them for that.

We recognised at the time that older people were falling through the gaps in services. They were ending up in emergency care because of a lack of integration on the ground. Although we all talk the language of prevention, the assessment frameworks that are used by local government have to prioritise those who are in most need and ration services. Also, there remains a postcode lottery in care. Costs are shunted between different public organisations and there are differential charging regimes.

Our vision of the future is to have integrated, locally delivered, locally accountable services that are based on radically reformed community health partnerships and involve GPs much more in the design and commissioning of services, and to have a national framework that ends the postcode lottery of care, drives up standards and delivers better quality care with much better outcomes for older people. We need a single budget to stop health and local government playing pass the parcel with people's care, and a charter that sets out what is expected in terms of outcomes, equity and quality.

Mark McDonald (North East Scotland) (SNP):

The member says that the Labour vision is to create more integrated services at the local level. I wonder how she squares that with the decision by her colleagues in Aberdeen City Council to establish a local authority trading company for social care, which the chief executive of NHS Grampian says will put at risk some of the benefits that could be realised from the integration of health and social care.

Jackie Baillie: I have to say that, when funding for local government is squeezed such that the SNP Government passes on 83 per cent of all the cuts that it receives, it is no wonder that local authorities have to be creative in order to continue providing lifeline services to their communities.

At the time of our previous debate on the subject, we had a different cabinet secretary. Her approach was remarkably similar to ours, and at the time I made reference to imitation being the sincerest form of flattery. I confess that I was slightly disappointed by the consultation document and the Government's response. The document was light on vision and ambition and it was all

about structures and governance. The focus on older people and adults appeared to be a secondary consideration in the tussle for control. In short, although it is, regrettably, a pale imitation of the Government's earlier ambition, we will work with it to try to get this right. I welcome the cabinet secretary's comments today about the principles and the vision that will underlie the bill. They were worth hearing.

The stakes could not be higher. We need a radical vision of how to achieve integration, and not backroom deals that balance competing interests. If we start from what we need to achieve for service users and their carers and design the service around that, we are much more likely to get it right.

Before I turn to governance, there is a key issue that I hope the cabinet secretary and the Scottish Government will consider. The NHS and local government have very different cultures. The NHS assesses people based on need and then provides treatment free of charge. In local government, need is also assessed, but then priorities are determined, services are rationed, and in many cases people are required to contribute financially. How will we bring those two competing cultures together?

Equally, a number of services are outsourced to the private sector, such as home care. Will that use of the private sector continue as it is? Will it in some way spread? How and from which sectors will the Government commission services? Those are key and fundamental questions that the Government needs to consider and discuss with the Parliament. The model of governance that the Government suggests concedes the fact that there should be more elected representatives on the board—that is welcome—but that that should be balanced by health board members.

I invite the cabinet secretary to be even more radical. Virtually every submission that we have received asks for representation and voting rights on the board. I am sympathetic to many of those calls, as I am sure the cabinet secretary is. If we take allied health professionals, occupational therapists and physiotherapists as examples, many of those people are the bridge between health and social care services. They help in practical ways to sustain people in their own homes, and of course they should have a voice and a seat at the table. For that matter, we should consider the myriad voluntary sector organisations that operate at a community level, building capacity as well as providing services. They, too, should have a voice and a seat at the table. However, it will become an incredibly crowded table.

Bob Doris (Glasgow) (SNP): Will the member take an intervention?

Jackie Baillie: Not at this point.

All too often, the voluntary sector acts as the glue between health and social care. Many voluntary organisations operate at a neighbourhood level in a way that other services find difficult. I am a fan, but not because I have some kind of romantic notion of what voluntary organisations do. I know that we get added value when the voluntary sector delivers services—we get a bigger bang for our buck—and I know that, in many cases, the quality of the services delivered is second to none. Therefore, let us ensure that the voluntary sector has a key role in integration.

However, I want to draw a distinction between local authorities and health boards that might chime with the experiences of many members in the chamber. In my 13 years as an MSP, I have found health boards to be wholly unaccountable to everyone other than the cabinet secretary—and he would surely concede that, even then, there are challenges. I have watched executive directors, as employees of the health board, engaged in payroll votes where, no matter the issue under discussion, all the hands go up simply to follow the chief executive.

On the subject of officers, we really do not need another set of accountable officers. We already have accountable officers in local government and health. Is there genuinely a need for more institutional clutter and confusion?

Bob Doris: I appreciate the point about including the voluntary sector, but on the issue of local authorities and health boards working together I have found that local authorities tend to be worse because, unlike health boards, they can get politically defensive. Does Jackie Baillie accept that the key strength in health and social care integration will be having a single accountable officer, who is equally accountable to both the health board and the local authority, so that there is absolutely no passing the buck?

Jackie Baillie: I have more faith in local authorities than Bob Doris has. I will come on to develop how I think that that accountability is best deployed.

I want the new health and social care body to be accountable and to be answerable to the people of the area. We live in a democracy, thankfully, where we elect councillors to deal with matters in our local communities. Our councillors have a wealth of knowledge and experience and they are tenacious in representing their communities, and I believe that they should be in charge. The model that is operated by local government allows for officers and expert advisers to influence and shape the agenda, to have their seat at the table and to provide the professional input that is essential to good decision making. That is a model

that works. I invite Bob Doris to think about that. What is wrong with that?

On the day that the Convention of Scottish Local Authorities president, Councillor David O'Neill, has set out his vision for further devolution of powers to local government, let me encourage the cabinet secretary to be radical. The debate should be about not who holds the balance of power, but who provides the best vehicle for delivery. Democratic accountability may be an alien creature in the NHS, but it is alive and well in local government where it is such a driver for change. I trust councillors—does the cabinet secretary?

Alex Neil: I thank the member for taking an intervention, as I am genuinely interested to get a clarification from her. Is she suggesting that councils alone should run these partnerships? Does she believe that councils should take over the work of health boards?

Jackie Baillie: I am very clear that this should be a partnership, and I want to bring democratic accountability to that partnership. Increasingly, what we are talking about is ensuring that services are effectively knitted together and delivered on the ground. I see councillors very much as providing the democratic accountability, but the local government model also involves professionals from across the sector and provides a way of including the voluntary sector, allied health professionals and the whole working partnership. I think that there is merit in that, and I hope that the cabinet secretary will consider it.

On finance, I see that the cabinet secretary will retain an annual focus of tension: agreeing the budget. However, if the two sides do not agree, do not worry—he will have the powers to force them to do so. Frankly, that sounds like a recipe for more bean counters rather than a focus on older people or adults. A more radical alternative would be to allocate the money centrally using an Arbutnott-type formula that recognises need in much the same way as the Scottish Government already does for health boards. Unfortunately, that does not filter beyond health boards. However, if the formula works for health boards, why cannot it work for integrated health and social care bodies?

On the subject of money, local government is woefully underfunded for social care. As I said earlier, the SNP passed on to local government 83 per cent of all the cuts made. Is it any wonder, then, that costs of care are rising and people in neighbouring areas are being charged different rates under different eligibility criteria? The SNP must ensure that there are adequate resources for local government to meet its responsibilities or it will destine the integration of health and social care to the worst possible start.

The Government must consider the impact of welfare reform. Many people who are in receipt of the disability living allowance use it to pay for services. If they fail to qualify for a personal independence payment, there will be a black hole. I have asked the Government many times to address that.

Matters are pressing. Members on the Labour benches will help to deliver a fair and robust system of health and social care, but the Scottish Government must do more. It must be more ambitious and visionary. The cabinet secretary spoke about a revolution; I look forward to seeing it.

I move amendment S4M-05838.1, to leave out from “joint” to end and insert:

“strengthened accountability for local service delivery, with a strong role for local authorities; notes the importance of truly integrated budgets that avoid conflict between local authorities and NHS boards as well as a strong role for clinicians and care professionals along with the third and independent sectors in the planning and delivery of person-centred services; notes with concern both the increases in care charges and the postcode lottery in charging experienced across Scotland as local authorities are forced to react to Scottish Government cuts to their budgets, and calls on the Scottish Government to use the integration of health and social care to create a truly integrated health and social care service that improves care across Scotland.”

15:10

Nanette Milne (North East Scotland) (Con): I welcome the debate. It is another milestone along the journey towards achieving better integration of adult health and social care, and I look forward to seeing the Government's legislative proposals to assist in the process when its bill is introduced in Parliament in the near future.

From the evidence that was taken by the Health and Sport Committee ahead of the Government's consultation, the responses to the consultation and the Government's response to them, the unanimous view is that the focus must be on achieving better outcomes for people who require health and social care services by improving the quality and consistency of the care that they receive to support them in their daily lives and enabling them to live as full a life as possible within their capabilities, whatever their age.

Although the legislation will be restricted to the integration of health and social care for adults, those who responded to the consultation demanded that the legislation be extended to children's services, and to a broader range of services, such as housing provision.

The Government justifies its stance by stating the view that health boards and councils are best placed to make decisions on service integration for

children. We have seen that in Highland, where the NHS is providing services for adults, and the council is looking after children's services. With regard to other services, the Government's view is that, because many joint and collaborative services work well and can be left to local partners to work out, it sees no need to legislate for the integration of services such as housing, whereas there is an immediate need to address the health and social care needs of people with multiple support needs. I agree. It is often the case that people do not get the joined-up care that they need to keep them safe and well in their homes for as long as possible.

As was pointed out in one of the briefing papers for members, by proactively embracing the role of housing in developing integrated housing and care services, both central Government and local authorities could make substantial savings in the long run without compromising on quality. That is a fair point, given the demographics of an increasing number of elderly people with multiple physical problems and increasingly complex care needs because that will inevitably lead to growing demand during the next decade for very sheltered housing and extra-care housing.

There is broad support for the Government's proposals to base its reforms on nationally agreed outcomes, with locally determined priorities. Local circumstances vary widely and must be considered in the planning of integrated local services. Circumstances also change over time and, to be meaningful, there must be scope for both nationally agreed outcomes and local priorities to evolve, while assuming that the focus will be on the wellbeing and independence of service users, giving them control over their lives.

A barrier to integration—it has been hinted at this afternoon—has been the cultural differences between health professionals and social workers, illustrated by segregated training, rivalries between the two groups and a perception of medical dominance. If integration is to proceed successfully, ingrained organisational cultures must be overcome. The Government's view is that by placing a statutory duty on health boards and local authorities to work together, and in collaboration with key stakeholders, it will ensure that competing rivalries and difficulties can be overcome. I hope that that will be the case, because I do not see how health and social care integration will work without such cultural change. The consultees feel, nonetheless, that there should be a mechanism in place to resolve disputes, should they arise.

On the composition of the health and social care partnerships and the Government's proposal to legislate for HSCPs to include a single health board and one local authority, there was some

demand for partnerships to include more than one council, where appropriate. For example, the British Medical Association's view is that that facility must be in place if integration is to be successful.

Alex Neil: Nanette Milne makes a fair point about cases in which there is a desire for the partnership to cover more than one local authority area. I intend to make provision in the bill that, where there is a local desire and agreement for that to happen, it can be achieved. There are areas in which we have three local authority areas within one health board area. If the three local authorities and the health board agree that they should have one partnership instead of three, the bill will allow that to happen.

Nanette Milne: The cabinet secretary has taken a paragraph out of my speech, but I will still say it.

The BMA feels that, because of the current lack of coterminosity in some areas—where health boards cover more than one local authority area—that facility must be in place if integration is to be successful. The BMA gives as an example the NHS Greater Glasgow and Clyde area, but the same applies in my region, where NHS Grampian covers the Aberdeen City Council, Aberdeenshire Council and Moray Council areas.

The Government's decision to allow in the legislation for ministers to consider applications where more than one council wishes to join a partnership is to be welcomed. It would also allow for any future changes in health board or local authority boundaries.

It is proposed that the legislation will allow voting rights only to statutory members of local health and care partnership committees and for councils and health boards to have parity of voting power. That is fine, but some consultees were unhappy with those proposals. The Health and Social Care Alliance Scotland and third sector organisations made a case for service users and carer representatives to be voting members as well. That issue can be probed further when the bill comes before committee, and I have no doubt that we will receive further representations then.

The legislation will ensure that health and social care partnerships are accountable to full councils and health boards, not only council leaders and board chairmen, which should satisfy a number of concerns.

The committee membership of HSCPs is of significant concern to the BMA and the clinicians whom it represents, particularly GPs, who have an enormous role to play in ensuring proper integrated care for patients. The BMA feels that membership of the HSCP committees, as set out in the consultation, is significantly management oriented, and its membership would welcome a

stronger role for doctors who are appointed to positions on those committees.

GPs and consultants shied away from community health partnerships because they were largely management run and bureaucratic. I recall my GP husband saying that they were too large and too management focused to make primary care professionals feel that their contribution would be heeded and valued. That issue must be addressed if the new HSCPs are to get the support of clinicians, which is important to the success of integration.

I am content with the general principles that underlie the Government's motion for the debate as a foundation on which the forthcoming legislation will be built. I look forward to seeing how they are translated into the bill, which will soon be introduced to the Parliament.

15:18

Aileen McLeod (South Scotland) (SNP): I welcome the opportunity to speak in the debate on a policy area that will be important to the way in which we deliver health and social care in the future. I also look forward to the detailed scrutiny of the bill by the Parliament, particularly as I am a member of the Health and Sport Committee.

The cabinet secretary has already outlined some of the demographic challenges that face Scotland. There are areas of the country, such as Dumfries and Galloway, where the demographic trends towards a rising population of older people and a falling population of people of working age and children already outstrip the national figures. When those challenges are combined with the challenges of delivering high-quality health and social care in a largely rural environment, with many remote settlements, it is clear that change in the way in which we plan and deliver care is needed.

Of course, the agenda is not only about delivering integrated care for our older people, although that is a worthy prize. Integration will also bring benefits for adults with multiple or complex conditions, as well as for those who live with long-term conditions.

The system has become complicated and sometimes disjointed. It needs to be fully integrated, and the needs of the patient, rather than concerns about operational or corporate demarcation lines, need to be put first.

I think that it is fair to emphasise that professionals who provide front-line care are already trying to carry out as much integration as they can. I recently visited Kirkcudbright community hospital, which occupies the same building as the GP surgery. The hospital deals

primarily with discharges from the regional general hospital in Dumfries, and the local GPs—who are often the patients' own family doctors—work closely with social services to smooth the transition from hospital back home and to put in place any continuing support that may be required. To me, that is an example of integration working already.

Last week, I visited the Galloway community hospital in Stranraer, which is an altogether larger facility. Both hospitals have renal units, which enable patients to benefit from the three sessions of dialysis that they need every week without having to make the very lengthy journeys that they previously had to make to Dumfries. Both hospitals also provide services that match the specific needs and priorities of the local communities that they serve.

In my view, the delivery of services closest to where people need them will be crucial to the success of integration. On both visits, I was struck by the enthusiasm that NHS staff and GPs have for the policy, which is a logical extension of the clinical practices that I have described. I believe that firm foundations already exist in Dumfries and Galloway. The forthcoming bill is intended to build on those firm foundations and to strengthen good practice by empowering front-line staff to deliver the better health outcomes that we seek.

Prevention and anticipation must be at the heart of the integration policy. Integration is as much about helping people to avoid being admitted to hospital as it is about managing their return home. The Christie commission demonstrated that although everyone understood the importance of preventative spending, as a country we had not come to grips with the changes that that agenda demands.

The Government has made it clear that its approach to legislation will be permissive rather than restrictive and that it will enable organisations to work together to take down barriers and build on the good practice that already exists. In my view, that collaborative approach must include the third and independent sectors in the design and planning of services.

I know that, this morning, Dumfries and Galloway's community health and social care partnership board took important decisions to move the integration agenda forward for the region. The willingness to embrace integration that I have seen on the front line is shared by the senior management and elected members of Dumfries and Galloway Council and the local NHS board. Those decisions include the decision to include representatives of the third and independent sectors on the project board that will take forward the detailed work on integration.

I believe that the participation of the third and independent sectors in the development and implementation of integration is important. Both are delivery partners with the public sector and sources of experience and expertise that will add materially to the quality of the eventual outcome. I hope that the bill will make clear the role that the third and independent sectors will play in shaping the whole process.

I believe that the integration of adult health and social care is an exciting and important policy that has the capacity to dramatically improve the way in which we provide adult health and social care. It has the potential to deliver meaningful preventative measures and to support older people and those with complex or multiple conditions to live well in their own homes. Although I accept that there will be challenges ahead in delivering such an ambitious agenda, I believe that working together locally, nationally, professionally and politically will enable us to improve the health and wellbeing of our nation and will help us to tackle the health inequalities that exist in our local communities.

I support Alex Neil's Government motion.

15:23

Jayne Baxter (Mid Scotland and Fife) (Lab): I should begin by declaring an interest: I am an elected member of Fife Council where—the cabinet secretary will be pleased to hear—we have had a health and social care partnership for a number of years. It is already delivering a number of co-located and co-ordinated services for the benefit of the people of Fife.

The Deputy Presiding Officer: Excuse me. I am sorry, but would you move your microphone round slightly?

Jayne Baxter: Is that better?

The Deputy Presiding Officer: That is great, thank you.

Jayne Baxter: The integration of health and social care services is a priority for the Scottish Labour Party and has been for some time. Although opinions vary across the chamber about how the integration will work, I am pleased that we are discussing a principle in which we all believe. I hope that the debate will be constructive, that the cabinet secretary will listen to what is said and that we can work together to produce legislation that we can all be proud of and which will deliver for Scottish people.

What is the debate about if it is not about the power of working together to deliver meaningful outcomes? It is crucial that the legislation goes beyond the headline, the superficial and the superstructure. It must deliver long-term and

fundamental change. When we talk about change, we must recognise that we are talking not only about organisational change but about an enormous change in the culture of the delivery of health and social care services.

The delivery of care should not be a tug-of-war between health boards and councils, but the proposals simply do not address that issue. Integration goes beyond co-operation and co-ordination of autonomous bodies. True integration is about softening boundaries and the emergence of a new work unit. That is possible only when we recognise how tensions arise and when boundaries become lines of defence.

The lines of accountability need to be local and clear. That leaves local authorities well placed to take a lead role in health and social care partnerships. The cabinet secretary already monitors local authority delivery of single outcome agreements, and Healthcare Improvement Scotland and Social Care and Social Work Improvement Scotland should have a continuing role.

Health boards and councils face increasingly difficult financial conditions, which must be addressed before legislation is implemented. By its nature, any budget places limits on a service, so it is essential that all parties work together as part of an integrated care service to solve local problems. We must ensure that the right framework is in place to allow them to do that as equal partners.

The proposals as they stand will inevitably create tensions and pressures between health boards and councils. We have seen examples of that in Fife, where unseemly and undignified arguments have taken place between the health board and the council about who should fund the care places that will free up hospital beds. That is why we support direct Scottish Government funding for health and social care partnerships, for service users' needs should be at the core of the reorganisation. We must start with the service user and work upwards to provide a framework that supports them best. My worry is that the proposals focus too much on formulating a superstructure at the macro level and not enough on the individual user's needs. That has serious implications for delivery at the service level.

People need accountable, clear and truly integrated care services. They need responsive services in which the professionals who support them work together to build local networks, knowledge and continuity of care. It is critical that, through integration, the emphasis is on health and wellbeing, not sickness.

Most healthcare is delivered outside the hospital setting, so I am pleased that the proposals provide

scope for local partners to ensure that we approach health and care holistically. That recognises that health and care are not just about acute services and treatment but about life circumstances, prevention and early intervention.

In addition to broadening out integration to all adults and other groups, the proposals allow local partners to ensure that policy areas such as housing and transport are part of the bigger picture. I hope that we can ensure that such holistic thinking is part of the new culture of care. The time of compartmentalised service provision must end. I know that that will take years and will go beyond our tenure in Parliament. However, it is important that we get the legislative framework right, right now.

General practitioners, third sector organisations, allied health professionals, front-line staff, patients and service users must be part of the decision making for integration to work, and decision making must be clear and coherent. Beyond ensuring that we get the structural aspects of integration right, the difficulty of merging cultures lingers. It will take strong leadership and a secure framework that provides the right environment to engender a new work culture. I am not convinced that the proposals will deliver that for the Scottish people. I repeat my hope that we can work with the Government to improve the legislation.

I have concerns about the proposals, but I remain hopeful that we can get them right. We have the opportunity to offer the Scottish people true integration that is properly and constructively financed, clearly managed and fully accountable at a local level. I hope that we take it.

The Deputy Presiding Officer: I am not keen to interrupt members' speeches, so if everyone who is to speak in the debate could ensure that their microphone is pointing in the right direction, I would be most grateful.

15:29

Gil Paterson (Clydebank and Milngavie) (SNP): This week has been a health week in the Parliament—there was another health debate yesterday. That is good, because health is an important matter. I would like to see this happening more frequently—perhaps we could put it in the calendar annually. As a member of the Health and Sport Committee, I welcome the opportunity to speak in the debate.

It is taken as read that both health and social care are of immense importance to the Scottish Government and the Scottish Parliament and that, in their own ways, they both provide vital services for communities across the country. As regards the present operational delivery of services to the community, we cannot say either that health and

social care are working completely separately from each other or that they are working completely together. It would be wrong to say either, so the Government's attempt to bring together health and social care to deliver even better outcomes for our people is to be welcomed.

With budgets under pressure, there is an added incentive to find ways to do a better job for more people with the same resources. It is a goal worth striving for. To achieve that goal, we need everyone to pull together and, in my view, third sector involvement is key to bringing about that success.

There is a high level of experience in the third and private sectors when dealing with health and social care and we must do everything we can to learn from that experience and put it to good use. As well as experience, the third sector brings a different perspective on health and social care. It is able to look at those services from a user's viewpoint, which is of fundamental importance when mapping out how best to offer best practice for patients and families alike.

Without third sector participation, integration will not work as we want it to, at the highest level, so I commend the Scottish Government for its continued dialogue with the organisations that are at the coalface. The integration of health and social care is of the utmost importance and I am pleased that the Scottish Government is showing the leadership that is required to achieve it.

That leadership is shown when we look at the policy of single budgets. It is the norm for any organisation, private or otherwise, no matter the size, to be precious about its budget and to spend it only in areas over which it has direct influence or responsibility. A unified budget means that there are no artificial barriers either practically or in people's minds. That is the single biggest initiative in the proposal that leads to me to believe that this integration will be a success, as it gives each sector equal responsibility.

As our people live longer, the services that they require will become more complex; having two separate systems will not meet their expectations or provide the services that they require. A larger, combined budget—in contrast to two smaller budgets—will allow clinicians, care professionals and health managers to rise to those challenges with the necessary funding. It will also lead to achieving agreed health and social care outcomes while putting an end to the practice of cost shunting between the NHS and local government.

Away from the financial aspects, it makes sense for health and social care to be integrated. I am pleased that this is about integration of services and that the Government is clear that it is not about structural changes—staff in both sectors will

be able to continue to use their expertise. I am also pleased that a massive transfer of staff between employers is neither sought nor desired, which will be of great comfort to those involved and ensure a smooth transition.

Where there is an overlap between health and social care, integration is the most practical way to deliver a service that has people at its centre. Individuals, their carers and family members will benefit most from that integration, which is the basis for the change. Ensuring a successful integration will be hugely challenging but greatly rewarding.

I feel that we have the right leadership and that we will carry out the changes. Those who use the services will benefit the most. I am also sure that there will be tough decisions to be made in future, for health and for social care. I look forward to the Government introducing the proposed bill for Parliament's consideration, as a way of making the number of tough decisions that bit smaller. I commend the motion in the name of Alex Neil to the Parliament.

The Deputy Presiding Officer (John Scott): I call Duncan McNeil, to be followed by Bob Doris. I draw members' attention to the fact that there is adequate time for interventions, and even loquaciousness.

15:35

Duncan McNeil (Greenock and Inverclyde) (Lab): The good news is that we are living longer; the bad news is that old age does not come alone and those extra years are not always healthy ones. Men and women can commonly expect to spend, respectively, about seven and nine years in poor health. Scotland's national dementia strategy tells us that approximately 71,000 people in Scotland have dementia and that the figure is likely to double in the next 25 years. On Tuesday, the Finance Committee was the latest parliamentary committee to highlight the significant demographic change, which the Office for Budget Responsibility has identified as the key source of long-term pressure on public finances.

Local authorities, which are contending with increased demand and less money, and health services, which are having to deal with and manage unplanned admissions, clearly need no reminding of the task or the situation that we face. Despite the recognition of the challenge of delivering health and care services at a time of rising demand and reduced finances, despite the work of committees of the Parliament—through my convenership of the former Local Government and Communities Committee and the Health and Sport Committee I, like others, have been on the case for a considerable time—and despite the work of

Beveridge and Christie, and the Government and others, progress has been slow and patchy.

It is good that we have arrived at the current point, because we cannot continue as we are. It is important that we move forward and instigate significant cultural change in the delivery of services. If we are to address the huge challenges that are to come, as the cabinet secretary recognises, the integration of health and social care must be at the heart of that change. However, as he knows and has referred to today, the barriers are significant. Reform of public services is difficult. If it were easy, we would have done it.

It is worth recognising that sustained cultural change can be achieved best through working in co-operation, however difficult that can sometimes be. If we are to achieve change, it cannot be seen to be done simply because of financial pressures. The truth is that we should have been doing this many years ago when there was more money. The objective is to improve services, and we must be careful not to lose the focus on that. As we have seen with self-directed support, change cannot be perceived as a cheap option. If the major budget holders—the Government, the health service and local authorities—are still wrestling with one another and do not trust one another to share or shift budgets, is it any wonder that the minor parties in the process, the third and independent sectors, feel put upon, as my Health and Sport Committee colleague Aileen McLeod referred to?

That tension seeps into the workforce and into public perception. People are sometimes fearful about change and think that the process will lead to a decline in standards or working conditions. Although the Health and Sport Committee of course wants the focus to be on putting the person first—we all agree on that—we need to address such fears and concerns.

We have had the current national care standards for 10 years. Before the bill is introduced, we need to produce a new set of national care standards, which has human rights at its heart, to reassure all the people who use and work in the health service that the main objective of the integration process and the bill is to maintain and improve the services that we provide.

We need to ensure that we have good regulation when those rights are established. If we are to ensure that rights and standards are properly implemented, maintained and monitored, it is essential that we bring together and properly resource and fund the care inspectorate and Healthcare Improvement Scotland.

We must deal honestly with a commissioning and procurement process that is predatory and causes great mistrust and pain in the third sector, where we see people shuffling along their problems. It is unfortunate that the process is often regarded not as improving services and efficiency but as a crude attempt to drive down costs at the expense of quality. Committees of the Parliament have dealt with some of the worst excesses during the past few years.

If we are saying that the integration of health and social care is the most important issue, we cannot ignore workforce planning in the area. The people who work in the area deserve and must have our respect. The status of the existing and newly emerging workforce, which is essential to delivery, must be recognised, and the sector must be offered training and at least the living wage.

Only if we address those issues can we have a successful process that improves efficiency and quality of delivery of public services to our most vulnerable people. If we address some of the issues before we introduce the bill or alongside it, the process will be easier. If the cabinet secretary is up for revolutionary change and wants to be radical, he will have my support.

15:43

Bob Doris (Glasgow) (SNP): I commend Duncan McNeil for his speech, which was thoughtful. I did not agree with everything that he said, but I absolutely agree with much of what he said, which was testament to the work that we did in the Local Government and Communities Committee in the previous session of the Parliament and the work that we are currently doing in the Health and Sport Committee. Committees have served the Parliament well in taking things forward in conjunction with the Government.

I am delighted to speak in a debate that ain't the debate that we had yesterday. Many members who are here took part in yesterday's debate, which did not cover the Parliament in glory—I see that Jackie Baillie is muttering, and perhaps we should both reflect on the tone of that debate. The tone of today's debate is much better and the Parliament is the better served for that.

There are, however, strong links between the two debates. Why are accident and emergency units getting busier? Why do more people need a hospital procedure? Part of the answer is about demographic change, but it is also about getting things right in the community, through preventative spend. There are things that can be done quite easily in communities to reduce slips, trips and falls among older people, for example, which would drastically reduce the number of people

who turn up at A and E or who need a hospital stay. We need to integrate and co-ordinate strategy for matters such as care at home and prevention work, to reduce presentations to hospital and ensure that people can be treated in the community.

We also need appropriate discharges from hospital. I do not like to use the terms “delayed discharge” or “bed blocking”, because I do not want discharges to be quick or slow. I want people to be discharged from hospital at a time that suits their care and medical needs—their discharge should be neither fast nor slow, but appropriate. We all need to reflect on that.

That approach needs a single accountable officer, so that the buck cannot be passed on getting the strategy right, and there have to be clear lines of accountability. There is of course a core role for local authorities in that. However, some of Ms Baillie's comments make it sound as if local authorities should have a dominant role, which would be the wrong approach.

Jackie Baillie: Will the member take an intervention?

Bob Doris: I will make this point first. I will let Ms Baillie in, assuming that I get a little bit of additional time, which would be welcome, Presiding Officer.

In our report on this subject, the Health and Sport Committee said:

“The Committee acknowledges the findings of Audit Scotland that governance and accountability arrangements for CHPs have been ‘complex’ and ‘not always clear’. The Committee therefore welcomes the Scottish Government’s proposal for a clear line of accountability to rest with a single individual for each health and social care partnership. The Committee also considers it essential that the governance arrangements for each local partnership should retain strong links with local government through representation of councillors on partnership boards.”

Local authorities should have a clear core role, but not a dominant one. Of course, local authorities are democratically elected bodies, but I say gently to some of my Labour colleagues that saying, “Just leave it to the council,” results in a shiver of fear running through Glaswegians, given what is happening in Glasgow, particularly regarding protecting the most vulnerable. Just yesterday, three day care centres were earmarked for closure without there having been any proper consultation with the community. I needed to raise that point; had I not done so, vulnerable people in Glasgow would think that I had betrayed them.

We have heard a lot about national care standards and Duncan McNeil made some important points. I ask the Labour Party to reflect on the use of expressions such as “postcode lottery”. In its report, the committee said that it

“welcomes the intention of the Scottish Government to provide flexibility within a legislative framework which will prescribe minimum standards.”

We absolutely need core minimum enforceable standards, but we must ensure that minimum standards do not become the extent of our aspirations. We must ensure that local health boards and local authorities can, if they decide, invest more money and go beyond a basic minimum standard. That is my issue with the Labour Party wanting to take local democracy away from the system and leave minimum standards as the only standards that people receive. There is a threat to local democracy in that.

Taking forward this agenda will need significant service redesign. I agree with Duncan McNeil that we should do that to improve the outcomes for all people in society, irrespective of the demographic challenges and the financial situation. However, those two things are clearly drivers for change.

The point has been made that when we redesign services, the voluntary and third sector should be seen as an equal partner. There is a fear that if local authorities and health boards come to the table with millions and millions of pounds, the third sector will find itself squeezed out of service redesign and the commissioning process, which often looks at what parties can bring to the table, rather than what they can do for the people most in need in our society.

I will use some of the time that I have left to mention a couple of excellent projects. The good morning project in Glasgow—sorry, Presiding Officer, do I have time to let Ms Baillie in?

The Deputy Presiding Officer: No.

Bob Doris: I apologise for not having time to let Ms Baillie in, but she will find that it is far more important that we talk about the good morning project in north Glasgow. It gives hundreds of older people in the community a friendly telephone call in the morning, to provide them with the support and reassurance they need to sustain their tenancy and place in society. The call is also to make sure that they are not lonely or isolated and that they can live happy, healthy and productive lives. It is an innovative way to keep our older people happy.

There is also South Lanarkshire's hands-on project in Cambuslang, which the minister and I visited, and which includes a handyman service and a befriending service. Those are innovative ways of redesigning services to support older people within the community.

Rather than the good morning project, the hands-on project and the hundreds of projects around the country looking to a fragmented funding system to keep their projects going from

one year to the next, it would be good if, with health and social care integration, they had a seat at the table and got some secure core funding, and a core, secure, long-term strategy for health and social care provision. It is a shame that we need the forthcoming bill to deliver that, but we do, and I thoroughly welcome it.

15:50

Iain Gray (East Lothian) (Lab): Last year, the then outgoing Auditor General for Scotland, Bob Black, audited the joint commissioning of social care by the NHS and local government. He called it one of the most significant performance audits that he had ever prepared, for two reasons. The first was the demographic change to which many members have referred. Bob Black pointed to a projected 147 per cent rise in the number of people aged over 85 in the next 25 years. The second reason was that it was because he had audited those services six times in 12 years and could find little evidence of any significant improvement. Of 32 councils, only 11 had any strategy at all for the joint commissioning of social care. Only four even considered demographic change and only one strategy was more than short term. Audit Scotland struggled to find any good joint planning underpinned by an understanding of the shared resources available.

The report also showed that, for the first time, the majority of care at home and in residential settings is now delivered by neither the NHS nor councils but by myriad private, independent or third sector providers. So what? So, an elderly lady, struggling to stay home, has daily care assessed by the council, but delivered by an agency that sends different carers every week. Her bath is provided by an NHS service, but not the GP surgery that she knows well. Meanwhile, her shopping service comes from a different department of the council. The highlight of her week is when someone visits her to take her out for a short walk, which is the responsibility of a local voluntary organisation. When one of them fails to turn up, she does not know who to call. Whoever she does call knows nothing. When she goes into hospital, as happens every so often, all those services are removed and every one of them has to be reinstated when she comes out. Sometimes that takes weeks or months, dozens of phone calls and a bewildering array of highly paid professionals. Some basic needs, such as nail cutting, turn out to be no one's responsibility.

That is my family's lived experience of the care system for an elderly aunt, but it is not unique and it is why we need integration. I have seen the capacity of the NHS and local councils to agree the need but resist the change. It is 13 years since, as a health minister, I got them to promise

that they would pool budgets through joint future committees. Thirteen years on, the joint future committees are still there and so are the separate budgets. I hope that I can be forgiven if I am a little more sceptical than some colleagues about the willingness to change. It is informed by experience.

The Government's proposals are in danger of becoming as complex and convoluted as the care system that they seek to reform. We are to have

"body corporate models of financial integration"

unless there is an agreed "delegation between partners" arrangement. There will be integrated resource frameworks and a non-hierarchical relationship between community planning partnerships and HSCPs. I do not know what that means. Accountability will be to NHS boards and local authorities—because that is working really well—and we can have confidence in all that because of single outcome agreements, which is nice; most of us had assumed that they had died a death a long time ago.

That adds up to a committee in which the NHS and the councils will argue forever about how much of their budgets they are willing to share. The consultation shows that they are already arguing about their voting rights and dispute resolution procedures. For all that I know, they are arguing over where they will sit and whose turn it is to bring the biscuits; they are not arguing about the care standards that we need.

We are in danger of paying senior professionals serious salaries to sit in endless meetings looking after their own budgets while the looking after of people is being done by a minimum-wage workforce in 10-minute care visits, with no time allowed between clients and with orders not to waste time speaking to them. Even that parody of care will be available only to those who are assessed as being in critical need.

I believe that the cabinet secretary is absolutely sincere in his desire for the integration revolution that he described. Like him, I think it is a revolution that we need. It is not too late to use this opportunity to deliver it. He can create a proper, formula-based, local, integrated budget so that the local negotiation is about delivery and not the share of budgets. He can legislate for a clear single line of accountability through democratically elected councillors who are answerable to their communities. He can insist on clear basic standards such as giving users and carers a single point of contact to manage all their care. What could be simpler?

The cabinet secretary can do those things if he is willing to show the leadership that he talked about and to call time on the vested interests on all sides of this debate. He can then create a care

service on which our elderly and disabled citizens can depend and of which we can all be proud. If we do not do that, our successors will be back here in 13 years' time, doing this all over again.

15:57

George Adam (Paisley) (SNP): I welcome this debate and the serious, constructive tone of the speeches so far. The subject is too important for us not to treat it with such respect.

I welcome the proposed bill, given the need for the integration of health and social care. I believe that a society is judged on how it cares for, helps and supports its older people, the vulnerable and those with long-term conditions. The bill focuses on that.

I appreciate the cabinet secretary's explanation of the lengths to which the Scottish Government has gone regarding engagement with health and social care professionals and users, given that we must get the bill on this important issue correct first time.

The changing shape of Scotland's society, with an ageing population, is a challenge that we have all had to face for a number of years. When I was a member of the scrutiny board on Renfrewshire Council, one of the first things that we discussed was the challenge of demographic change and how we could deliver services. I know that other local authorities have looked at that as well.

As the cabinet secretary quite rightly said, many councils and other organisations are working together towards the joint goal of ensuring that they can deliver for people in our communities.

The most important part of the bill is the focus on improving outcomes for families and carers in our community. At the end of the day, we are dealing with people's lives. As elected members, we have all heard stories of situations in which the system has not worked. We have to make sure that the system is seamless.

The cabinet secretary is correct that public agencies and organisations must share the challenge, work together and move away from silos in their management ideas. I have experienced that in relation to my wife with her long-term conditions and in relation to constituents who have had difficulties accessing the services that they need.

During my time in local government, I developed a great belief in the work that social workers do in our communities. As a councillor, I saw what social workers did, particularly with older people, but also with the other groups that they deal with.

One of the stories that I was involved with simply involved an older man who was, in effect,

going home to die. He and his wife were both in their 80s. We could not get the care package in place to get the elderly gentleman home and his wife was extremely worried about that. It took a phone call from me to the social work services to get that done. For me, that is the difference with social work at a local level. As an elected member, I can contact the council's social work department and get something done, whereas it can be rather difficult to get the health boards to do something similar. If I asked the local health board, things would be even more difficult.

One in 12 people uses social work services at some point in their life. The social work departments in our councils protect children and support people with mental health issues, addictions and learning disabilities. Let us not forget the role of social work departments and their accountability to local communities. The successes of the services that social care staff offer and their commitment in working in very challenging situations must be recognised. Many social care staff are driven to help and work beyond the call of duty to protect and care for vulnerable people in our communities. Integration must take all that into account. Front-line staff will be the key to making integrated services a practical reality and it is the skilled staff in health and social care who will deliver the results that we all want.

Leadership and management will be needed. Effective, robust and innovative leadership at all levels will be central to the success of the transformation programme. In particular, it will be crucial to have a clear focus on putting leadership by social workers, care professionals and clinicians at the heart of all integrated health service delivery.

As the cabinet secretary said, we must move away from organisational silos, but we must retain the services that work. I welcome the idea that the bill will deliver outcomes for the individual, the family or the client. The local delivery of integration is extremely important, and ensuring that there is accountability is equally important—a jointly accountable officer will help that. Obviously, they will work with the health board and social work services in local councils and bridge the gap between the health board and the local authority. NHS and social care staff have to deliver the integration, and we must ensure that they buy in and work with us on that, and that we use all their talents.

Change is not new to people in local government and social work. Social work services have operated in an integrated manner across the range of needs in our communities, and integration has been a particular strength for Scottish social services over the past 40 years.

We need to tap into the practical professionalism and expertise that exist. The integration of health and social care is a radical new way of working for our health and social care professionals, but we need to ensure that the expertise of local social work departments and health experts across Scotland is not forgotten. As the cabinet secretary said, many partner organisations are working in that way already. We must ensure that they continue to work in that way.

Let us hope, as Iain Gray has said, that we do not come back here in 20 years' time and have the same conversation.

16:03

Jim Hume (South Scotland) (LD): The need to integrate health and social care in Scotland has been on the agenda for some time. I welcome the consultation results, and note that the Government intends to introduce a bill this year. I remind everyone that that was also in the Liberal Democrat manifesto. Indeed, we could argue that the bill should have been introduced long ago, when beds were reduced for more care at home, because it could have been argued that systems for caring at home were not fully in place for that step change.

Without doubt, the existing system contains overlaps in the responsibilities of health boards, local authorities and, of course, care services. It is also worth noting that the organisations have different ways of working, different cultures and, almost, different languages, so there may be barriers to integrating. However, we want outcomes, and I am sure that the forthcoming bill will have the potential to iron out any differences in organisations' methods. I hope that it will address those differences, bridge the gaps and lead to even better provision for patients and service users who require the services, and to more individuals staying in their homes for treatment—when that is appropriate, of course.

Once the bill is introduced, if it does what it says on the tin it will get our support. That support will be conditional of course, and I shall keep a close eye on whether local decision making is protected. We would oppose any centralisation in the form of a national care service. To make integration work, we need local accountability. In fact, I would go further: it is essential that throughout the bill's progress and in the changes that it will make for our constituents, patients are treated as equal and active partners in decision making and planning.

Integration of health and social care will not be easy; the representations that we have received echo that point. It is important to note that housing associations have an important role to play, given that 85 per cent of very sheltered and extra-care

homes are run by housing associations, and that it is estimated that the demand for that service will increase. As I have said, keeping people in their homes when that is appropriate has great benefits, and the use of adaptations is essential for that to happen. Research shows that adaptations are good value for public money, too, with an estimated £4 saved for every £1 spent. They are an excellent example of preventative spend, on which we need to focus more.

The consultation reported on the role of a jointly accountable officer. Some people believe that that responsibility should lie jointly with local authority chief executives, health boards and health partnerships. The cabinet secretary referred to the matter, but it is worth noting again that there are often several local authorities within one health board area. I am glad that the cabinet secretary acknowledged that point; it will be interesting to see how he addresses it in the future. Governance in that regard can be cumbersome, so we will keep an eye on it.

The consultation highlighted general agreement that the jointly accountable officer must have gravitas and a wide skills base. The person who will have overall responsibility for delivery of integrating health and social care must have a good skills base, so we should look to deliver the changes with the help of people who have experience of joint working. I am thinking particularly of allied health professionals, who have a track record on medical versus social views on different ways of delivering joint services, are experts on rehabilitation and reablement, with knowledge from around 12 professions, and are already in post. As part of his deliberations, I would like the cabinet secretary's view on representation from allied health professions as part of the development of national policy and regulation in the integration of health and social care services.

There is no doubt that there will be increased demand on our health and social care services, given that we have an ageing population and limited public resources. We shall all call on those services in the not-too-distant future unfortunately, and we all know of family and friends who have already done so. We must ensure that the services can meet needs in the 21st century.

There are good examples of partnership working across Scotland, mainly at organisation level. We now need to concentrate more on delivery of first-class services for our patients and users. We need a system in which people do not fall between different organisations' responsibilities—for example, clearing a bed in hospital only places the burden of responsibility for a person on a local authority or extra-care home.

Addressing such issues must be part of the joined-up thinking of the future.

I welcome the results of the consultation. The Liberal Democrats will follow the bill's progress and hope for better integration of services, with local accountability protected.

The Deputy Presiding Officer: I call James Dornan, to be followed by John Pentland. There is time for extensive debate and interventions, should members wish it.

16:08

James Dornan (Glasgow Cathcart) (SNP): I thank you for that reminder, Presiding Officer, just before I got up to speak.

Like most others, I welcome the Government's plans to integrate health and social care. I am confident that the bill will help bring together the best that the NHS and local authorities, along with third sector and independent bodies, have to offer to make life that bit better and to make treatment much more streamlined for those of us who will need it at some time in our lives. I suspect that, as Jim Hume just said, that time is nearer for some of us than it is for others.

It is great to see the support from organisations such as the independent living movement, which speaks on behalf of the independent living in Scotland project, the Scottish Government's self-directed support Scotland initiative, and Inclusion Scotland and agrees that disabled people must be at the heart of the decision-making process. I am delighted that there will be a strengthened role for the third and independent sectors in planning and delivery of services.

The movement's five asks are that the bill should support independent living, citizenship and human rights; that disabled people be considered and supported as key stakeholders and co-producers in the delivery and development of the bill; that disabled people should be involved in leading on principles and on how money is spent; that the bill should support and promote self-directed support in the community on leaving hospital; and that the bill should not entrench existing inequalities. Those are all reasonable requests and it is clear from the cabinet secretary's opening remarks that careful consideration is already being given to them.

I agree with the British Medical Association that effective health and social care partnerships have the potential to reduce duplication, to ensure that appropriate care is delivered at the right time to the right people in the right place, and genuinely to break down some of the unhelpful barriers that exist between health and social care. I cannot see

how we can do that without the integration that is envisaged in the bill.

I have experience of working in an environment that is similar to what is envisaged in the bill, so I have seen the benefits of such a structure. In my time as a councillor, one of my most fulfilling roles was as a member of the Glasgow south-east community health and care partnership, which covered Glasgow Cathcart and Glasgow Govan constituencies, both of which include areas where there are huge problems and challenges.

I will not deny that there were, when I joined the partnership, tensions between people from the health board and people from the local authority at committee level and—as we heard from practitioners and other front-line staff—in offices across the city. That was understandable; after all, we were asking people to rethink how they worked and to take into their consideration people from other services who had different work practices and, to some extent, different priorities.

However, there was a commitment among most members of the CHCP to make it a success, and through hard work and commitment—driven by the human dynamo that is Cathy Cowan, whom many members know—things started to turn around. There were a number of staff away days—or greeting sessions, as they were called—at which people got to quiz directors about the reasoning and direction of the CHCP, and to voice general concerns, and at which they got straight answers from the directors who were present. There was great interaction with representatives of the users of the service and meetings were held in public.

Things were turning around, and we began to see a real change in attitude. That was not so much on the part of the board—its attitude was already correct, in the main—but on the parts of the workforce and the users. Staff began to see the benefits of having someone from a related service across the room from them, or just down the hall, and users could see that the system was working with regard to, for example, home care for the elderly. Some of the work to alleviate bedblocking was really encouraging and the work on addictions was showing particularly good outcomes.

However, as soon as the suggestion of devolving powers and, in particular, funds to the CHCP reared its ugly head, the shutters came up and all the head honchos moved into their silos. That is why I am supportive of the bill and why I think that it is—unfortunately, as Bob Doris said—necessary. Intentions might be good and results on the ground might be great, but when it comes to institutions sharing some of their power, none of that seems to account for anything. Therefore, legislation is undoubtedly required.

That is also why I am disappointed with Labour's amendment. I had to go and rewrite my speech today because I was going to speak about positive outcomes from the eventual bill and my experiences in the CHCP, but I do not think that we can let the amendment go by unnoticed. We should expect an attack on the Scottish Government in an amendment, no matter what the subject is that is being debated. That is fine; that is politics. However, the amendment is more than that. It is clear that, again, instead of looking for what is best for the people of Scotland, Labour is doing the work of what it considers to be its last bulwark of support: Labour-run local authorities. In this case, as it is so often, the authority in question is Glasgow City Council.

I was there when Labour-run Glasgow City Council reneged on commitments to devolve funds to the CHCP, and it was that intransigence that eventually brought about the demise of the regional model in favour of a Glasgow-wide, Labour-controlled version, which was disbanded before it even got started. That was my shortest membership of any committee: I eventually got on it, but it was disbanded before its next meeting. That was quite an achievement.

Jackie Baillie: I am clearly missing something with regard to Mr Dornan's interpretation of our amendment. I suggest to him that the issue is not just for Labour councils, but is for SNP councils and every other council across Scotland.

Would Mr Dornan care to comment on the suggestion that executive directors of health boards should somehow be on the new integrated partnerships? Does he support a payroll vote?

James Dornan: Having been a councillor in Glasgow City Council, I have seen a payroll vote at work. I suggest that we have a jointly accountable officer, as per the proposals.

Labour's amendment mentions

"a strong role for local authorities",

but the main thrust of Jackie Baillie's opening speech was that it is important that local authorities have control. I have seen what happens in the biggest city in Scotland when the local authority has control of something that should be under joint control, and the people of Glasgow suffered for it. The CHCP that I was a part of was a huge success and would have gone on to much greater things. It was supported by everybody except Labour Glasgow councillors and executive directors, and they brought it to an end. Those are the facts. It was very unfortunate, and it is a shame that I am having to describe it in this debate, when we should be discussing the merits of CHCPs and not how to ensure that power stays with local authorities.

If members think that I am exaggerating—for the sake of the successful CHCP—about Labour's unwillingness to part with control, they should listen to the following comments in Glasgow City Council's response to the consultation. It states:

"The proposals are overly prescriptive on organisational arrangements."

That means, "We want to stay in control." It states:

"we consider the proposals as going too far in prescribing arrangements for partnerships".

That means, "We want to stay in control." It states:

"we would assert that the mechanisms for how these outcomes are met should be agreed locally."

This is what happened in Glasgow last time: nothing got done. As soon as we hit the slightest bump, Labour went into its silo and the whole thing fell apart.

In response to the question,

"Will joint accountability to Ministers and Local Authority Leaders provide the right balance of local democratic accountability and accountability to central government, for health and social care services?",

the council stated:

"No, councils are accountable to the electorate."

It is saying, "Within the five year period"—as it is just now—"we can let the CHCP go, close down daycare centres and do whatever else we want in the hope that people have forgotten about it by the time the election comes round." That is not in the best interests of the most vulnerable people in our society.

There is much at stake; some really good work was going on. George Adam talked about the work that the social workers were doing, and the amount of great close work between social workers and health board workers was fantastic. The problem lies not on the ground, but higher up. It is vital that we ensure that the forthcoming bill is passed.

As an aside, I know a doctor who works in Glasgow who says that she is terrified of what will happen if the local authority gets control, because she remembers what happened last time. She says that the money will end up going to pay for something else—something that is favoured by Glasgow City Council. It is vital that the work be taken out of the control of local authorities and that we have a jointly accountable officer. I look forward to the eventual bill being passed.

16:17

John Pentland (Motherwell and Wishaw) (Lab): The arguments for integration of health and social care have always been strong. Over the past 20-odd years there have been successive,

but not uniformly successful, attempts to move services in that direction, and each fresh attempt has encountered fresh obstacles. Too often, reforms are seen as an opportunity to pass on responsibility while retaining funding, which is always more tempting in an era of shrinking budgets. Partners have signed up to integration, but it is too easy for initiatives to be seen as solutions for one partner's immediate problems, such as bedblocking, without their being too concerned about how the solution works in practice.

It makes good financial sense to support people in the community—I have been told that it costs four times as much to support an in-patient—but financial gains should not come at the expense of the overall quality of services and support. That is difficult to avoid when local government is severely cash constrained. With real-terms cuts in central Government funding, an underfunded council tax freeze and few other sources of income for local government, something has to give, and it appears to me that the most vulnerable are among the biggest givers. They are faced with either losing services or paying for them.

As freedom of information evidence has shown, income generation does not come only from car parking and leisure charges. It is clear that social care charges have increased, and that the pattern of cuts and charges is uneven. We could even call it a postcode lottery. I congratulate councillors who have done their best to protect services while keeping charges down, and I lay the responsibility for their dilemma firmly and squarely with the Scottish Government.

That said, this is not just about budgets. The postcode lottery that is faced by Scotland's elderly and disabled people is exacerbated by the lack of a coherent and consistent strategy for care. We need clearer plans from the Scottish Government to address the demographic challenge that we face. We also need better funding for health and social care to meet the needs of the increasing numbers of service users.

We need to build consensus, which is difficult when the current situation pits partners against each other. We need to avoid service developments being held back by the people in power taking a narrow view of a service in a particular location, rather than recognising the best interests of the service users across an area. Cross-party support for better joined-up health and social care services is undermined by the current set-up, which fosters annual conflict.

However, by concentrating on structural reform at senior level in the organisations and by focusing on who controls budgets, the Scottish Government is neglecting questions about how to improve services on the ground—that is what I am told by

the people on the ground. Change should happen, but it needs to be driven by reviewing at local level what works well and what can be improved by integrating health and social care services. Local delivery needs a strengthened role for local authorities, not a diluted one. A fully integrated delivery structure should be led by local authorities and underpinned by legislation.

There should also be straightforward and direct Scottish Government funding to health and social care partnerships using an allocation system that is sensitive to local needs. It is significant that much of the current agenda is being driven by an attempt to prevent bedblocking, but bedblocking is not an issue in all areas so not all councils or health boards will start from the same base. The proposals as they stand are focused on structure, on which budgets are to be included and on who controls those budgets; they say little about the outcomes that need to be delivered.

Let me come to a conclusion. The cabinet secretary has said that this is a revolution, and Iain Gray has said that we must not wait for another 20 years. Let us provide the care that people expect to receive in an open and transparent system that supports delivery, with local health and social work organisations that can locally determine the best way to deliver outcomes. Let us get away from the current divide-and-rule tactics, which I do not think the cabinet secretary is trying to recreate. Instead, let us concentrate on creating a national care service that truly integrates health and social care services.

The Deputy Presiding Officer: I now call Mark McDonald, to whom I can give a generous seven minutes. This is a time for verbal virtuosity.

16:22

Mark McDonald (North East Scotland) (SNP): Gosh, Presiding Officer. How many times have I found myself being told at the end of a debate that I have three and a half minutes or two minutes or four minutes? Finally, there is a reward for patience. [*Interruption.*] Do not worry—this will be worth it.

One phrase in the Labour amendment really stuck out at me, about the need to

“avoid conflict between local authorities and NHS boards”.

That interests me, because in my speech I want to explore one example of what is happening in practice where the Labour Party has some control.

Yesterday, Aberdeen City Council voted to establish a local authority trading company for social care. Following previous votes on the business case at the full council, yesterday the council voted to take things one step further. That will involve the transfer of 750 staff, three care

homes and occupational therapy and rehabilitation services to the new arm's-length company, Bon Accord Care Ltd.

Indeed, the council has also found within itself funding for the new trading company. Although it was interesting to hear Jackie Baillie talk about the need for tough choices being driven by budgetary pressure, the leader of Aberdeen City Council announced at the budget-setting meeting in February that there would be no cuts in the council's budget. Clearly, that is due to, for example, a strong funding settlement from the Scottish Government and good stewardship of the council's finances by the previous administration.

It is interesting that a consultant has been hired as part of the establishment of the local authority trading company. The consultant will form part of the management team. Indeed, he is named as a director and sole shareholder in Bon Accord Care. The council will pay £42,800 for 12 weeks' work—a pro rata salary of £170,000 a year, which is more than the chief executive of Aberdeen City Council is paid.

When challenged about the expenditure, Len Ironside, the social care convener, said:

“These are the experts—they have set up these types of companies before.”

In effect, he is saying that it is because they are worth it. Many people in Aberdeen city would question whether the council should be spending that amount of money on a consultant to deliver social care services.

However, there are not only concerns there. Indeed, the chief executive of NHS Grampian, Richard Carey, has stated his concerns that the

“creation of the LATC does not prevent integration ... It does, however, restrict the range and nature of the partnership ... we have expressed concern to the council that the opportunities for integration to deliver best value through changing service delivery may be restricted. It is therefore not integration that is potentially at risk, but the ability of the eventual partnership to deliver the changes as required in reshaping care for older people ... The opportunity to look at innovative staffing models on a joint basis is severely restricted ... the LATC was described by the council as remaining ‘100% under council control but would compete in the marketplace, effectively selling services to people who can afford it and are willing to pay’. If there is an inability to recruit home care staff, the available hours of care should be directed towards those in most need, not those who can pay ... The ability to pool the budget and use resources flexibly across health and social care is impacted upon as the LATC plan involves issuing a 5-year contract for £26 million ... This will restrict the ability and flexibility of the partnership to reallocate resource to match the assessed needs of the population as described in the joint strategic commissioning plan. The flexibility normally associated with a contracting model of procurement is restricted ... Savings made or profits generated by the LATC shall either be redirected by the LATC to create other services ... or result in profits returned to the council ... It is difficult to visualise how this will enable

the integrated partnership to make the savings necessary to generate additional capacity to support the increasing number of older people in the local population ... integrated partnership will be required to create a strong ethos of partnership not only between the NHS and social work service but also with the third and independent care sectors. We are very aware of the concerns being expressed by both the third and independent care sectors of the competitive nature of the LATC, and this may have implications for the partnership."

Duncan McNeil: Mark McDonald promised that the extra time that he was given would be worth it. When will the member stop reading out the minutes of Aberdeen City Council and get to the good part of his speech?

Mark McDonald: That was not worth it.

I am not reading out the minutes of Aberdeen City Council; I am reading out the deep concerns that the chief executive of NHS Grampian has about the behaviour of Duncan McNeil's colleagues in administration in Aberdeen and the policies that they are pursuing. He would perhaps do well to pay attention to what Mr Carey has to say. In particular, let us listen to the response that was given by Willie Young, the finance convener of Aberdeen City Council, in response to Mr Carey's concerns, who said:

"I would say get off our lawn—I promise not to interfere with his business if he won't interfere in ours ... They are actively undermining us at each and every opportunity".

However, the only thing that is being undermined is the ability of health and social care integration in Aberdeen to deliver the best results for the people of Aberdeen.

Duncan McNeil: Will the member take an intervention?

Mark McDonald: No, no, no.

It is not only NHS Grampian that has concerns. Unison has said that it has

"grave concerns that this will result in an erosion in the terms, conditions and pension entitlements of our members, and a two tier workforce."

There are other examples of local authority trading companies but, unfortunately, we must look outwith Scotland, because the only example that exists in Scotland is the one in Aberdeen. Perhaps that ought to be instructive.

We can look at the situation in Barnet. A press release from Barnet Unison on 1 March said that despite the fact that staff were transferred under the Transfer of Undertakings (Protection of Employment) Regulations, just more than one year on

"170 staff will be presented with a redundancy consultation document".

That underlines what Unison in Aberdeen is saying about the situation leading to significant

challenges and potential risks for staff in the future.

However, that is not the only area in which there are issues in Aberdeen. My colleague Kevin Stewart wrote to the cabinet secretary in February about the emerging care crisis in the city, with 66 elderly and disabled who were assessed as requiring essential care but who were still on the waiting list for care from the council. The chief executive herself had to intervene in some cases.

SNP group councillors made attempts to get the council to convene a care summit, including through a motion from my colleague Councillor Jim Kiddie that the Labour-led council would not even consider.

Those developments are not a result of budgetary pressures, as Jackie Baillie claims; they are all about the political dogma of the Labour-led council. Labour in Aberdeen is using social care users as guinea pigs in a bizarre political experiment. It ought to think again.

16:30

Jackson Carlaw (West Scotland) (Con): What an exhilarating, zinging, thrilling extravaganza of an afternoon it has proved to be. Season ticket holders to such consensual events will know that my appreciation of the spectacle knows no bounds.

On Tuesday, we had a three-hour debate on the ageing demographic. This afternoon, we had the two-and-a-quarter-hour debate on the consequences of it. We have had five and a half hours about an ageing Scotland and, I have to say, in those five and a half hours, most of us aged ever so slightly in consequence.

When Jackie Baillie opened by saying that she was bringing the parliamentary week to a close with her speech, I wondered whether she knew something about proceedings that the rest of us did not and whether we would all be released immediately afterwards, but no—the debate continued. That is not to take away from its importance and the many speeches of note that were made during it.

We start from a policy to which all four major parties' manifestoes were committed at the previous Scottish election. It is genuinely a path forward to which we are all committed and that we all wish to succeed.

I wondered how Alex Neil would fill his 13 minutes. I do not know if even he was aware of what I am about to say but, while he was speaking, I thought that I would just glance over the Scottish Government's response to the consultation only to find that I was following his

speech verbatim because large parts of it were printed in the document.

Alex Neil: It is consistency.

Jackson Carlaw: Well, I look to his civil servants to inject more flair and originality into his performances in the chamber, rather than having him read out documents that are in the public domain. That is not to take away from the importance and sense of all that was said.

Alex Neil referred to the 315 written responses, the public meetings and the participation in the consultation. He talked about a revolution. I looked around at the revolutionaries; “Hardly ‘Les Misérables’,” I thought but, nonetheless, there is commitment around the chamber and beyond to the huge effort of will that integration will require.

I will come to Iain Gray shortly because his speech was, for me, the key contribution of the afternoon. However, I was struck by the language in the early speeches: “radical”, “inclusive”, “delivery”, “service users”, “carers”, “governance”, “culture”, “vision” and “ambition”. That is the sort of corporate language that sometimes drowns out the good intentions that we are all trying to achieve.

Jackie Baillie talked about an ageing Scotland. I mentioned in Tuesday’s debate—some members who are present were not there, so it is worth saying—that the Parliament is a reflection of that because, when it first met in 1999, only eight members were 60 or older. By the end of this parliamentary session, 46 will be. That is a considerable change in the demographic of the Parliament—eight members in the first session, 15 in the second, 22 in the third and 46 in this session. Many of them were keen to contribute this afternoon.

We are dealing with an ageing Scotland. It was Bob Doris, I think, who said that most of us will be part of that within the next 20 years. However, it is not only in the next 20 years; today—here and now—the issue is pertinent.

Jackie Baillie made an important point about the fact that there are competing practices that must be merged. That is a theme throughout the debate. There will be a battle for somebody’s current practice and culture to prevail but, in fact, nobody’s culture and practice can be allowed to prevail if integration is to be successful.

I thought that Nanette Milne was correct when she talked about the importance of local priorities. Jim Hume touched on that. I will have to read his speech carefully, because I lost the plot at one point during it. I promise so to do. I think that he said that Scotland could sleep easy, because he would keep an eye on ensuring that local priorities

were respected. That will be fundamental to what happens.

Two speeches struck me, the first of which was Duncan McNeil’s. In it, he made two significant points. The first was a highly impassioned plea that we all remember that an improvement in services is at the heart of what we are trying to achieve and that that objective should not be lost. I think that he was advocating a charter of sorts to underpin that. His emphasis on the fact that an improvement in services was necessary is key. His second point was about workforce planning, and it leaked slightly into what Iain Gray talked about subsequently. It is terribly important that the people who are part of the workforce that deliver the integration that we are talking about are the right people in the right jobs who carry out the right functions at the right time and are suitably motivated to do that.

In between the speeches of Duncan McNeil and Iain Gray, we had a speech from Bob Doris. To borrow an old phrase, he did the crime, but didn’t do the time, in the sense that he took the extra minutes that were offered to him, but then did not give way as he had promised to do in return for the award of those extra minutes, and poor Jackie Baillie was left floundering. [*Laughter.*] That might not be the right description.

For me, the key speech was Iain Gray’s. I think that he illuminated the experience that we are all trying to legislate to change. I like the phrase

“agree the need but resist the change.”

In Tuesday’s debate on an ageing population, when I noted in the Finance Committee’s report the phrase

“dependent on significant cultural change”,

I said that I was not optimistic without being pessimistic, because the exigencies of today often get in the way of and stand against the radical and comprehensive change that is needed to prepare for the future. I am concerned about that.

I thought that Iain Gray made a powerful point when he talked about the language becoming corporate and complicated. We could get to a point at which the language is all-inclusive, in the sense that we are all included in not understanding what it is trying to say to us as efforts are made to deliver the change. Those pitfalls must be avoided. Iain Gray’s point that the discussions should be about delivery and not about the share of the budget was also a powerful one that registered with me.

Thereafter, we had some of the usual have-a-bit-of-a-bash-at-one-another contributions. I do not think that they were necessary. Notwithstanding that, the quote of the afternoon came from James Dornan. I took it down. He said:

"Having been a councillor in Glasgow City Council, I have seen a payroll vote at work."

I enjoyed that. As someone who has lived in Glasgow but who has never served there—I am a Conservative, after all—I have seen the payroll vote at work as well.

Let me get back to the point of the debate. It has been a debate on the response of the Government to the consultation. I hope that the Government is still open to listening even now that it has given its response. I was grateful to the cabinet secretary for his response to Nanette Milne on councils potentially coming together to work within a single partnership. I think that there are other areas in which, if we are to make the integration process a success and avoid the problem that Iain Gray identified of another generation of politicians—given that 46 members will be 60 or over by the end of the session, it will probably not be the same generation of politicians—confronting the same issues in another 13 years, the consensual approach must continue through a partnership of all the political parties here and of all the organisations beyond that we have talked about.

16:38

Dr Richard Simpson (Mid Scotland and Fife) (Lab): As Jackson Carlaw indicated, this discussion goes back a long way. It goes back even before devolution. In 1979, the Mitchell report talked about liaison—that was the word that was used at the time—between social work and healthcare. We have been considering the issue for a long time.

As many members have said, and as Tuesday's debate indicated, the challenge of demographic change is now upon us. As Duncan McNeil said, that challenge will intensify, as people experience longer periods of not-such-good health, chronic disability and long-term conditions. The challenge is intensifying year by year.

The Parliament has previously supported very similar attempts in debates in which almost exactly the same speeches have been made. The speeches that we have had this afternoon—with the exception of the three or four from SNP members that simply attacked Labour councils—have, on the whole, been exactly the same. The desire, the ambition and the aspiration are there.

In 2000 to 2001, we established the joint future programme, which Iain Gray referred to. We started with an ambitious pilot in Perth and Kinross to amalgamate social care and healthcare. People spent two years wrangling about staff terms and conditions, but then they finally got going. Two and a half years later, the pilot collapsed, because the leadership withdrew its support. The lesson that I take from that—we should take lessons from our

failures—is that, without strong commitment and strong leadership from the Government, local authorities and health boards, we are doomed to another 13 years of talking about integration but seeing only a small amount of reasonably good practice.

How did Labour respond? In 2004, we legislated for the CHPs, which were intended to build on 85 local healthcare co-operatives—groupings of primary care practices—and to link social work teams to the co-operatives. In fact, the CHPs destroyed the co-operatives. Very few local healthcare co-operatives are left. GPs and primary care staff disengaged from the process. Far from integration, what we achieved was disintegration. We need to learn that lesson, too. If primary care staff disengage, we will be in trouble.

A number of speakers have raised a fundamentally important point. The world is changing, and the third sector is now providing an increasing volume of the services that are vital to integrated health and social care, so it must have a strong place at the table.

Since the CHPs were established, we have had Crerar, Christie and Beveridge. In a thoughtful speech, Duncan McNeil showed us that reform will be more difficult in a period of austerity than it would have been when considerable additional funding was available. It will be difficult for us not to portray reform as cost cutting.

Labour foresaw the problem and the need for change, so it established a commission under Sir John Arbutnott. Far from what was portrayed by the SNP—with its usual knockabout party politics, which we on all sides love—we did not seek the establishment of a new national quango; we sought national standards to underpin local democratic revisions of the CHPs. Duncan McNeil referred to those standards—which we need now, before the bill is introduced. They will underpin how we go forward. As a number of speakers have said, it is outcomes that will matter.

In his eloquent speech, Iain Gray described the reality for individuals. All the services are being provided but, if something goes wrong, people have no idea who to turn to. That is not satisfactory.

The Association of Directors of Social Work has tended to welcome integration, but it does not want structural change. It is not right about that; we need to revise the structures. However, ADSW is right in saying that we need to ensure that we do not do what happened previously. We must not destroy the existing good practice. Flexibility on that in the bill is welcome, but other aspects are not.

We need a mapping exercise to see whether more than the 11 councils that Audit Scotland

found are engaged in the process. We need to build on that work and ensure that it is not destroyed.

Resources will be important and we believe that they will have to be determined centrally. We have tried aligning budgets. In an otherwise pretty awful speech, James Dornan was right about one thing: there was disintegration in Glasgow. However, that was caused by two partners, not one. The two partners could not agree—that was the important point.

In his speech, which was entirely about Aberdeen, Mark McDonald referred to an Aberdeen City Council project. That was started under the SNP, not Labour—Labour might have carried it through, but your party started it. Both parties are simply trying to solve a difficult problem that needs a huge resource. As you said, 65 people are waiting. How do you deal with that in your funding envelope? The Aberdeen approach provides one possible solution.

In Sandwell, care was outsourced 16 years ago, and I commend this example to the cabinet secretary. It has been a phenomenal success—the Sandwell model has grown from an initial 82 employees to 500 employees, who provide a fantastic service that gets a superb report from the users, which is critical.

Mark McDonald: As regards the Aberdeen project, the SNP said that we would look at the business case. The business case came back and it did not stack up, and so the project was opposed. It is a great pity that the Labour Party did not join us in opposing it and did not listen to the concerns that were expressed, not just by politicians but by trade unions as well.

The Deputy Presiding Officer: I call Richard Simpson—please speak through the chair.

Dr Simpson: I say to Mark McDonald that that illustrates the confrontational nature of the relationship between health and local authorities, which is exactly what we have to get rid of. If he thinks that the system that is being proposed by the Government in the bill will do that, I am afraid that he will be disappointed.

I said that leadership and culture are important and the last part of the discussion reflects that. There are two different cultures involved, and marrying them has never been considered as anything other than extremely difficult. However, unless we achieve that integration, things will be very difficult indeed.

Accountability is critical. I was disappointed that James Dornan does not appear to think that local democratic control is in any way appropriate. I wonder if he believes in local democracy—maybe he does if his party is in charge, but not if ours is.

It is important that local democracy is involved. We have tried health board elections, which have been expensive and have not worked particularly well. I do not think that there has been any word of those elections continuing. Democratising the local system through councillors being in a majority or being in control of the community health and social care partnerships will be a mechanism for democratising health.

This is not about medicalising social care; it is about socialising medical care. That reflects what Duncan McNeil was saying—there are individuals who need their care to be fully integrated.

We will vote for the motion even if the SNP does not accept our amendment because we agree with the principles of the bill; we will work with the Government. However, we disagree as regards the question of joint and equal accountability. There is a need for single democratic accountability and we will continue to argue that case.

The Deputy Presiding Officer: I call Alex Neil to wind up the debate. Mr Neil, you have until 4.58—so you have 10 minutes.

16:48

Alex Neil: As this is my own production, I will try to be as loquacious as possible.

Integration is not new—there are examples of successful integration in Scotland. I have used the example of West Lothian many times. The West Lothian integration project has been running successfully for eight years. It started as the integration of adult health and social care; it then incorporated children's services; and it is now quite rightly incorporating acute services. The West Lothian example clearly shows that integration can work and that many of the problems that have been identified are not necessarily endemic in every local authority area across the country.

West Lothian is not the only area in Scotland to have successful integration. I was up in Turriff on Monday and I visited Turriff hospital. As Nanette Milne will be aware, Turriff hospital has a totally integrated operation, with a health centre, a hospital, and social care workers from the local authority who work side by side with the health workers in the health centre. Aileen McLeod mentioned the example in the Dumfries and Galloway area. We have good examples of successful integration across Scotland as well as down south.

We have also seen that, where there is successful integration, we achieve the outcomes that we are trying to achieve through this bill. Having said that, I recognise many of the points

that have been made, very fairly, by Iain Gray. That is precisely why we need legislation; it is precisely why, in the bill, I will take reserved powers to deal with either a recalcitrant health board or local authority and to ensure that integration happens. That will include powers, if necessary, in relation to budgets and other matters, because we are not prepared to sit back and allow integration not to happen in any part in Scotland.

Iain Gray raised valid points, which are obviously based on his experience of trying to make integration work—an experience that many of us have had.

Iain Gray: Mr Neil makes a fair point. If I was asked what our key mistake was in 2000 and 2001, I would say that it was that we did not legislate. We should have done that, which is why, as I said, the proposed bill is a real opportunity. However, the legislation should sweep away the negotiation about pooling budgets, because that is the greatest barrier to moving forward.

Alex Neil: Without being specific about that, I am open to suggestions from other parties, particularly from somebody such as Iain Gray, who as a minister had direct experience of trying to make integration work. I am happy to meet individual members and talk through some of the issues.

We have been in sustained negotiation with COSLA and other stakeholders, and we have a bill advisory committee. I have agreed that any proposals or amendments will go through the bill advisory committee to ensure that we take as many stakeholders with us as possible. The other parties in the Parliament are also stakeholders. My door is open to suggestions on how we might improve our proposals and the bill once it is published.

Dr Simpson: The integrated resources framework provides the cabinet secretary with the opportunity to look at the financial situation in a way that was not available to Labour in 2001. The Government has a great advantage in being able to look at the budgets in an integrated form and to compare between different authorities.

Alex Neil: Absolutely. I intend to use that framework as and when it is necessary.

The irony is that just the knowledge that legislation with those reserved powers is coming will in itself, I hope, force people in many areas to work together and reach agreement, rather than continually wrangle about issues that, at the end of the day, are not the most important aspects of the exercise.

The issue of national standards was initially raised by Duncan McNeil and came up a couple of

times. I can confirm that we will publish our consultation paper on the national standards prior to the publication and introduction of the bill. I absolutely accept that the national standards are a vital part—a linchpin—in the success that we are trying to achieve, as are the outcomes that we have included in our response to the responses.

Duncan McNeil: Will the consultation be completed and the national care standards put in place in order to inform those who set the outcomes? That seems a natural process.

Alex Neil: We will synchronise the standards and outcomes and all the other decisions to ensure that there is a logical flow. I anticipate that it will be well after the summer recess before the bill gets properly into the committee stages. By that time, I hope to have reached decisions on the national standards and have agreement on them. We have already indicated the high-level outcomes that we expect and that we must ensure that we get from the integrated partnerships. That is absolutely right.

I will turn to some other points that have been raised. I share the concerns about the arm's-length external organisation in Aberdeen. It is fair to put that on the record, although I will not get into the internal politics in Aberdeen.

I do not accept that it would be right to have a majority of local authority representation on the partnership committees. The reasons that were given for that were that it would make the process more democratic. This is not a party-political point but, believe you me, some of the practices in North Lanarkshire Council in the area that I represent are anything but democratic.

Jackie Baillie: Will the member take an intervention?

Alex Neil: I will in a minute, and I will do it this time—I will keep my promise to you, Jackie.

I will not concede on the principle of equal representation between the health board and the local authority.

Presiding Officer, I should have said, "I will keep my promise to Jackie Baillie," which I now do.

The Presiding Officer (Tricia Marwick): Thank you. I remind all members that they should refer to other members by their full names. I call Jackie Baillie.

Jackie Baillie: Thank you, Presiding Officer. This is the first time that the cabinet secretary has kept a promise to me. *[Laughter.]*

Will the cabinet secretary specifically exclude executive directors from the new bodies?

Alex Neil: My view is that health board representation will be up to each health board, and

it will primarily be the non-executives who are the representatives on the new bodies.

It would not be right to have the executives of the health board as members of the board of the partnership. First, I do not think that that is right in principle. Secondly, the health board needs to ensure—and most have done this—that the places that it has on the committee are taken not just by non-executive directors but by patient representatives. I want to see end users on the board, because no one is better placed to drive up standards than the people who use the services. That will be crucial.

There is an issue in that respect, and we are still in discussion about it with COSLA and other stakeholders in the third sector and the independent sector. We have to be clear about two separate functions. There is a precedent for that. When I was convener of the Enterprise and Lifelong Learning Committee in the first session of the Parliament and Jack McConnell, now Lord McConnell, was education minister, we had the crisis at the Scottish Qualifications Authority. A reason for the crisis was that the SQA's board was made up of people who were primarily there not to run the organisation on the basis of what the organisation needed at the time but to represent their own interests. I suggested and Jack McConnell accepted that we needed to separate the two functions: the management and running of the organisation, which should be done by a fairly tight, reasonably small and manageable management board; and the separate issue of the involvement of stakeholders.

In each area, there are tens if not hundreds of stakeholders who want an input into service design, architecture, delivery and so on—and they should have an input. What I am saying is that the management board must be of a manageable size, so that it manages the organisation, looks after the money and ensures that the outcomes are achieved. That is not necessarily the same as a wide-ranging stakeholder group, for which there is also a role. It will be important to get those two things right in each area.

There will have to be a close relationship between the partnership boards and the community planning partnerships. The logical place for the board to report locally will be the community planning partnership, because all the other relevant services will be represented round that table. One member quite rightly made the point that we need better involvement of housing services. Council housing services and housing associations will be much more involved in community planning partnerships, which, when they have been reformed by my friend Mr Swinney, will be the logical platform through which

the partnership boards should report to wider stakeholders and the wider community.

Finally, on culture, I have heard it said many times that there are two cultures: the local authority culture and the health board culture. That is a gross underestimate. In each health board there are many cultures. There is the culture of GPs; there is the culture of almost every allied health professional organisation; and there is the culture of secondary care. As for local authorities, I can tell members that in North Lanarkshire Council, which is a good example, there are a lot of sub-cultures.

The point is that we must develop one culture, one organisation, one integration, one delivery and one set of budgets for each area, so that there is one set of outcomes and standards and, I hope, one big success in each area, which delivers for the people of Scotland.

Point of Order

16:59

Dr Richard Simpson (Mid Scotland and Fife (Lab)): On a point of order, Presiding Officer. I refer to standing order 7.3 and your comments on 5 and 28 February, in particular the advice that you offered on 28 February:

"I expect any major policy announcements by the Scottish Government always to be made to Parliament, in the first instance."—[*Official Report*, 28 February 2013; c 17163.]

I regret that another point of order has had to be raised because significant policy changes have once again appeared in the first instance in various press outlets, rather than this chamber. A consistent pattern of policy announcements emerging in the press rather than the Parliament continues to be common practice for the Scottish Government.

I refer to the fact that the waiting time target of 98 per cent of patients waiting no more than four hours to be seen in accident and emergency is to be lowered to 95 per cent. That appears to have been leaked to the *Evening News* on Monday. The issue was further confused yesterday when the Cabinet Secretary for Health and Wellbeing said in a point of order that 98 per cent would remain as the "standard" but 95 per cent would be a "target". There is total confusion as to the difference between a standard and a target. That is a fundamental change in policy.

Furthermore, the £50 million emergency care action fund also appeared in various press outlets. It cannot be right that press outlets are leaked or given such policy information before Parliament is. These matters are too important not be heard in the chamber first.

This issue is of great importance to the Parliament. Rather than first appearing in the press, announcements should always in the first instance be made to the Parliament. Presiding Officer, can you advise what action you are able to take to prevent further significant policy announcements from appearing in the press before they have been discussed or announced in the chamber, or have we reached the point at which we seriously need to discuss giving you additional powers if the Government continues to ignore your admonitions?

The Presiding Officer (Tricia Marwick): I thank Richard Simpson for the advance notice of his point of order. As he said, I have referred to the good practice guide on announcements by the Scottish Government on previous occasions. All members will be aware that the guidance states that major policy announcements should in the

first instance always be made to the Parliament. However, the guidance also acknowledges that decisions on whether and how to make announcements to Parliament on Government business are a matter for the Scottish Government.

It is of course for the Scottish Government to reflect on yesterday's debate in Parliament and for members to use the channels available to them on any of the issues raised in that debate.

On the issue of additional powers, it is not for me to assume powers for the Presiding Officer; it is a matter for the Parliament and its committees.

Enterprise and Regulatory Reform Bill

17:02

The Presiding Officer (Tricia Marwick): The next item of business is consideration of motion S4M-05852, in the name of Fergus Ewing, on the United Kingdom Government amendment to the Enterprise and Regulatory Reform Bill, which is UK legislation.

Motion moved,

That the Parliament agrees that the relevant provisions of the amendment to the UK Enterprise and Regulatory Reform Bill, tabled in the House of Lords on 25 February 2013, relating to the power to add to supplies protected under the Insolvency Act 1986, so far as these matters fall within the legislative competence of the Scottish Parliament, should be considered by the UK Parliament.—*[John Swinney.]*

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

Public Bodies (The Office of Fair Trading Transfer of Consumer Advice Scheme Function and Modification of Enforcement Functions) Order 2013

17:03

The Presiding Officer (Tricia Marwick): The next item of business is consideration of motion S4M-05731, in the name of Fergus Ewing, on the Public Bodies (The Office of Fair Trading Transfer of Consumer Advice Scheme Function and Modification of Enforcement Functions) Order 2013, which is United Kingdom legislation.

Motion moved,

That the Parliament consents to the making of the Public Bodies (The Office of Fair Trading Transfer of Consumer Advice Scheme Function and Modification of Enforcement Functions) Order 2013, a draft of which was laid before the United Kingdom Parliament on 12 December 2012 and which makes provision that would be within the legislative competence of the Parliament if it were contained in an Act of that Parliament.—*[John Swinney.]*

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

Parliamentary Bureau Motion

17:03

The Presiding Officer (Tricia Marwick): The next item of business is consideration of a Parliamentary Bureau motion.

Motion moved,

That the Parliament agrees that John Lamont be appointed to replace Margaret Mitchell as the Scottish Conservative and Unionist Party substitute on the Justice Committee.—[*Joe FitzPatrick.*]

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

Decision Time

17:03

The Presiding Officer (Tricia Marwick): There are five questions to be put as a result of today's business. The first question is, that amendment S4M-05838.1, in the name of Jackie Baillie, which seeks to amend motion S4M-05838, in the name of Alex Neil, on integration of adult health and social care, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Baillie, Jackie (Dumbarton) (Lab)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Baker, Richard (North East Scotland) (Lab)
 Baxter, Jayne (Mid Scotland and Fife) (Lab)
 Beamish, Claudia (South Scotland) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Chisholm, Malcolm (Edinburgh Northern and Leith) (Lab)
 Dugdale, Kezia (Lothian) (Lab)
 Eadie, Helen (Cowdenbeath) (Lab)
 Fee, Mary (West Scotland) (Lab)
 Ferguson, Patricia (Glasgow Maryhill and Springburn) (Lab)
 Findlay, Neil (Lothian) (Lab)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Griffin, Mark (Central Scotland) (Lab)
 Henry, Hugh (Renfrewshire South) (Lab)
 Hume, Jim (South Scotland) (LD)
 Johnstone, Alison (Lothian) (Green)
 Kelly, James (Rutherglen) (Lab)
 Lamont, Johann (Glasgow Pollok) (Lab)
 Macdonald, Lewis (North East Scotland) (Lab)
 Macintosh, Ken (Eastwood) (Lab)
 Malik, Hanzala (Glasgow) (Lab)
 Martin, Paul (Glasgow Provan) (Lab)
 McArthur, Liam (Orkney Islands) (LD)
 McDougall, Margaret (West Scotland) (Lab)
 McInnes, Alison (North East Scotland) (LD)
 McMahon, Michael (Uddingston and Bellshill) (Lab)
 McMahon, Siobhan (Central Scotland) (Lab)
 McNeil, Duncan (Greenock and Inverclyde) (Lab)
 McTaggart, Anne (Glasgow) (Lab)
 Murray, Elaine (Dumfriesshire) (Lab)
 Pearson, Graeme (South Scotland) (Lab)
 Pentland, John (Motherwell and Wishaw) (Lab)
 Rennie, Willie (Mid Scotland and Fife) (LD)
 Scott, Tavish (Shetland Islands) (LD)
 Simpson, Dr Richard (Mid Scotland and Fife) (Lab)
 Smith, Drew (Glasgow) (Lab)
 Smith, Elaine (Coatbridge and Chryston) (Lab)
 Stewart, David (Highlands and Islands) (Lab)

Against

Adam, George (Paisley) (SNP)
 Adamson, Clare (Central Scotland) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Biagi, Marco (Edinburgh Central) (SNP)
 Brodie, Chic (South Scotland) (SNP)
 Brown, Gavin (Lothian) (Con)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Burgess, Margaret (Cunninghame South) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)

Campbell, Roderick (North East Fife) (SNP)
 Carlaw, Jackson (West Scotland) (Con)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Davidson, Ruth (Glasgow) (Con)
 Dey, Graeme (Angus South) (SNP)
 Don, Nigel (Angus North and Mearns) (SNP)
 Doris, Bob (Glasgow) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Eadie, Jim (Edinburgh Southern) (SNP)
 Ewing, Annabelle (Mid Scotland and Fife) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 Fergusson, Alex (Galloway and West Dumfries) (Con)
 Finnie, John (Highlands and Islands) (Ind)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gibson, Rob (Caithness, Sutherland and Ross) (SNP)
 Goldie, Annabel (West Scotland) (Con)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Ingram, Adam (Carrick, Cumnock and Doon Valley) (SNP)
 Johnstone, Alex (North East Scotland) (Con)
 Keir, Colin (Edinburgh Western) (SNP)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, John (Ettrick, Roxburgh and Berwickshire) (Con)
 Lyle, Richard (Central Scotland) (SNP)
 MacAskill, Kenny (Edinburgh Eastern) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacKenzie, Mike (Highlands and Islands) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 Maxwell, Stewart (West Scotland) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McDonald, Mark (North East Scotland) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McLeod, Aileen (South Scotland) (SNP)
 McLeod, Fiona (Strathkelvin and Bearsden) (SNP)
 McMillan, Stuart (West Scotland) (SNP)
 Milne, Nanette (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robertson, Dennis (Aberdeenshire West) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Russell, Michael (Argyll and Bute) (SNP)
 Salmond, Alex (Aberdeenshire East) (SNP)
 Scott, John (Ayr) (Con)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thompson, Dave (Skye, Lochaber and Badenoch) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Urquhart, Jean (Highlands and Islands) (Ind)
 Walker, Bill (Dunfermline) (Ind)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Wilson, John (Central Scotland) (SNP)
 Yousaf, Humza (Glasgow) (SNP)

The Presiding Officer: The result of the division is: For 41, Against 73, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that motion S4M-05838, in the name of Alex Neil, on integration of adult health and social care, be agreed to.

Motion agreed to,

That the Parliament acknowledges the importance of assuring successful integration of health and social care services, on which the Scottish Government will soon introduce a bill for the Parliament's consideration; agrees that a key aim of the legislation should be to improve outcomes for people using these services; notes that the foundation of reform should be based on nationally agreed outcomes and joint and equal accountability for the delivery of outcomes by the statutory partners, and notes the importance of integrated budgets and a strengthened role for clinicians and care professionals along with the third and independent sectors in the planning and delivery of person-centred services.

The Presiding Officer: The next question is, that motion S4M-05852, in the name of Fergus Ewing, on the United Kingdom Government amendment to the Enterprise and Regulatory Reform Bill, which is UK legislation, be agreed to.

Motion agreed to,

That the Parliament agrees that the relevant provisions of the amendment to the UK Enterprise and Regulatory Reform Bill, tabled in the House of Lords on 25 February 2013, relating to the power to add to supplies protected under the Insolvency Act 1986, so far as these matters fall within the legislative competence of the Scottish Parliament, should be considered by the UK Parliament.

The Presiding Officer: The next question is, that motion S4M-05731, in the name of Fergus Ewing, on the Public Bodies (The Office of Fair Trading Transfer of Consumer Advice Scheme Function and Modification of Enforcement Functions) Order 2013, be agreed to.

Motion agreed to,

That the Parliament consents to the making of the Public Bodies (The Office of Fair Trading Transfer of Consumer Advice Scheme Function and Modification of Enforcement Functions) Order 2013, a draft of which was laid before the United Kingdom Parliament on 12 December 2012 and which makes provision that would be within the legislative competence of the Parliament if it were contained in an Act of that Parliament.

The Presiding Officer: The next question is, that motion S4M-05851, in the name of Joe FitzPatrick, on substitution on committees, be agreed to.

Motion agreed to,

That the Parliament agrees that John Lamont be appointed to replace Margaret Mitchell as the Scottish Conservative and Unionist Party substitute on the Justice Committee.

Meeting closed at 17:05.

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e-format first available
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ISBN 978-1-78307-532-4

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