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Pàrlamaid na h-Alba

Official Report

MEETING OF THE PARLIAMENT

Thursday 26 June 2014

Session 4

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Scottish Parliament

Thursday 26 June 2014

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

General Question Time

British-Irish Council (Meetings)

1. Willie Coffey (Kilmarnock and Irvine Valley) (SNP): To ask the Scottish Government what issues were discussed at the last meeting of the British-Irish Council. (S4O-03391)

The Cabinet Secretary for Culture and External Affairs (Fiona Hyslop): At the successful British-Irish Council summit that was held in Guernsey on 13 June, we discussed the economic situation with a consensus that there was cautious optimism but a need to look at the nature of recovery and the sustainability of growth. We discussed the importance of good transport links with a strong case for changes to air passenger duty, the reduction of which will allow Scotland's airports to become more competitive in attracting new direct routes and will improve our international connectivity. We also considered various workstreams including spatial planning. Copies of the communiqué and the BIC annual report are available on the British-Irish Council's website.

Willie Coffey: At a recent meeting of the British-Irish Parliamentary Assembly in Dublin, which I attended, the chief executive of Ryanair, Michael O'Leary, described air passenger duty as a "mindlessly insane" policy of the United Kingdom Government in that it taxes tourists before they arrive. Can the cabinet secretary explain what the further benefits to Scotland and the rest of these isles will be after a yes vote, when the Government reduces and then scraps air passenger duty, as the Irish Government has already done?

Fiona Hyslop: At the British-Irish Council, there was extensive discussion of air passenger duty. It was indicated that Ryanair has said that it will deliver an additional 1 million passengers as a direct result of the Irish Government's decision to abolish its air travel tax from April 2014. We also shared with the British-Irish Council information from the York Aviation study that was commissioned by Aberdeen, Edinburgh and Glasgow airports, which found that, by 2016, £210 million per annum less will have been spent in Scotland by inbound visitors than would have been spent if APD had not risen as it has since 2007. There is clearly a strong case for more

powers for the Parliament to ensure that we make the difference for our economy.

Commonwealth Games (Disruption in Dalmarnock)

2. John Mason (Glasgow Shettleston) (SNP): To ask the Scottish Government what its position is on the recent reports of significant levels of disruption to residents in Dalmarnock because of the Commonwealth games. (S4O-03392)

The Cabinet Secretary for Commonwealth Games, Sport, Equalities and Pensioners' Rights (Shona Robison): I am grateful for the patience that has been shown by local residents and, in particular, by the Dalmarnock community. Preparation for the games has led to some unavoidable disruption. Planning has taken place among a wide range of bodies, including Glasgow City Council, the organising committee and the emergency services, to ensure that the effects on the community are minimised as we come ever closer to what will be a hugely successful games for Glasgow that will bring long-term benefits to the city, particularly the communities in the east end.

John Mason: When a resident in Springfield Road leaves their house, they pass through a small garden and on to the pavement, and there is then an 8-foot fence immediately in front of them, which is not particularly attractive and will sit there for three months. The residents accept that there will be long-term benefits, but will the minister encourage some recompense or at least an acknowledgement of the fact that the local residents have been put out somewhat?

Shona Robison: I am aware that the security fencing, in particular, has caused concern among local residents. That is inevitable, given the close proximity of the venues to the local community. Security is of paramount concern, and the security planning has ensured the best overlay of security to ensure that we deliver a secure games. However, that has meant placing security fencing in close proximity to some residents' houses.

I acknowledged the disruption that has been caused in my previous answer. John Mason will be aware that discussions are going on between Glasgow City Council, the organising committee and local residents about how recompense might be provided. He has been active on the issue and has made a number of suggestions, including the issuing of free tickets. Those discussions are ongoing, and the Scottish Government would certainly support the organising committee recognising the disruption through, perhaps, the granting of free tickets and support for community events among other measures. Those discussions will continue, I hope, to a successful resolution.

National Health Service (Complaints)

3. Ken Macintosh (Eastwood) (Lab): To ask the Scottish Government what the reason is for the 13 per cent increase in complaints about hospital and community health services and the 36 per cent increase in relation to family health services between 2011-12 and 2012-13. (S4O-03393)

The Cabinet Secretary for Health and Wellbeing (Alex Neil): The official national health service complaints statistics for 2012-13 were released by ISD on 24 September 2013. "NHS Complaints Statistics: Scotland 2012/13" was the first NHS complaints statistics report since the introduction in April 2012 of the right to give feedback, make comments, raise concerns and make complaints about healthcare, which was introduced by the Patient Rights (Scotland) Act 2011. Numbers were expected to rise in the short term, as a result of people's increased awareness of their right to give feedback or make a complaint. We expect the NHS to demonstrate that it is listening, learning and making improvements as a result of those complaints.

Ken Macintosh: The cabinet secretary suggests that the increase in complaints is simply a short-term rise, but page 5 of the bulletin reveals that the rise in hospital complaints is a long-term trend. Can he demonstrate to Parliament that he understands not just why the good parts of the NHS are working, which we all know about, but why the bits of the NHS that are not working are doing so badly?

Alex Neil: We are using information on complaints as part of the management information in boards. In some boards, such as Tayside NHS Board and Grampian NHS Board, every complaint is treated as an adverse event, which means that very thorough investigation is carried out into why something has gone wrong so that lessons can be learned to prevent it from going wrong again.

With the roll-out of the patient opinion medium, which is readily accessible in hospitals to patients, visitors, carers, family members and, indeed, staff, we expect further complaints to come through. As that is being rolled out, we are seeing not only an increase in the number of complaints but a very substantial increase in the number of compliments that are being paid by patients and others. I point out that the most recent British social attitudes survey shows that, over recent years, there has been an increase of more than 20 per cent in people's satisfaction with the NHS, which we should be proud of.

John Scott (Ayr) (Con): The cabinet secretary will be aware that the British Medical Association's conference is taking place in Harrogate today. This morning on "Good Morning Scotland", Dr Hal

Maxwell from Ayrshire highlighted the BMA's concerns about falling general practitioner numbers in Scotland. What is the cabinet secretary doing to address the concerns of Dr Maxwell and the BMA about the lack of available GPs?

Alex Neil: Dr Maxwell is from Ballantrae, which is, of course, a fairly remote rural community in South Ayrshire. There is a particular problem with recruitment and retention in rural communities across Scotland, which I have spoken about many times in the Parliament. On behalf of all the health boards in Scotland, NHS Highland is leading on tackling the issue. It has been given £1.5 million to work with its own people and the rest of rural Scotland to try new initiatives to attract and retain GPs in particular in rural areas.

I should point out that, since 2007, we have increased the number of GPs in Scotland by 5.6 per cent, and that we have by far the largest number of GPs per head of anywhere in the British isles. I state categorically that, even though we are the best in terms of numbers, we are by no means complacent. I recognise—particularly given the increasing complexity of the conditions that people are presenting with in GPs' surgeries—that we need to put additional resources into the primary care sector. That is why I have instructed health boards, as part of this year's local delivery plans, to increase spending in the primary care sector.

Aileen McLeod (South Scotland) (SNP): Does the cabinet secretary agree that the 20 per cent increase in public satisfaction with Scotland's NHS in the past decade is testament not only to the hard-working NHS staff, but to the approach of the Government in supporting and protecting our NHS as a key public service that is free at the point of delivery, in contrast to the creeping privatisation of NHS services that Westminster is presiding over south of the border?

Alex Neil: Absolutely. I totally agree with Aileen McLeod. Every day, I am inspired by the excellent quality of care that is provided by our dedicated and hard-working NHS staff, and I deplore some of the recent attacks on the staff, such as those on staff at the neonatal unit in Wishaw.

Yesterday, I visited the Golden Jubilee hospital, which now has the fastest turnaround time for dealing with heart attacks of any hospital anywhere in the United Kingdom. The target for turnaround from arriving at the hospital to getting initial treatment is 30 minutes, but the Golden Jubilee is doing it in 21 minutes, which is unmatched by any other hospital in the whole of the UK. That is something to be celebrated. If we sometimes heard as much from Opposition parties about the successes of the NHS, which far outweigh any potential challenges that we face, I

think that morale in the health service would be a bit higher.

Dr Richard Simpson (Mid Scotland and Fife) (Lab): If I may, I will very gently point out to the cabinet secretary a small correction: north-east England has more GPs per head than Scotland, as he will see from the four countries report.

The whistleblowers telephone line was eventually introduced by the Scottish Government two years after the English line came into being. We were promised an evaluation at some point of the feedback to individuals. We have had an initial evaluation but not the evaluation of what the people who have complained feel about the responses. When is that going to happen?

Alex Neil: First of all, the north-east is not a country—I know that that might be news to a no campaigner, but there we go.

The evaluation that the member asked about will be available next year. Clearly, the helpline is fairly new. In fact, it is widely used by people from south of the border. We will extrapolate whatever lessons we can learn about their health service as well as extrapolating lessons for our own. We will publish a very robust evaluation in due course.

Fisheries (Sanctions on Faroe Islands)

4. Jamie McGrigor (Highlands and Islands) (Con): To ask the Scottish Government what its position is on the European Commission's proposal to lift the Faroe Islands' herring sanctions that are in place to deter unsustainable fishing practices. (S4O-03394)

The Cabinet Secretary for Rural Affairs and the Environment (Richard Lochhead): The European Commission has unilaterally judged that the reduced catch limit for herring that the Faroe Islands has set itself for this year satisfies the criteria for lifting the current trade measures. I acknowledge the downward shift in the catch limit, but it remains above the share that was set aside for the Faroese by the other parties in March this year. In my view, lifting the trade measures now may be premature and could be seen as rewarding poor behaviour.

The statement from the Commission that the current share does not form a commitment to a permanent share going forward is of course encouraging, but it raises concerns about the process by which this position has been reached. I therefore intend to write to the United Kingdom Government to raise my concerns in advance of the discussion on this issue in Brussels at the end of July. My firm position is that shares should be agreed between all parties with an interest in the fishery, and I will seek to ensure that sensible decisions are taken and that Scotland's interests are protected.

Jamie McGrigor: Does the cabinet secretary share Scottish pelagic fishermen's genuine concern that the Commission, without consulting European Union member states, is sending out completely the wrong message by proposing to remove the sanctions even when the Faroese have unilaterally set a herring quota that is double the figure that they should be allocated under the previous coastal states agreement? Further, what is he going to do to ensure that there is a level playing field for pelagic fishermen when the discard ban is introduced in January, because Scottish skippers face having a huge amount of control and monitoring equipment on board their vessels while the Faroese and Norwegians fishing alongside them off Shetland will not have any restrictions?

Richard Lochhead: I think that I indicated in my previous answer to the member that I share to an extent the Scottish industry's views on how the Commission has handled the trade sanctions for the Faroe Islands. However, we should also recognise that progress is being made and we should welcome that, because it is in everyone's interests that there is an agreement on the future of the herring stock.

I have made the strongest recommendations to the UK Government that it must deliver a level playing field between the Scottish pelagic sector and other countries that fish in our waters after the introduction of the discard ban for pelagic stocks in a year or so. We cannot have control measures on Scottish vessels that fish alongside other vessels that have fewer control measures. Therefore, I am making the strongest representations to the UK Government. An internal debate is going on between the Scottish and UK Governments on the issue at the moment. I hope that Jamie McGrigor will support the Scottish Government's position on that.

Medical Certificate of Cause of Death

5. Fiona McLeod (Strathkelvin and Bearsden) (SNP): To ask the Scottish Government what steps it is taking to inform doctors about the medical certificate of cause of death that is expected to be introduced in August. (S4O-03395)

The Cabinet Secretary for Health and Wellbeing (Alex Neil): A revised paper medical certificate of cause of death—MCCD—or form 11, will be introduced after midnight on 5 August 2014. To support the changeover, significant work has been and is being undertaken to ensure a smooth transition from the current form to the new one. The chief medical officer signalled the change in a letter of 20 March 2014 to all national health service chief executives and medical directors, for cascading to all staff, including general practitioners. A second, more detailed, letter from

the chief medical officer is to be issued to the same recipients this week. The changeover will be discussed with health boards' nominated lead officers at a meeting on 15 July. Additionally, NHS Education for Scotland is developing educational and awareness-raising materials for dissemination to and use by all NHS boards before the changeover date.

Fiona McLeod: I thank the cabinet secretary for that comprehensive reply. I am pleased to hear about how much work we have done on the issue, but what have we done to inform funeral directors of the new MCCD?

Alex Neil: The medical certificate of cause of death form is not normally made available to funeral directors, so there will be no change to the current funeral arrangements from their perspective. Nevertheless, the National Association of Funeral Directors, which represents 80 per cent of funeral directors in Scotland, is a key member of the overarching certification of death national advisory group and has responsibility for informing its members of all relevant changes connected with the work. That includes confirming that the revised MCCD will have no impact on its members at this time.

“Empowering Scotland’s Island Communities”

6. Kenneth Gibson (Cunninghame North) (SNP): To ask the Scottish Government what opportunities the proposals in “Empowering Scotland’s Island Communities” could bring to Arran and Cumbrae. (S4O-03396)

The Minister for Local Government and Planning (Derek Mackay): I have visited Arran and Cumbrae to discuss the measures that are set out in “Empowering Scotland’s Island Communities”, nearly all of which will apply to each of Scotland’s 93 inhabited islands. Proposals to benefit Arran and Cumbrae include revenue from the sea bed, an islands provision in the interim constitution, an islands minister and top-up support to island beef farmers, which is of particular interest to Arran.

Kenneth Gibson: I thank the minister for that positive reply. I am pleased that the proposals apply to all Scotland’s islands and will benefit Arran and Cumbrae significantly. The prospectus recommends that local authorities set up islands innovation zones. If the communities on Arran and/or Cumbrae wish to set up such a zone, would that be actively considered?

Derek Mackay: Yes, the Scottish Government can consider that proposal. Arran is an excellent example of a place where communities and stakeholders come together to promote that which is best about the area. We look forward to seeing those proposals. Like every other island in

Scotland, Arran will benefit from the opportunities that can be unlocked through independence to empower Scotland’s islands.

Affordable Housing Supply Programme

7. Jayne Baxter (Mid Scotland and Fife) (Lab): To ask the Scottish Government whether it will provide an update on the progress of its affordable housing supply programme. (S4O-03397)

The Minister for Housing and Welfare (Margaret Burgess): Our target is to deliver 30,000 additional affordable homes during the current session of Parliament. Two thirds of those will be for social rent. Excellent progress is being made as, three years into the period, we have delivered 19,903 affordable homes, with 72 per cent of them being for social rent.

Jayne Baxter: Many of my constituents who are unable to secure good-quality housing are families. Sustainable communities need a mix of housing. Although councils across the country are working hard to ensure that their local housing strategies meet community needs, more needs to be done. Some of the issues were covered in yesterday’s debate on the Housing (Scotland) Bill, but what steps is the Government taking to support councils, housing associations and developers to ensure that the housing stock in each area is appropriate for communities and that we have enough family housing? Also, how will the situation be monitored?

Margaret Burgess: As the member will be aware, it is up to each local authority to set its local housing strategy and housing plan. The Government supports all tenures of housing in the sector. We have a wide range of schemes, from mid-market schemes to social rented housing, to supporting ownership through the help to buy scheme. The Government will continue to do that and to work with our local authority partners. However, at the end of the day, it is up to local authorities to determine the type of houses that they require for their areas. Each local authority knows best what is needed in its local community.

The Presiding Officer (Tricia Marwick): I can squeeze in question 8, if Ms McTaggart and the minister are brief.

Homophobic Hate Crimes

8. Anne McTaggart (Glasgow) (Lab): To ask the Scottish Government what action it is taking in response to the reported 22 per cent increase in homophobic hate crimes in the last year. (S4O-03398)

The Cabinet Secretary for Commonwealth Games, Sport, Equalities and Pensioners’ Rights (Shona Robison): The Scottish

Government will continue to work closely with public and third sector organisations to address the causes of hate crime, to encourage victims to report hate crime and to improve the service that is offered to victims.

Anne McTaggart: In the past 12 months, there has been a 12 per cent rise in disability hate crime and a 3 per cent rise in racial abuse. In light of those worrying statistics, what action is the Government taking to reverse the trend and ensure that prejudice and discrimination are eradicated in every community in Scotland?

Shona Robison: In February this year, we launched the speak up against hate crime campaign to raise awareness of what hate crime is and how to report it. We will build on that work with partners from all the relevant organisations, many of which said when the statistics were published that the rise was due partly to increased confidence in reporting such crimes and the third-party reporting centres that help people to do so. However, we are not complacent, and we will do what else we need to do.

The Presiding Officer: Before we move to the next item of business, members will wish to join me in welcoming to the gallery His Excellency Dr Pribićević, the ambassador of the Republic of Serbia. [*Applause.*]

Members will also wish to welcome the delegation from the network of parliamentary committees on economy, finance and European integration of the western Balkans. [*Applause.*]

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-02209)

The First Minister (Alex Salmond): I have engagements to take forward the Government's programme for Scotland.

Johann Lamont: Thank you. On Tuesday, the Cabinet Secretary for Health and Wellbeing, Alex Neil, said that

"Satisfaction with our NHS has increased by 20 per cent over the last seven years"

and that

"nearly two thirds of people in Scotland claim to be satisfied with our health service".

On the same day, the outgoing head of the British Medical Association Scotland, Dr Brian Keighley, said:

"What I have seen over the past five years is the continuing crisis management of the longest car crash in my memory—and it is time for our politicians to face up to some very hard questions."

I agree with Brian Keighley, who speaks for national health service staff all over the country. Can the First Minister tell the people of Scotland why the leader of Scotland's doctors is wrong?

The First Minister: I will deal first with the question of the public's satisfaction with the national health service. That information was not from an opinion poll or some snap survey, but from the social attitudes survey for Scotland, which is the most detailed assessment of social attitudes in the country. It demonstrated that satisfaction with the national health service has risen to 61 per cent. By way of comparison, when Johann Lamont was a minister in 2006 it was at 45 per cent. Johann Lamont started by saying that that was a claim by Alex Neil, but it is actually from that survey, which is the most detailed assessment of public attitudes. We can compare directly the level of satisfaction with our national health service today with the level of satisfaction that existed when Labour was in power, and there is now a strongly rising trend.

Brian Keighley wants more funds for the national health service, and he makes the entirely reasonable point that, despite the fact that the national health service has had its budget protected in real terms, it is under sustained pressure because of the rising demand for health services. How do I know that? I know because

Brian Keighley said on “Good Morning Scotland” on 24 June:

“I accept that the SNP has done as much with the Barnett Formula and resources that are available to them”.

When Johann Lamont says that Brian Keighley says that the NHS is under pressure, as indeed he did, we must remember that he also said—and accepted—that we are doing everything that we can within the resources that are available to us to provide for our national health service. That may be one reason why satisfaction with the national health service is on a rising trend.

The other reason, of course, will be that the people of Scotland understand the work and performance of our people in the national health service who are delivering such an excellent result, even under pressure.

Johann Lamont: Dr Brian Keighley is a member of staff in the health service, so the First Minister ought to listen to what he is saying. He should not pick only one thing that Brian Keighley has said, but should reflect on everything that he says.

With accident and emergency targets missed, cancer targets missed and care for the elderly in crisis, the man who represents Scotland’s doctors—Brian Keighley—said:

“The current service is teetering on the edge of collapse.”

The leader of Scotland’s doctors also said:

“My main regret is that I have not been able to do more than act as a deckchair attendant on the good ship NHS Titanic.”

Can the First Minister tell the people of Scotland why the leader of Scotland’s doctors is wrong and he is right?

The First Minister: Let me offer another quotation from Brian Keighley, from the same “GMS” interview. Johann Lamont does not want to accept this, but he said:

“Clearly my target is not the current Cabinet Secretary, my target is the political classes in Scotland.”

The point that he was making was that health resources are under pressure because of rising demand. He accepted that we have done everything that we can, under the constraints of the Barnett formula, to protect the national health service.

I think that we are entitled to ask whether that would have been done if the Labour Party had been in power over the past seven years. We know that it would not have been done in 2007, because Jack McConnell said that the NHS would just have to cut its coat to suit its cloth and would not have access to the Barnett consequentials. We doubt that it would have been done in 2011,

either, because the Labour Party refused to commit to the resources in real terms.

If we want evidence of the Labour Party in power, we should just look to Wales, which is suffering the same stresses as Scotland under the Barnett formula but is, on every measurement, turning in a worse health performance.

Does Johann Lamont accept the connection between the resources that are available to us under the Barnett formula and the ability to fund the national health service to the degree that Brian Keighley and all of us would want? Is not that an argument for our having access to Scotland’s resources, so that we can deliver that desirable outcome? [*Applause.*]

Johann Lamont: Of course, under the First Minister’s prescription for Scotland we would have less money to spend on public services. While his friends on the back benches applaud his oft-heard script, he should reflect on the fact that that script, which he trots out every time the NHS is mentioned, sounds very much like complacency to staff and patients who live in the real world and who deal with the problems daily.

We have been warning the First Minister about the mounting problems in our NHS for the past two years, but every time we do so we get the same old script. The First Minister cannot keep ignoring the reality. Brian Keighley, the leader of Scotland’s doctors, said:

“We have a crisis of out-of-hours health provision that sees huge and unacceptable queues at A&E Departments. We see reports of geriatric provision coming under increasing criticism through inadequate care packages and increasing bed blocking, and at the same time GPs coping with a 20 per cent increase in workload.”

He continued:

“We see vital cancer treatments delayed because of unsustainable cost and we see cracks emerging in hospital food, cleanliness, staff shortages and vacancies within both the consultant body and GP trainees.”

He finished by asking:

“And how has Scottish Government responded? It talks of 7-day provision at a time when we have an inadequate 5-day service.”

Those are the problems that our NHS staff face every day. What is the First Minister’s plan for the NHS?

The First Minister: Our plan is to continue to fund the NHS in Scotland to the maximum degree, which is something that the Labour Party—neither in Scotland nor in Wales—would not commit to doing. Our plan is to get access to the resources of Scotland so that we can move beyond austerity and have a proper, responsible and reasonable increase in public spending, as John Swinney has outlined.

We know that Brian Keighley accepts that we are doing everything that we can within the Barnett formula. That is a reason to break free of the Barnett formula and to have access to the resources of Scotland.

I do not accept Johann Lamont's description of accident and emergency and cancer waiting lists. We are acting to improve performance in accident and emergency and, as Alex Neil announced this week, we are acting to improve performance on our cancer targets. We are particularly concerned that we have moved below the 62-day target. However, the Labour Party never—not once—achieved the 62-day cancer target when it was in office.

Yes—we believe that 93 per cent of people being seen within four hours in accident and emergency is not good enough, but when the Labour Party was in power and Johann Lamont was a minister, Labour claimed that 87 per cent represented excellent performance.

Given that public satisfaction with the national health service is rising, as the social attitudes survey demonstrates; given that we committed to protecting the national health service budget in real terms, which Labour would not do; and given that our performance, under pressure though the NHS undoubtedly is, is better than when the Labour Party was in power, what possible credibility does a minister from a previous Government have in complaining about the situation when public finances are under pressure, when that party could not run Scotland when public money was plentiful?

Johann Lamont: The problem for the First Minister is that he wants to make this a cheap political debate between him and me. I can deal with that—that is not a problem. [*Interruption.*]

The Presiding Officer (Tricia Marwick): Order!

Johann Lamont: That is not a problem. [*Interruption.*]

The Presiding Officer: Order. Settle down! [*Interruption.*] Ms Grahame!

Johann Lamont: That is not a problem. We can do that, but we let the people of Scotland down every time we settle for that on the big issues, or say that the only solution is independence. It is not just me raising the questions; they are being raised by the head of the BMA, nurses, patients and people in our constituencies who every day are being let down by a Government whose members are not interested in the NHS or in anything but the obsession that took them into politics in the first place.

Every time that I, on behalf of the people of Scotland, have asked the First Minister about blanket shortages, unacceptable waiting times in

accident and emergency units, lack of access to cancer drugs, cancer waiting times, elderly people left on trolleys for hours, older people getting 15-minute care visits, doctor shortages and anything else about the NHS, the First Minister has told me—we have heard it again today—that people are happy with our health service, that it is getting privatised in England, and that it would be worse if we were Welsh. Those are inadequate answers to serious questions. The First Minister has told us that this is a really serious issue for the people of Scotland, so it deserves better than that.

The First Minister has told us that he has a plan A, B, C, D, E and F for a currency in an independent Scotland. Does he not realise that what Scotland wants and what our hard-working doctors and nurses are demanding from him is any kind of plan for the NHS today?

The First Minister: I see that Johann Lamont does not think it important that the NHS in Scotland is being kept in public hands and is not being subjected to disintegration. That is very interesting, because Brian Keighley did not say that in his speech this week to BMA Scotland. He said:

“What is totally clear is that the NHS that we have in Scotland is fundamentally different from that in England in terms of philosophy and organisation. North of the border we have been spared the spectacle of a huge organisation being thrown in the air, with only speculation as a guide to where the pieces might land. We have avoided wholesale reorganisation, NHS managers' games of musical chairs and the worst excesses of the use of the NHS as a party political football. And for that we must be thankful.”

If Brian Keighley, whom Johann Lamont has cited, thinks that that is important, why does the Labour Party not think it important? Is it perhaps because Andy Burnham has talked about having a common health service across the UK and about leaving the health service in Scotland to the tender mercies of the privatisation agenda that is being pursued at Westminster?

Johann Lamont does not want to talk about what the public thinks of the national health service. The increase in national health service performance in terms of accident and emergency and cancer care is reflected in the 21 per cent increase in public satisfaction. Eighty-five per cent of Scottish in-patients have said that overall care and treatment was good or excellent; 87 per cent rated the performance of their general practitioner surgery as good or excellent; and 84 per cent of social care users rated their overall care and support as good or excellent. Those are real people in the real world, who understand the commitment and strength of the people in the national health service, and who understand that those people are supported by a Government that has funded the service in real terms and which

would be able to do a great deal more in an independent Scotland.

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-02208)

The First Minister (Alex Salmond): I have no plans in the near future.

Ruth Davidson: We end this parliamentary term in a familiar place, with the Scottish National Party blind to the very real risks involved in leaving the United Kingdom and with expert analysis that points out those risks.

To take one example, this morning there was a new report from the Scotland Institute, examining the blunt financial truths that would face a separate Scotland. We may not like to hear it but, having interviewed the main credit rating agencies, the institute says that an independent Scotland is

“likely to end up with a much lower credit rating and significantly higher borrowing costs than it currently enjoys within the union”.

Does the First Minister agree with the report that there is a real pounds and pence cost to separation?

The First Minister: I do not think that credit rating is the better together campaign’s strongest suit, given that famous leaflet about the AAA rating, which was published only weeks before the AAA rating disappeared, and given the speculation on rising interest rates that is much about at present. However, let us talk about the credit rating agencies directly.

“Even excluding North Sea output and calculating per capita GDP only by looking at onshore income, Scotland would qualify for our highest economic assessment.”

That is from Standard and Poor’s report on 27 February 2014.

Moody’s said on page 15 of its report that scoring for the economic strength of an independent Scotland would be likely to fall somewhere in the high range. We know the growth rate of Scotland and the volatility of growth. Moody’s said:

“There is a limited range of outcomes for GDP per capita, but all possible outcomes point to Scotland being among the wealthiest sovereigns in the world”.

If even people in the rating agencies, who are not known for their sunny optimism about the prospects of any country, say that about Scotland and point out that Scotland is one of the wealthiest countries in the world, can the Scottish Conservatives, in any of their manifestations, not realise the potential of this economy and have confidence in our ability to marshal those natural

resources, combine them with the talents of the people and live up to the excellence of the assessments from even the credit rating agencies?

Ruth Davidson: As the First Minister well knows, Standard and Poor’s did not give an independent Scotland its highest credit rating: an economic assessment is only one of the measures that it uses. To say that it did is misrepresenting its views.

It sounds to me from that answer as though the First Minister thinks that the Scotland Institute is wrong, which means that it joins a long list. Just since January, the First Minister has stood in the chamber and told us that the former director general of the legal service of the European Union Council is wrong; that the governor of the Bank of England is wrong; and that the First Minister of Wales, the Chancellor of the Exchequer, the shadow chancellor, the Institute of Directors and the Confederation of British Industry are wrong. He has told us that the Barclays chief executive is wrong—[*Interruption.*]

The Presiding Officer: Order.

Ruth Davidson: He has told us that the chief executives of Standard Life, the Royal Bank of Scotland, BP and Asda are wrong. He has stood up in the chamber and said that the Scottish Government’s own oil figures were wrong and that the Office of Budget Responsibility was wrong. He has said that Keith Cochrane, the chief executive of the Weir Group, was wrong; that Scottish Financial Enterprise was wrong; and that Scottish Engineering was wrong. He has said that the Institute for Fiscal Studies, the Centre for Public Policy for Regions and Citigroup were wrong. Finally, he said that the much celebrated Professor Hughes Hallett, the Scottish Government’s own economic adviser, was wrong, wrong, wrong.

First Minister, how does it feel to be so misunderstood?

The First Minister: In fairness to the independent governor of the Bank of England, I have never said any such thing. Indeed, I have defended his speech. Mark Carney had to correct Tory members of Parliament in the House of Commons who were similarly trying to misrepresent him, as Ruth Davidson has.

Also, I am not quite certain—is the CBI in or out of the better together campaign at present? [*Interruption.*] Perhaps the Labour Party, with its strong connections historically, can update us on the latest information—[*Interruption.*]

The Presiding Officer: Order.

The First Minister: I accept that for me, there is a question mark around the OBR.

“Right from the start the Tories used the OBR not just as part of the government but as part of the Conservative Party.”

I am quoting directly from Alistair Darling in the *Financial Times* of 9 July 2010.

I say to Ruth Davidson that, if the leader of the better together campaign—until Murdo Fraser takes over—believes that the OBR is an instrument of the Conservative Party, am I not entitled to question the OBR when it gets all its forecasts wrong?

Fundamentally, does the Conservative Party not recognise some of the analysis of Federal Fraser? The analysis is that, because the party lacks confidence in the people and the economy of Scotland, the people of Scotland lack confidence in the party. As long as the party pursues this doom-laden nonsense, it will stay rock bottom of the Scottish opinion polls.

The Presiding Officer: I say to the First Minister that members should use full names and not nicknames.

Kevin Stewart (Aberdeen Central) (SNP): The appearance in an Islamic State in Iraq and the Levant—ISIS—recruitment video of a young man who was raised in Aberdeen has shocked our Muslim community and all the people of the city. Does the First Minister agree that one individual's actions should not reflect on an entire community? Will he join me in calling on all Aberdonians to continue to live together as good neighbours, in peace and solidarity?

The First Minister: I whole-heartedly agree, as I believe and hope that the whole chamber does. One purpose of extremism is to seek to divide communities. We have been and continue to be constantly vigilant about radicalisation. Police Scotland has been active in monitoring that but also in engaging with and building strong relationships with the Muslim community.

As Kevin Stewart said, the actions of any individual should not and must not be seen as reflecting in any way mainstream opinion in any community of Scotland. We know from experience how well the country can react to such challenges. The integrated community response to the attack on Glasgow airport in 2007 showed Scotland at its very best. I believe that all fair-minded people in Aberdeen and across the country will support our zero-tolerance approach to any attempt to demonise or encourage hate crime against the Muslim community or any other minority group in Scotland.

“Transitioning to a new Scottish state”

3. Kenneth Gibson (Cunninghame North) (SNP): To ask the First Minister what the Scottish

Government's response is to Professor Dunleavy's report, “Transitioning to a new Scottish state”. (S4F-02217)

The First Minister (Alex Salmond): I could not help but notice that, in Ruth Davidson's long list of people whom I disagree with, Professor Dunleavy had miraculously disappeared, thanks to his report. The report is an important contribution to the referendum debate that vindicates the Scottish Government's position on the transition to a fully independent Scotland, as set out in our white paper.

Professor Dunleavy's report blows out of the water the Treasury figure of £2.7 billion, which was widely briefed to the media. Neither Danny Alexander, nor the Prime Minister, nor Ruth Davidson has been able to give a satisfactory explanation for that. However, the permanent secretary to the Treasury has stepped into the void. Sir Nicholas Macpherson has described the figure as a “misbriefing” of key data. It is about time that we found out exactly how that misbriefing was allowed to happen.

Kenneth Gibson: On page 3 of his report, Professor Dunleavy says that the main uncertainties that relate to the set-up and transition costs following a yes vote

“arise from the London government's apparent reluctance to do any planning for, or to make clear to Scottish voters, how a transition to independence would be handled at their end.”

Does the First Minister agree that the United Kingdom Government should immediately desist from issuing misleading figures and misinformation, some of which Professor Dunleavy has described as “bizarrely inaccurate” and “spectacularly wrong”? Does the First Minister agree that the Prime Minister should come to Scotland to debate the issues openly?

The First Minister: Professor Dunleavy's report says:

“Whitehall has been forbidden to discuss issues with Scottish officials and to do any contingency planning for independence, in case the conclusions suggest independence would not cause major problems.”

That is the analysis of the distinguished professor from the London School of Economics and Political Science.

The better together campaign quoted and cited Professor Dunleavy. The £2.7 billion figure was meant to be his, but he has demolished it and accused the Treasury of exaggerating his work by a factor of 12, which was generous of him—the Treasury's exaggerations are usually even greater than that.

Professor Dunleavy has demolished the Treasury's analysis and published his report. At

what stage will any of the unionist party leaders or any person in the better together campaign have the decency to accept and admit the “misbriefing” of Professor Dunleavy’s work? When Murdo Fraser makes his speech tonight, perhaps he will address that point. We wait with bated breath.

Liam McArthur (Orkney Islands) (LD): Professor Dunleavy estimates the cost at £200 million if, among other things, command and control of defence forces is shared with the UK until 2020. Will the First Minister confirm whether that is now Scottish Government policy?

The First Minister: First, that is not what Professor Dunleavy argued. Secondly, Liam McArthur will find a full exposition of defence costs and budget over the period in chapter 6 of the white paper.

It seemed to me unfortunate, at First Minister’s question time last week, that Liam McArthur’s colleague did not seem to have read the section on foreign and overseas representation in chapter 6 of the white paper. I find it doubly disappointing that that same chapter has apparently not been read by anyone in the Liberal Democrats. Do some reading, do some homework, and I will see you after the recess.

Drew Smith (Glasgow) (Lab): I wonder what the First Minister’s response is to Professor Dunleavy’s colleague, Iain McLean, who puts the set-up costs at £1.5 billion to £2 billion. He may want to check Professor Dunleavy’s blog entry from this morning.

Does the First Minister not understand that his Government’s failure to produce robust and comprehensive information about the cost estimates leaves the people of Scotland with the impression that the Scottish National Party would support independence regardless of the cost?

The First Minister: If the Labour Party had truly wanted to pursue this issue—the sticky wicket on which it is now batting—we would have heard something about it from Johann Lamont earlier today.

I do not have to respond to Professor Iain McLean. Incidentally, he believes in the scrapping of the Barnett formula—I would be interested to know whether that view is shared across the better together parties. I do not have to respond because Professor Dunleavy has already done it. He has looked at Iain McLean’s work and suggested why Iain McLean has been led astray.

Given the obvious evidence that Professor Dunleavy’s work, as cited by the better together campaign and Danny Alexander, has been comprehensively demolished by Professor Dunleavy himself—in other words, given that the source of the figure has said that the figure was

exaggerated by a factor of 12—at what stage will any of the better together parties accept that they got it wrong and that they owe a fundamental apology to the people of Scotland?

Fixed-odds Betting Terminals and Payday Lenders

4. Stuart McMillan (West Scotland) (SNP): To ask the First Minister what action the Scottish Government can take to tackle the proliferation of fixed-odds betting terminals and payday lenders on the country’s high streets. (S4F-02210)

The First Minister (Alex Salmond): Direct action on those areas is reserved, but within our powers we are taking what action we can. Scottish ministers held a summit on 23 April on payday lending and gambling, and the Minister for Local Government and Planning will shortly publish the action plan that followed the summit.

As a first step, the new Scottish planning policy, which was put in place this week, acknowledged concerns about the proliferation of payday lenders and fixed-odds betting terminals on some high streets. Local authorities, through their town centre strategies, can develop policies to restrict such uses to protect the amenity of centres and, of course, the wellbeing of communities.

However, in terms of direct action, this is one area in which we need the powers of this Parliament to extend over key aspects that are affecting the social life of Scotland.

Stuart McMillan: I welcomed the publication of the document earlier this week. I have met former gamblers and the campaign for fairer gambling, and tonight I will be a guest at a Gamblers Anonymous meeting in Renfrewshire. Those groups are firmly of the opinion that the only way to combat the issue of fixed-odds betting terminals is with a reduction of the maximum stake on those machines to £2, which I support. Does the First Minister agree that the United Kingdom Government must act now to tackle the problem of those machines in our communities and will he commit to raise the matter directly with the UK Government?

The First Minister: We have made representations to the UK Government over a substantial period, expressing our concerns over developments such as the growth of fixed-odds betting terminals. Most recently, a letter was sent on 29 May that highlighted the risks to public health and called for a more preventative approach to be taken.

We will continue to press for action, but page 116 of the white paper lays out what we intend to do on this and the other matters that Stuart McMillan raised, once we have control of regulation. It also lays out our approach to tougher

regulation of payday lenders in an independent Scotland. I hope that that reassures Stuart McMillan that we are doing what we can with the powers that we have, and that we would seek to do more when this Parliament has the powers of an independent Parliament.

“Management Information Year End 2013/14”

5. Graeme Pearson (South Scotland) (Lab): To ask the First Minister what the Scottish Government’s response is to the Police Scotland report, “Management Information Year End 2013/14”. (S4F-02211)

The First Minister (Alex Salmond): As Graeme Pearson knows, Police Scotland’s management information gives a snapshot of the strong progress that it has made in its first year, with all parts of Scotland now enjoying the benefits of a single service.

Our “Recorded Crime in Scotland 2012-13” national statistics bulletin shows that recorded crime has decreased by 35 per cent since 2006-07, and that crime is at its lowest level for 39 years. I think that that drop is supported by the 1,000 additional police officers—in comparison with 2007—that we have delivered.

Police Scotland and the Scottish Police Authority are working together to safeguard local policing and enhance access to the specialist resources. They are doing that against the backcloth of continuing Westminster austerity.

Graeme Pearson: I commend police officers and the remaining police staff for the work that they do on our behalf.

Given the recent controversy over stop and search statistics, the First Minister might wish to know that, for almost six months, I have asked for the notes of guidance for crime recording, along with a briefing to understand the impacts of widening the use of the subsuming of crimes and fixed-penalty tickets on the reporting of figures. I still await the briefing—it appears inordinately difficult to achieve—after long delays.

Will the First Minister enable a briefing at the earliest opportunity, recognising the need for public confidence in those figures?

The First Minister: I do not accept that people do not have confidence in the recorded crime figures in the Scottish national statistics. They are kite-marked figures from national statistics. I do not think that Graeme Pearson should question them. After all, they are on the same basis as the figures that the Labour Party and the Liberal Democrats used when they were in power. I see no reason for questioning the basis of the figures now.

If Graeme Pearson writes to me, detailing the areas that he has raised with the Police Authority and Police Scotland, I will write to him to say what further information can be provided.

In acknowledging the contribution of police officers, and the additional 1,000 police officers who have made a substantial contribution to the fact that we have the lowest crime levels in Scotland for 39 years—

Duncan McNeil (Greenock and Inverclyde) (Lab): Across the world.

The First Minister: We hear that it is across the world. We need only glance south of the border to see that, in the past three years, England and Wales have lost as many officers as the total complement of the Scottish police force. I believe that the decline in crime figures in Scotland is due to the hard work of the extra police officers that we have on the streets and in the communities of Scotland. Everybody knows that they would not be there if the Labour Party had been maintained in power.

Emergency Patients (Movement)

6. Murdo Fraser (Mid Scotland and Fife) (Con): To ask the First Minister what the Scottish Government’s response is to remarks made by the chief executive of the national health service regarding the movement of emergency patients. (S4F-02222)

The First Minister (Alex Salmond): We agree with them, which is not that surprising, given that Paul Gray is not only the chief executive of NHS Scotland but the Scottish Government’s director general of health and social care.

Murdo Fraser: I think that I asked the First Minister what his response was, but I’m not sure that I heard one.

Given that a large influx of visitors to Scotland is expected for the Commonwealth games, how confident is the First Minister that the already strained national health service will be able to cope with the additional demand? What extra resources are being made available to help to avoid even greater delays at accident and emergency departments than we currently have?

The First Minister: I have already pointed out that we are working to improve the 93 per cent figure in accident and emergency, but I have also pointed out that that is rather greater than the 87 per cent figure that was hailed as a success in 2006.

The planning for the Commonwealth games that Murdo Fraser refers to is very much part of the Commonwealth games structure. We are absolutely confident that we can cope with any contingency in terms of the performance of the

national health service in Scotland. I know that Murdo Fraser will want to acknowledge that, with regard to the Clutha tragedy, the national health service responded exceptionally well. That is part of the planning for the Commonwealth games.

I know that Murdo Fraser will be the first to understand the point that was made by Brian Keighley that, within the constraints of the Barnett formula, even when we resource health in real terms, there is a constraint. That is presumably why Murdo Fraser is trying to break out of that straitjacket with his enunciation of a federal solution. Of course, there is a difficulty. When Murdo Fraser was in favour of more devolution, Ruth Davidson had a line in the sand. Now that Ruth Davidson is in favour of more devolution, Murdo Fraser has moved to federalism. No doubt, when Ruth Davidson moves to federalism, Murdo Fraser will move towards supporting independence. However, I am confident that the independence campaign will survive that endorsement and go on to victory on 18 September.

Your GP Cares Campaign

The Deputy Presiding Officer (Elaine Smith):

The next item of business is a members' business debate on motion S4M-10122, in the name of Alison McInnes, on the your GP cares campaign. The debate will be concluded without any question being put. I would be grateful if those members who wish to speak in the debate would press their request-to-speak button as soon as possible.

Motion debated,

That the Parliament notes the launch of the Your GP Cares campaign by the British Medical Association (BMA) Scotland; considers that this new campaign highlights that GPs are facing unsustainable pressures, with larger patient lists and growing demand for their services for reasons including demographic changes and the increasing prevalence of more complex health needs; notes that the campaign is calling for sustainable investment in GP services to attract, retain and expand GP numbers, strengthen the practice staff team and ensure that all GP premises are fit for purpose; is concerned that some GP practices in the North East region, already possessing patient lists that are among the largest in Scotland, are ill-equipped to serve communities with burgeoning populations; commends what it considers the outstanding work of GPs across Scotland; believes that they will become even more important to their patients with the shift to delivering preventative care and the integration of health and social care services, and considers it essential that they have the capability to respond to local needs and meet the demands placed on them.

12:35

Alison McInnes (North East Scotland) (LD): I start by thanking those MSPs who supported my motion and enabled it to be debated today.

The British Medical Association's your GP cares campaign emphasises that general practice is the cornerstone of the national health service and is at the heart of every community. The service provided by general practitioners and primary healthcare teams—from professionals covering vast remote areas to those working in large city practices—is appreciated the length and breadth of the country and admired across the chamber.

Amid a wealth of specialisms and the involvement of departments across the health service and beyond, GPs are often the only constant during a patient's care, identifying symptoms, assessing needs, signposting to other services and co-ordinating a joined-up approach to the patient's care. That continuity means that GPs are capable of developing the most acute understanding of individuals' overall health.

Providing more than 24 million consultations each year, GPs are integral to improving Scotland's health and wellbeing and to the objective to shift the balance of treatment and care away from hospitals towards primary settings.

The your GP cares campaign highlights the need for that patient shift to be accompanied by an appropriate transfer of resources to and investment in primary care team personnel and practice infrastructure. It draws our attention to the challenges posed by patients' changing needs.

In the gallery today is Dr Alan McDevitt, chairman of the BMA's Scottish GP committee. He tells us:

"There are more patients to see, more test results to read and more paperwork. Yet there are still the same number of hours in the day and many GP surgeries are simply overwhelmed."

ISD Scotland data shows that the number of patient contacts with GPs and practice nurses has increased by 10 per cent during the past decade. Twelve per cent of registered patients now visit their local practice 10 or more times a year. The intense workload can, in part, be attributed to our growing ageing population and the need to support people who are living longer with complex, chronic or multiple health conditions. Long-term conditions already account for the majority of consultations, but the prevalence of conditions such as dementia will soar as the number of people aged over 75 doubles during the next 20 years.

The demands on general practice are particularly acute in my own North East Scotland region, and there is real concern that they are affecting GPs' ability to best care for their patients. Official statistics show that six of the biggest 20 practices, by patient list size, are in the north-east. Many serve areas with burgeoning populations and two possess more than 20,000 patients. Facilities are already creaking and yet the third national planning framework, which was published this week, reminds us the north-east's population will grow by 23 per cent by 2035.

A question mark still hangs over the provision of a medical centre for the new town of Chapelton—a development that will provide up to 8,000 homes. That has caused my constituents to fear that the nearby Portlethen medical centre, which is already one of the busiest in the country, could soon be overwhelmed. Elsewhere, staff at Ellon health centre are striving to provide for a growing community, but they are hampered by premises that are no longer fit for purpose, having been built when the town was a fraction of its current size. NHS Grampian says that it will be "some years" before it is replaced. Such situations are common across Scotland.

The Scottish Liberal Democrats believe that communities know best how to run locally responsive services. It would therefore be remiss of me not to note that the Scottish Government seized control of health boards' capital budgets, stripping them of powers to tackle infrastructure

problems as they see fit. This year, NHS Grampian will receive less than 2 per cent of non-formula capital spend for specific projects.

This week, the Cabinet Secretary for Health and Wellbeing confirmed to my colleague Jim Hume that the proportion of the NHS budget that is spent on primary medical services has fallen under this Government. It peaked at 9.1 per cent under the Liberal Democrat-Labour Administration and has fallen to 7.5 per cent this year.

General practice is the gateway to the wider NHS. Clinical decisions that are made in general practice commit more than half of total NHS expenditure. The Scottish Government must therefore ensure that general practice is sufficiently resourced to take the right decisions and that opportunities to build relationships with patients, understand their needs and effectively communicate what is happening are enhanced, not diminished, as care shifts from acute to primary settings.

Indeed, GPs' workloads have already soared as the profession struggles to attract and retain talent. Young doctors appear to be pursuing other specialisms. In the Aberdeenshire community health partnership, the number who are working part time has increased by 9 per cent in the past five years alone. Worryingly, I have been told that early retirements are up, with more than a third of staff in their 50s. Others are emigrating in search of a better work-life balance.

This morning, *The Scotsman* reported that more than 30 practices across Scotland are operating an "open but full" policy and are accepting registrations on a limited basis only. However, Dr McDevitt has told us that many practices

"wouldn't be able to take on a new doctor even if they wanted to."

The Scottish Government must therefore intensify its efforts to attract and retain GPs and reverse the losses that have been experienced during the past three years.

We cannot expect GPs and practice staff to spend more time with patients and provide more appropriate care closer to home without sufficient resources, additional staff or appropriate facilities. As the nature of primary care changes, it is imperative that health boards and GPs are capable of responding to local needs and demands. They must be empowered to provide integrated and sustainable primary health services that are rooted in communities, focused on every aspect of patients' health, delivered in a fitting environment and of the highest quality.

I would be grateful if the minister could therefore tell us whether he considers the current distribution of total NHS expenditure to be

appropriate. Will he hand back some power over capital spending to boards or ensure a fairer allocation? I would welcome details of how he intends to attract and retain the staff who are required to deliver shared objectives, including those of enhancing preventative care, reducing hospital admissions, tackling the unacceptable number of delayed discharges and integrating adult health and social care services.

The Deputy Presiding Officer: We are quite tight for time, so I ask members to keep to four minutes, please.

12:42

Malcolm Chisholm (Edinburgh Northern and Leith) (Lab): I congratulate Alison McInnes on bringing forward this important debate.

Obviously, I support the your GP cares campaign, which is, I think, running in tandem with the put patients first: back general practice campaign by the Royal College of General Practitioners. Actually, I learned some of the details about the your GP cares campaign from members of the Royal College of General Practitioners at a meeting some time ago.

The key thing is to look at the percentage of NHS spending that goes into general practice, which has declined from somewhere over 9 per cent a decade ago to somewhere over 7 per cent now. That, of course, has happened at a time when the number of consultations in primary care has gone up. Alison McInnes quoted a general figure of a 10 per cent increase over the same period, much of which, of course, is relates to practice nurse consultations, but GP consultations have also gone up significantly.

That is happening already, and as we look to the future, the need for more work to be done in primary care will be accentuated. We have a growing elderly population; there is the whole policy shift in the balance of care towards primary care, which successive Governments have supported over the past decade; and, as the motion mentions, there are issues relating to

“delivering preventative care and the integration of health and social care services”.

It is therefore clear that there is a big challenge for the NHS. The fundamental issue is that the proportion of resources that go into primary care will have to shift significantly. I realise that that is not easy, as we all know about the pressures that there are on hospital services as well, but it is quite clear that that shift must take place.

I know that the Government is beginning to engage with that. For example, when I wrote to the cabinet secretary about the issue, he referred to shifting £36 million from the quality and outcomes

framework into the core GP contract. Although that is not extra money for general practice, it means that that money can be spent differently. Having said that, the quality and outcomes framework has been a generally positive development since the first GP contract 10 years ago.

The new GP contract, which is currently being negotiated in Scotland, also presents a great opportunity to address some of those issues. I will be interested to hear what the minister says about progress on that.

There are particular challenges in Edinburgh in that respect, including in my constituency. Alison McInnes referred to the burgeoning population of the north-east of Scotland, which I am pleased to hear about. However, I think that the part of Scotland with the most rapidly growing population is Edinburgh. I get quite a few letters from constituents who find it difficult to access a practice in my constituency, although they all find somewhere in due course. While I am glad that NHS Lothian is opening up a new practice in the Leith community treatment centre, that will not address the problem. The health board realises that and has commissioned two reports. It has said that we need 33 new GP surgeries in Lothian in the near future. We will all keep a close watch on what those reports recommend. I hope that they come up with proposals very soon.

The issue is not just the number of practices but the quality of practices. Almost a third of practice buildings in Lothian need to be extended or modernised. I am told by my GP, who is absolutely superb, that her practice is top of the list for that modernisation work. I should therefore declare a close personal interest in the issue.

We also have more general issues, such as the difficulty in recruiting GPs and the time lag for training. There are clearly many challenges there, and addressing those major issues must be a priority for the Government.

12:47

Graeme Dey (Angus South) (SNP): I congratulate Alison McInnes on securing the debate.

BMA Scotland's your GP cares campaign highlights a number of important issues. However, it has shone a light on an issue that it perhaps did not intend to. The future delivery of services in our communities, especially our rural communities, is worthy of consideration, not least because it is beyond any doubt that fractures have developed in the relationship between the general public and general practitioners. If my mailbag is anything to go by, the principal cause of that is the difficulty that people encounter when they seek to secure

surgery-based appointments, let alone home visits.

Having spent half a day shadowing in a busy GP practice in Carnoustie last year, I am not without sympathy for some of the challenges faced by those charged with delivering the services. There is unquestionably an issue over attracting locums and indeed the next generation of GPs. Demand for appointments in Carnoustie is 50 per cent higher than the national average. Ironically, up-and-coming GPs encounter a greatly reduced workload in surgeries that are based in some deprived city areas in comparison with surgeries in more affluent rural areas, such as Angus. That draws many GPs to the conurbations.

The likes of Carnoustie and nearby Monifieth also have a growing ageing population, with the service demand that that presents. NHS Tayside responded to that with a pilot project over the winter months, which aimed to assist in dealing with dementia sufferers and prevent avoidable hospital admission. However, although the pilot was so successful that it is to be extended, those issues will not go away.

There is also the bane of any GP practice: the patients who want a doctor to remove a splinter from their finger or provide antibiotics for a cold, or who insist on seeing a specific GP.

It is worth noting that GP numbers in Scotland have gone up by 5.7 per cent under this Government and that the sum invested in primary care services in 2012-13 was 10 per cent more than in 2006.

In the interests of balance, it must be said that while additional resources, if available or practically redeployable, could and would alleviate the situation, so too would doctors working the same kind of hours as the wider public. I met a GP practice partner recently after they contacted me about the campaign. They pointed out the levels of depression, stress, divorce and alcoholism in the medical profession and told me that if we politicians would answer one plea from medics it would be not to ask more of GPs because, as a profession, they simply cannot cope and would be put in a position where mistakes would be made. At the same time, they readily acknowledged that their present contracted working week consisted of just eight clinical sessions, with a further session set aside for paperwork.

General practitioners play a vital role in the health service, where they act as gatekeepers. We would not want them to be placed under such strain that they were making errors, but are we really saying that that sort of working week represents an appropriate return on what, for partners in a GP practice, is a substantial salary, especially when there is an increasing demand for

access to services, which somehow has to be met?

There is a case to be made for the redeployment of financial resources as more services are delivered in our communities, but there has to be give and take on that because the Scottish Government cannot somehow magic up additional sums of money for GP practices.

Alison McInnes: I am a little bit disturbed by the angle that the member is taking. He must understand that the GP's workload is significantly more than the patient contact time.

Graeme Dey: I am simply reflecting the experiences that I have had of talking to GPs in my own constituency.

Neil Findlay (Lothian) (Lab): Given what he has just said, would the member suggest the number of hours in a GP's working week? How should GPs work in his world?

Graeme Dey: I am simply making the point that there has to be compromise if we are going to make progress, and we have to look at the issues in the round.

The BMA is quite entitled to speak out on behalf of its members, but so too is the Royal College of Nursing in Scotland. It was interesting to note from the briefing that the RCN provided ahead of the debate that although the number of visits to GP practices has increased from around 21.7 million in 2003-04 to 24.2 million in 2012-13, there was an increase in GP consultations of just 3.9 per cent, in comparison with an increase of 31 per cent for practice nurse consultations.

If we are to consider how health services should be delivered locally, we also need to look at the roles played by other organisations. An example is the community drop-in service that being provided by Action on Hearing Loss Scotland. Since that service started in Angus in 2010, the organisation has re-tubed 2,700 hearing aids, carried out 2,200 interventions and distributed 25,800 batteries, all of which reduced the workload on the NHS. That was evidenced by reviewed figures that show that, during the past three and a half years, service users have been spared a trip to Ninewells or Stracathro, travelling 17,000 fewer miles, yet, as things stand, that is not matched by funding moving from the NHS to Action on Hearing Loss—although the organisation will shortly be chapping the door of NHS Tayside. Meanwhile, one local GP practice has announced that it is no longer willing to dispense hearing aid batteries because staff do not have the time.

There is a debate to be had on the subject, but it needs to be a balanced debate that sees all sides willing to compromise in the interests of ensuring

that the needs of the patient are met in the best way.

12:52

Nanette Milne (North East Scotland) (Con): I welcome the debate, and congratulate Alison McInnes on securing parliamentary time for it.

I readily acknowledge the increasing demands on primary care and the pressures that those are causing for GPs and their practice teams, leading to difficulty in recruiting and retaining new entrants. Thanks to the BMA's your GP cares campaign, those pressures are becoming more widely known within the Scottish community. That is a good thing.

There have been issues with primary care throughout my 11 years in the Parliament. A decade ago, I was happy to support the 2004 GP contract, which removed from GPs their 24/7 responsibility for patients, because it was also very difficult at that time to recruit and retain younger doctors, growing numbers of whom were unwilling to accept the round-the-clock commitment of their predecessors.

During the ensuing years, there have been significant concerns about out-of-hours care provision, particularly in some of the more remote parts of Scotland. It took some time for NHS 24 to settle in and for the public generally to accept it. The primary care medical workforce has become increasingly part time, partly because of the predominance of female doctors who want a work-life balance that fits with their parenting role, but also because of an increasing number of men who combine general practice with other part-time appointments, such as teaching or hospital work.

In the meantime, patient demand has escalated, lists are bigger and the demographic change means that more patients are living longer with comorbidities and more complex medical conditions. All that is happening at a time of financial stringency, when spending has to be carefully planned and controlled.

The NHS in Scotland has benefited from the UK Government's decision to protect the NHS budget and from the Scottish Government's decision to ring fence the ensuing Barnett consequential for the Scottish health budget. My party has not agreed with all the Scottish Government's policy decisions on how to spend that money—for example, we disagree with free prescriptions for higher rate taxpayers who can afford to pay—but we have campaigned for more investment in primary care through the restoration of a universal GP-attached health visitor service. We therefore very much welcome last week's announcement of 500 new health visitor posts, which will provide significant support to GPs, particularly in the more

deprived parts of the country. Likewise, we were pleased with the recent changes to the Scottish contract, which removed some of the bureaucratic box ticking and allowed GPs to have a bit more face-to-face contact with their patients.

However, in the face of growing pressures on the service, the Government's 2020 vision for more care to be provided in the community and the integration of health and social care—a policy that will require GPs to be at the heart of the primary care team if it is to be successful—a good, hard look needs to be taken at how services will be provided in the future, with the Scottish community involved at the heart of the debate.

I endorse the BMA's concern about the need for fit-for-purpose primary care premises. In the north-east, we have seen a few excellent developments recently, such as the Calsayseat and Woodside health centres in Aberdeen, and we look forward to the approved new health centre in Inverurie. However, there are concerns in my area—as Alison McInnes has rightly pointed out—with rapidly growing populations throughout Aberdeenshire and new settlements being built, for example around Portlethen, without provision of the primary care facilities that will be needed by the increased population. There is also a need to replace buildings such as the Foresterhill health centre in Aberdeen, where my husband used to work, which was state of the art when it opened in 1979 but is now well past its sell-by date.

The motion raises some serious issues that cannot be dealt with adequately in such a short debate but which merit much fuller discussion in the chamber. I hope that the minister will pay heed to that.

Once again, I commend Alison McInnes for drawing the BMA's campaign to our attention.

12:56

Neil Findlay (Lothian) (Lab): I congratulate Alison McInnes on securing the debate.

As we heard at First Minister's question time, on Monday, Brian Keighley, the well-respected outgoing chairman of the BMA in Scotland, gave his farewell speech to the conference. In it, he compared the NHS to the Titanic and said that it is teetering on the brink. Highlighting a range of issues from cancer treatment to the care crisis and hospital food, he said:

"What I have seen over the past five years is the continuing crisis management of the longest car crash in my memory—and it is time for our politicians to face up to some very hard questions."

The Deputy Presiding Officer: Mr Findlay, can you relate your speech to the your GP cares campaign?

Neil Findlay: I am about to do so, Presiding Officer.

I put on record my thanks to Dr Keighley both for his commitment and service to the BMA and for his willingness to be so frank. He agrees with what we have been saying for the past two years. It is simple—the NHS in Scotland cannot go on as it is, and the Government cannot continue to pretend that it can gloss over deep-seated problems with spin and bluster.

One of those concerns is GP provision. GPs are on the front line of the system. With people living longer with multiple complex health problems, and with rising demand and expectation, the pressure on our community GP practices is growing by the day. According to NHS Lothian, 26 GP practices in my region have either completely or partially closed their lists and patients cannot get access to their local doctor. We have recruitment problems, especially in rural areas, and budgets have been cut by 2 per cent, as we have heard.

It is in our most deprived communities that the pressures on the NHS and GPs are at their most pressing. I recently met some Glasgow GPs who operate in one of the deep-end practices. They told me of the vast number of complex and extremely time-consuming cases that they have to deal with, yet that practice had gone without a health visitor for over a year and they had never met the social workers who deal with their clients. I find that both astonishing and thoroughly depressing. They also raised the issue of the inverse care law, which entrenches health inequalities by giving similar levels of funding to wealthy, healthy areas and to areas of deprivation and poor health.

I welcome the work of the deep-end GPs and the your GP cares campaign, which highlights the need to develop premises, strengthen practice teams and attract new entrants. It is vital for all our constituents that we do those things. As a councillor, I drove through a project in my community that brought together two GP practices, sports facilities, a library, a dentist's, a cafe and a pharmacy. It also brought together Jobcentre Plus and a range of services in a new, purpose-built facility. That is how I see community services developing. The GPs who work there now prescribe swimming or gym sessions rather than drugs. They refer on to housing and the jobcentre and have immediate access to dental and pharmacy services. Those GPs are working collaboratively to deliver better outcomes for patients. That is the service integration that we are seeing in West Lothian, and I recommend that others follow that example.

I was surprised to hear Graeme Dey imply that GPs are not working flexibly or for an appropriate number of hours. I ask him to reflect on that

argument. It is like people observing the Parliament and asking why MSPs are paid almost £60,000 a year when we are here for only three afternoons a week. I think that the irony of his argument has passed him by.

12:59

The Minister for Public Health (Michael Matheson): As everyone in the chamber has done, I congratulate Alison McInnes on securing the debate. As every member who has spoken has also done, I recognise the fantastic job that our general practitioners do. They provide a vital service that lies at the heart of our vision of delivering an integrated health and social care system. In recognising the key role that GPs play in our system, it is important that we ensure that we have in place processes that allow them to maximise their potential in helping to shape health and social care in a community setting.

Alison McInnes and Malcolm Chisholm recognised the stark challenges that the demographic shift we face presents us with. By 2033, the number of people who are over the age of 75 is likely to have increased by almost 60 per cent, and with age, as with poverty, comes a higher chance of having a long-term illness. Many individuals will have such a condition at that point in their lives. Those are real challenges, and we need to ensure that we do the right work to support the general practice profession and the NHS so that they can meet them.

I want to outline some of the actions that we are taking to support our GPs in meeting those challenges. We have been working closely with the profession to modernise the GP contract and to transform our approach to the delivery of primary care. The 2014-15 general medical services contract in Scotland has been negotiated and agreed with the Scottish general practitioners committee. As well as bringing direct benefits for patients, it will reduce bureaucracy for GPs through a 30 per cent reduction in the QOF, which Malcolm Chisholm referred to. The transfer of around £36 million from the QOF into the core contract will help to provide greater financial stability for practices and will give GPs a greater opportunity to make judgments about how that resource should be used. It will also give them greater flexibility to make clinical judgments on how they can best meet the needs of their patients.

The contract enables each GP practice to become involved in integration planning and decision making through a lead GP who will link with the local partnership organisation. That is a key element of the role that general practice needs to perform in the future. As part of the contract, each practice will undertake a review of access

and will participate in a programme of quality improvement.

The 2014-15 contract also places greater trust in the professionalism of GPs. I believe that it gives us a good platform for some of the further development work that needs to take place if we are to create sustainable general practice provision in Scotland. Overall, the Government's ambition is for a GP contract that gives GPs the time to do what they really want to do—to work with individuals to ensure that their medical care is right for them, their families, their carers and the local environment.

Malcolm Chisholm: Could the minister clarify whether the contract has been finalised? He referred to the 2014-15 contract. Are negotiations continuing, or is that it for the foreseeable future?

Michael Matheson: We have agreed how we can build on the 2014-15 contract and how, moving forward, we can ensure that we shape the contract so that it reflects the needs of general practice in Scotland. We will do that with the Scottish general practitioners committee, so that we can develop the contract to ensure not only that it reflects our values and needs but that it tackles issues such as recruitment and retention, which Alison McInnes and Nanette Milne highlighted.

In addition, a range of work can be done outwith the contract to modernise general practice. It should be recognised that a tremendous amount of innovative improvement exercises are already being undertaken at local level. We are working with a number of practices to understand what works and how it works.

We have also provided £1 million this year to the primary care modernisation programme to look at how we can build on areas where good practice has been identified. The first stage of that programme is the strategic assessments of primary care that boards will conduct at a local level and which should form part of their local planning process for 2014-15. We are also co-funding a programme of work that is being led by NHS Highland to develop and test models of healthcare delivery that are sustainable in remote and rural areas. We have provided £1.5 million to allow the programme to test different models of how we can meet the challenge of recruitment and retention, particularly in rural areas, and assess what model of care can best meet the needs of those local communities.

Nanette Milne referred to a point that Alison McInnes made about the planning of housing developments and the pressure that they can place on local service delivery. Health boards are key participants in developing local development plans. That is to allow the planning of sufficient

healthcare provision in relation to any local development plan that is being taken forward by a local authority. Scottish planning policy makes it clear that local authorities must take account of the availability of public services and infrastructure, including primary healthcare provision, when assessing sites for new housing developments. That must be seen as being part of the core purpose of carrying out the local assessment process.

Nanette Milne rose—

Michael Matheson: I will give way to Nanette Milne.

The Deputy Presiding Officer: Briefly please, as the minister is in his final minute.

Nanette Milne: Does the minister accept that there is a time lag between the developments that we are currently faced with and the projected medical facilities, because they will arrive some years down the line? There is going to be a significant time gap in the middle, which is what is worrying Alison McInnes and me.

Michael Matheson: That is why the planning of primary healthcare provision is a key part of local authorities' local planning processes, which look years ahead. It is covered in Scottish planning policy to make sure that it is being done effectively. If local authorities are not doing it—Alison McInnes appears to be indicating from a sedentary position that they are not—the matter must be pursued vigorously with local authorities to ensure that the planning of primary healthcare provision is taken account of and is part of the local development plan. However, I recognise that local authorities are experiencing specific pressures.

I am conscious that the Presiding Officer is keen for the debate to finish on time, so I will just say that we are taking forward work in a range of other areas and providing resource support to general practices in Scotland. However, I hope that I have set out some of the challenges that we as a Government are seeking to take forward as part of our delivery of the 2020 vision for health and social care. Members can be assured that we see general practices as key to delivering the best possible quality of healthcare for individuals at a local level. We will continue to work with partners in the BMA and in the healthcare sector overall to ensure that we continue to deliver that healthcare in the years to come.

13:07

Meeting suspended.

14:30

On resuming—

Budget Outturn 2013-14

The Deputy Presiding Officer (John Scott):

Good afternoon, everyone. The first item of business this afternoon is a statement by John Swinney on the provisional outturn for 2013-14. The cabinet secretary will take questions at the end of his statement and there should therefore be no interventions or interruptions. Cabinet secretary, if you are ready, you have 10 minutes.

The Cabinet Secretary for Finance, Employment and Sustainable Growth (John Swinney): I am grateful for the opportunity to inform the Parliament of the Scottish Government's provisional financial outturn for 2013-14.

The Government attaches the greatest priority to the effective management of the public finances and the information that I will set out to the Parliament today is further demonstration of the Government fulfilling that commitment. It is essential that we maximise the value of every public pound as we take forward programmes to support economic recovery and deliver high-quality, efficient public services.

Today's outturn figures must also be set in the context of continued United Kingdom Government reductions to the Scottish budget. Since 2010-11, the Scottish Government has managed an almost 8 per cent real-terms decline in public spending while supporting our economy and investing in public services.

As a demonstration of this Government's sound financial management, I can report to the Parliament that within the fiscal departmental expenditure limit—the resources over which this Parliament has discretion—the provisional outturn for 2013-14 is expenditure of £28,238 million against a limit of £28,383 million, delivering an overall cash underspend of £145 million. That reflects an underspend of £144 million on resource and £1 million on capital budgets.

There is also a provisional outturn underspend of £31 million in respect of financial transactions. As I confirmed in the draft budget 2014-15 last September, those resources will be carried forward to support help to buy in 2014-15, reflecting the fact that the scheme commenced part way through financial year 2013-14.

Finally, in respect of non-cash DEL, there is a provisional outturn underspend of £111 million, after taking account of the pre-planned budget exchange carry-forward of £42 million to support our plans in 2014-15. That non-cash underspend reflects differences between expected accounting

adjustments and actual amounts. For example, £56 million of that total relates to less than anticipated write-down of the carrying value of the income-contingent repayment student loan book. The non-cash underspend does not reflect resources that could be spent on public services.

To summarise, by using the budget exchange mechanism to carry forward £218 million, the overall underspend based on the provisional outturn for 2013-14 is £111 million of non-cash resources, which represents less than 0.4 per cent of the total 2013-14 budgets of Her Majesty's Treasury. None of that underspend represents any loss of spending power on behalf of the Scottish Government.

At the time of the spending review in 2011, I made it clear to the Parliament that I would plan our public expenditure using budget exchange facilities over a three-year period to level out fluctuations in the resources available to us. I estimated that that would require my having to find £57 million to support our plans in 2014-15 and I confirm that that has been achieved as part of the £145 million fiscal DEL underspend.

As the spending review has progressed, other financial commitments have emerged that the Parliament has agreed that we must try to address. One of the most significant has been the mitigation of welfare reform measures. In 2013-14 and 2014-15, those measures include funding for the council tax reduction scheme, which is benefiting over 500,000 people, support for the Scottish welfare fund and the increased funding of discretionary housing payments. We will use resources carried forward in the budget exchange mechanism to fulfil our commitment to mitigate the effects of welfare reform where we are able to do so. Our financial commitment to welfare mitigation is now £260 million over the period 2013-14 to 2015-16. I welcome the broad support that the Parliament has shown for this area of our activity.

Our choices about public spending continue to be focused on the economy. We have seen continual growth for almost two years and rising confidence across both households and the private sector. The economy is growing, employment is rising and business confidence continues to increase.

We are continuing to support employment, including by maintaining our record commitment to modern apprenticeships and working with our local authority partners to take forward our commitment to early learning and childcare. A priority will be to work with our delivery partners in following up the report of the Wood review. I have already confirmed that additional resources of £12 million will be available in 2014-15 to support initial work in that area.

Although the outlook remains positive, Scotland's economy will face headwinds, such as the relatively subdued recovery in key export markets such as the European Union, as well as legacy effects from the financial crisis that continue to take time to unwind.

In response to continuing challenges in the housing market, we confirmed in April and May further allocations that amount to £50.3 million in financial transactions funding for the help to buy scheme in 2014-15. That brings overall investment in the help to buy (Scotland) scheme to £275 million. That investment has brought substantial support to the construction sector in Scotland.

At the same time, the Scottish Government has continued to provide support to Scottish businesses and households through the small business bonus scheme and our support for a social wage and a council tax freeze.

Throughout the recession and the recovery, the Government has taken the firm view that infrastructure investment has a central part to play in boosting the economy. Today's outturn figures demonstrate how we are maximising the impact of our capital budget each year in the face of the real-terms reduction of 26 per cent that the chancellor has made to our capital budget over the current spending review period.

In 2013-14, we expanded the infrastructure programme by switching from resource budgets to capital budgets. I will write to the Finance Committee to set out the final details of the 2013-14 resource-to-capital switches.

We also remain fully committed to the non-profit-distributing pipeline of infrastructure projects. The Aberdeen health village, which was the first revenue-funded finance project, was opened in 2013-14; £750 million-worth of projects are in construction and another £1.35 billion of projects are in procurement. We expect all major NPD projects to begin construction in the coming financial year. For example, the £46 million acute mental health and North Ayrshire community hospital project will start construction on the site of Ayrshire central hospital in Irvine shortly.

In April, I announced to the Parliament that we will continue that approach with a £1 billion increase in the NPD pipeline, extending it to 2019-20. That will provide the construction sector with the long-term certainty of a pipeline of work. That expansion is taking place within the framework that we have established that future revenue payments in support of NPD should not exceed 5 per cent of revenue budgets. That ensures that we can deliver now for the economy without overconstraining future budget choices.

The Scottish Futures Trust is considering a range of infrastructure investments. I will confirm

in the draft budget in the autumn the full detail of the planned extension, which will build on the successes of our current programmes in delivering colleges, schools, roads, hospitals and community health facilities across Scotland. However, where we are able to make progress now, I am clear that we should do so.

I am pleased to confirm today two significant decisions about that additional investment at Aberdeen royal infirmary and in our schools programme.

We will allocate £120 million in NPD investment to fund two developments at the Aberdeen royal infirmary campus. We will fund a new maternity hospital on the ARI site. NHS Grampian has identified in its maternity services strategy that Aberdeen maternity hospital will continue to provide a specialist obstetrics and neonatal service, accommodate a community maternity unit for Aberdeen and the surrounding area, and provide support for maternity services across Grampian. A new hospital will provide high-quality new facilities as well as remove £4.2 million-worth of backlog maintenance and reduce estates and facilities costs. NHS Grampian's plan is that the new hospital would be designated a women's hospital and would include accommodation for all existing services as well as the neonatal unit, theatres and gynaecology in-patient and out-patient services.

The new maternity hospital will be followed by the development of a cancer centre, which is another important element of the development of the campus. That centre will enable the co-location of our cancer services, which are currently spread across the Aberdeen royal infirmary site, and enable the delivery of care that is patient centred, safe and effective in the face of increases in population and forecast demand.

The development would complement existing investment that has been pursued through national radiotherapy programme funding. That has provided replacement linear accelerators and bunkers in a new radiotherapy department, which has been sited to be consistent with the future development of the cancer centre.

The second major decision, which I am also pleased to announce, is the immediate release of a further £100 million of NPD investment in school infrastructure through the Government's "Scotland's schools for the future" school building programme. The Government and our local authority partners share the objective of working to improve the quality of the school estate and ensuring that young people are educated in appropriate conditions in the 21st century.

We are making progress on that objective, as I saw at first hand when I opened Invergowrie

primary school in my constituency earlier this week. The Cabinet Secretary for Education and Lifelong Learning and I will work with local authorities over the coming weeks to agree the most effective use of the additional investment of £100 million and to agree precise funding allocations. I know that the Parliament will welcome these announcements on the quality of our health and education infrastructure.

Today's outturn figures and the extension of our NPD programme demonstrate once again the firm grip that this Government has on Scotland's public finances, our focus on supporting Scotland's economy, our approach to investing in our public services and our determination to deliver on the priorities that we share with the people of Scotland.

The Deputy Presiding Officer: The cabinet secretary will now take questions on the issues that were raised in his statement. I intend to allow about 20 minutes for questions, after which we will move to the next item of business.

Iain Gray (East Lothian) (Lab): I thank the cabinet secretary for his statement and for early sight of it. As always, he has made a polished presentation of his provisional outturn figures. I expect no less.

However, there is a gap in the figures. Mr Swinney mentioned towards the end of his statement his determination to deliver on his priorities. For all of 2013-14, his Government had no priority but promotion of its independence prospectus, but the resource that was devoted to that is hidden in these high-level figures. Can he tell us exactly how much the Scottish Government spent in 2013-14 on the independence referendum and on making the Government's case for separation? That includes the cost of preparing, publishing, producing and promoting its white paper and the consequent documents on pensions, the economy, welfare and so on to try to cover up the white paper's flaws. It also includes the billboards, the mailings that went out to every unsuspecting household in the country, the First Minister's trips to America and Europe to preach the independence gospel, the Cabinet's endless rolling referendum roadshows and, above all, the civil service staff and resources that have been diverted to making the case for separation.

How much was spent on all that in 2013-14? Is the figure, like the set-up costs for a new country, one of those inconvenient figures that seem to have escaped the firm grip on finances that Mr Swinney boasted of a moment ago?

John Swinney: That will be a very interesting question for the people of Aberdeen to study, given what Mr Gray has said. There was not a single word of welcome from Mr Gray for the

Government's commitment to invest in healthcare facilities in the city of Aberdeen, nor was there a word of welcome for the fact that the Government has just committed more resources to improving the infrastructure of our schools. That tells us all that we need to know about the Labour Party's lack of connection to the real priorities of the people of Scotland.

I know that Iain Gray does not bother himself with participating in the affairs of Parliament's committees. If he did, he would see that I have set out to the Finance Committee, in the course of the autumn budget revision and the spring budget revision, the allocations of resources that have been made to support the marketing costs of the white paper. That information has been shared with Parliament. We have, of course, committed ourselves to updating that information when all this activity is completed. The Government will do exactly that.

As for the accusation that we sent mailings to the "unsuspecting" householders of Scotland, when I got home last night I discovered the shocking delivery of a booklet from Her Majesty's Government direct to my house in Perthshire, setting out the arguments of the United Kingdom Government. Before Iain Gray starts questioning the Scottish Government about what we are undertaking in order to pursue legitimately the policy agenda of this Government, he should ask Downing Street what it is up to.

Gavin Brown (Lothian) (Con): I thank the cabinet secretary for advance sight of his statement. In comparing this year's table to last year's, I note that there appear to be significant increases in the cash underspends for education, justice, rural affairs and infrastructure. Will the cabinet secretary give us more details about why those underspends came about for those portfolios?

On NPD, we certainly welcome the announcements about Aberdeen royal infirmary and the other project, and we also welcome the schools infrastructure announcement for NPD2.

The cabinet secretary said that NPD is about ensuring that

"we can deliver now for the economy"

with emphasis on the word "now". With that in mind, can the cabinet secretary tell us what value was delivered via NPD in the last financial year? I ask that because, at the halfway stage, only £46 million out of £185 million had been delivered on the ground. Can he tell us, or at least pledge to tell us very soon, what was delivered on the ground in 2013-14 via NPD?

John Swinney: Mr Brown has sight of the note for MSPs that accompanied my statement. It was

circulated to Opposition parties and is available in the chamber. In that note, I indicate that the Government will provide further detail on significant variances at portfolio level, once the consolidated accounts have been produced, which will be towards the end of September. We will certainly report on the variances in fuller detail as part of our consolidated accounts.

On Mr Brown's second question about NPD, I answered an oral or written question from Mr Brown that indicated that the Scottish Futures Trust is updating the data that are available on the level of activity during 2013-14, which will be available by the time of the draft budget in October.

I reiterate to Mr Brown that in my statement I indicated that £750 million of projects that will obviously span the years 2013-14 and 2014-15 are now in construction. Some of them might even go into 2015-16. Despite the fact that it has, as I have conceded to Parliament on many occasions, taken us longer to mobilise the NPD programme than we would have liked, it is now making a substantial contribution to construction activity. As a consequence of my statement today, it will continue that process for a longer period, which will give greater clarity to the construction industry about the opportunities that exist to participate in the programme.

Kenneth Gibson (Cunninghame North) (SNP): I welcome the statement, particularly the announcement of the investment of £46 million in acute mental services through the provision of a North Ayrshire community hospital.

The Scottish Government has prioritised affordable housing by, for example, investing in the social rented sector and abolishing the right to buy, which is in sharp contrast to Westminster's approach. Does the cabinet secretary share my concerns that the Scottish Government is being penalised for investing more in social housing while HM Treasury reaps the rewards of lower housing benefit payments that should accrue to Scotland, as has been detailed by the work of the Institute for Fiscal Studies?

John Swinney: Mr Gibson has clearly explained the difficulty that arises out of the fact that the Government does not have control of both sides of the balance sheet. We are unable to reap the rewards and benefits of some of the other policies that we have implemented for the right reasons, including provision of affordable housing for citizens in Scotland. Mr Gibson makes a strong point about the opportunities that the Government would have if we had control of the financial levers on both sides of the balance sheet, in an independent country.

Jenny Marra (North East Scotland) (Lab): The cabinet secretary told us that he has budgeted for mitigation of the bedroom tax. We knew that and we welcomed it. However, he promised that he would have a system in place by 1 April to make sure that no one in Scotland would have to pay the bedroom tax, irrespective of the position of the Department for Work and Pensions. It is nearly July now and no such system is in place. He might have the money, but has he not betrayed Scottish families who are still paying the tax three months after he promised to have a system in place and have it sorted?

John Swinney: I have heard that one a number of times from the Labour Party—[*Interruption.*] Let us have a period of quiet for me to explain this carefully to the members of the Labour front bench, who need to hear it loud and clear.

The total cost of mitigating the bedroom tax in Scotland is £50 million. Under the existing statutory arrangements, it is possible for us to spend about £38 million on mitigating the bedroom tax over the whole financial year—which, Ms Marra has conveniently and helpfully explained to me, has run for only about three months. We are a quarter of the way through the financial year and £38 million can legitimately and fully be deployed to deal with the bedroom tax in Scotland. We will be required to apply £12 million, which the Government has provided for, once we reach the necessary statutory agreements with the UK Government. I have no reason to think that that process is being in any way held up—I have no complaint about it at all. It is all going in a perfectly agreeable fashion with the UK Government.

We have £38 million legally available in Scotland today, we are a quarter of the way through the year and the total liability is £50 million. I make the basic, fundamental, arithmetic point to the Labour Party in Scotland that, if we divide 50 by four, we get a number that is lower than 38. Is that simple enough for even that dynamic trio on the front bench of the Labour Party to understand the second—and bluntest—time that I have expressed it?

John Mason (Glasgow Shettleston) (SNP): I very much welcome the cabinet secretary's announcement of £100 million for school infrastructure. That is incredibly encouraging, especially as schools in Glasgow and beyond have been in a poor state for some time. Can the cabinet secretary give us any idea of the timescale for that work?

John Swinney: That will be the subject of the discussions that the education secretary and I will have with our local authority partners. The objective that we share with our local authority partners is to ensure that we make progress as swiftly as we can in improving the quality of the

school estate and school infrastructure. Our local authority partners are at one with us on that priority, and the discussions will proceed in that spirit to ensure that we deploy that resource effectively and swiftly.

Willie Rennie (Mid Scotland and Fife) (LD): I thank the finance secretary for the advance copy of his statement. In this very seat, at lunch time, Alison McInnes asked for more NHS investment in Grampian. I am sure that there must be a connection with the announcement this afternoon.

I welcome the investment in Aberdeen and in the schools, especially considering the short-changing that Aberdeen and the north-east have received from the Government in recent years. I am sorry to introduce a discordant note but, given the contribution that the north-east makes to our economy, it is important that it gets a return from the Government. I appreciate the cabinet secretary's frankness about the delays in the NPD programme in his answer to Gavin Brown. Can he guarantee that the significant problems that we faced in the early days of the NPD programme have been fully overcome?

John Swinney: For a moment, I thought that Mr Rennie was on the right lines. I heard Alison McInnes's point, which was well made, and I am glad that the Government, at the health secretary's instigation, has taken the step that it has in relation to the Aberdeen royal infirmary site.

On Mr Rennie's wider point about the infrastructure of the north-east of Scotland, the development of the new Her Majesty's Prison Grampian has been a significant investment in recent months and years. We are also now at an advanced stage of being able to deploy expenditure on the Aberdeen western peripheral route, which is a project that the Liberal Democrats supported during their time in government. That project is at a very advanced stage of procurement, and we expect construction to start in quarter 4 of 2014. The western peripheral route will be a welcome contribution to the improvement of the infrastructure of the north-east.

In relation to the general point that Mr Rennie made about NPD, I do not think that I could have been more open with Parliament about the fact that we estimated that it would take a shorter time to get NPD projects up and running, but it is clear from the data that I shared in response to Mr Brown's question that the NPD programme now has real momentum. The procurement activity is being undertaken very swiftly. Indeed, one of the most recent projects to reach financial close has done so in a much shorter period than, ordinarily, we would have imagined. Significant progress is being made on the NPD programme, and that will continue in the period ahead.

The Deputy Presiding Officer: If we have short questions and short answers, that will allow us to endeavour to get everyone in.

Stuart McMillan (West Scotland) (SNP): I, too, welcome the statement.

The cabinet secretary has had to deal with declining settlements from Westminster. Once again, he has done so within budget. Does he agree that changing from an austerity approach to using the powers of independence to invest in the economy could increase revenues for Scotland and support further investment in public services?

John Swinney: It is clear that having the ability to take decisions that create stronger and more effective economic infrastructure in Scotland will help the long-term progress of the Scottish economy. Having a wider range of powers will enable us to fulfil that objective.

Ken Macintosh (Eastwood) (Lab): The cabinet secretary will be aware that 150,000 fewer students are studying at Scottish colleges as a direct result of the decisions that he has taken since 2007 as finance secretary. In recent years, he has tried to use some of the consequential or outturn moneys to unpick or mitigate some of the damage that he has wrought on Scotland's colleges, but budgets continue to fall.

I note that education is one of the biggest contributors to the cabinet secretary's underspend. Why has he not offered anything to Scotland's colleges in today's announcement?

John Swinney: The Government committed itself to maintaining the number of full-time equivalent places in Scotland's colleges, and that is exactly what we have done.

As has been independently verified by the Wood commission in its analysis, in which it highlighted that the college sector in Scotland had been strengthened as a consequence of the Government's reforms, we have focused the college sector more and more on supporting the journey that individuals make into employment. I think that that is the right approach to take so that individuals can acquire the more specific skills that will enable them to participate in the labour market and to fulfil their potential.

When independent exercises such as the Wood review highlight the fact that the college sector has been strengthened as a consequence of the Government's reform programme, members such as Mr Macintosh should be reassured that that programme has been effective and that we now need to sustain our investment, as the Government is committed to doing, to ensure that we reap the rewards of our reforms.

Jamie Hepburn (Cumbernauld and Kilsyth) (SNP): Is the cabinet secretary aware that, this

week, research was published by Sheffield Hallam University that indicated that, as a consequence of the Scottish Government's investment in welfare reform mitigation, the impact of the UK Government's welfare reforms is some £35 less per working-age adult in Scotland? What assessment has the Scottish Government made of the impact of its £260 million investment in welfare reform mitigation?

John Swinney: The investment that the Government has made has been designed to support financially vulnerable individuals. It will assist people in contributing to the Scottish economy by sustaining their livelihoods and circumstances.

The Government continues to review the challenge of welfare reform and the effect that it is having on the population in Scotland, and we will continue to do that throughout the spending review period.

Malcolm Chisholm (Edinburgh Northern and Leith) (Lab): A week or two ago, the cabinet secretary allocated an additional £31 million for the capital implications of expanding early education and childcare for two-year-olds, but I think that the Scottish Government has estimated that that will cost £61 million, and the Convention of Scottish Local Authorities believes that the figure will be significantly higher. Has any of the underspend money been allocated for that purpose?

John Swinney: The Government has committed itself to £61 million-worth of expenditure to support the early years commitments. That is an increase on the estimate that we originally set out, which has arisen as a result of further design work that we have undertaken with our local authority partners.

Our discussions with COSLA continue and, of course, support for that £61 million is provided for in the Government's capital programme. It may not all fall within the 2014-15 financial year, but that will be a subject that I will continue to discuss with our local authority partners.

The Deputy Presiding Officer: Briefly and finally, Christian Allard.

Christian Allard (North East Scotland) (SNP): Unlike those on the Liberal front bench, who never cared for the needs of the people of the north-east when the Labour-Liberal Government was in power, I welcome the investment announced by the cabinet secretary for health facilities in Aberdeen, which should be of great benefit to all my constituents across the north-east. Can the cabinet secretary tell me what timescales are in place for delivery of that project?

John Swinney: The project forms part of NHS Grampian's capital programme, and the Government will work with NHS Grampian to put in place the steps that are necessary to apply the project. The typical lead-in time to a project reaching financial close can be about two years. We will try to accelerate that timescale if it is at all possible, and I can assure Mr Allard that the health secretary will take steps to ensure that the project is delivered as swiftly as it can be.

I welcome very much the comments by Mr Allard, who represents North East Scotland, on the important investment that has been made in the Aberdeen royal infirmary campus.

Polypropylene Mesh Devices

The Presiding Officer (Tricia Marwick): The next item of business is a statement by the Cabinet Secretary for Health and Wellbeing, Alex Neil, on an update on polypropylene mesh devices. The cabinet secretary will take questions at the end of the statement, and there should therefore be no interventions or interruptions. It would be helpful if members who wish to ask a question of the cabinet secretary pressed their request-to-speak button now. Cabinet secretary, you have around 20 minutes or so—no, you have 10 minutes; it is 20 minutes for questions, which makes half an hour.

15:01

The Cabinet Secretary for Health and Wellbeing (Alex Neil): Thank you, Presiding Officer; I thought you were being unduly generous.

Presiding Officer, thank you for the opportunity to make a statement regarding mesh implant procedures. I was deeply troubled when I first met with some of the women adversely affected by the implants and heard of the horrendous complications that they have suffered, in some cases altering their lives for ever. They have shown considerable courage in raising the profile of the issue and discussing publicly very personal, sensitive issues, especially when we consider that they will not now personally benefit from any changes.

Mesh implants for pelvic organ prolapse and stress urinary incontinence are classified as medical devices and governed by European Union regulations. As soon as I became aware of the anguish experienced by the women involved, I asked the deputy chief medical officer for Scotland, Dr Frances Elliot, to investigate and recommend actions to address the issues. We estimate that around 1,500 women suffering from stress urinary incontinence and 350 women suffering from pelvic organ prolapse have synthetic mesh implant surgery each year in Scotland. Those conditions result in a reduced quality of life, and I understand that traditional surgery techniques have a high failure rate—for example, of 20 to 30 per cent for primary pelvic organ prolapse surgery.

The 2012 York report, a study that was commissioned by the Medicines and Healthcare products Regulatory Agency, estimated that around 1 to 3 per cent of women experience complications following stress urinary incontinence surgery. According to the MHRA, the percentage experiencing complications following pelvic organ prolapse surgery is slightly higher, at around 2 to 6 per cent. That contrasts with a failure rate of 20 to

30 per cent for traditional surgery for pelvic organ prolapse.

The research indicated that a majority of women—around 1,450 annually in Scotland—appear to benefit from mesh tape surgery for stress urinary incontinence, without complications. There is, however, growing public concern about the number of women experiencing complications linked with underreporting of adverse events and a poor understanding as to why the complications have occurred. I do not believe that we know the real incidence of adverse events in relation to the procedures, and we are not yet able to trace implants to individuals. The Scottish Government therefore considers the following actions to be necessary to address the issue.

As I outlined at the Public Petitions Committee meeting last week, I have asked the acting chief medical officer to request all national health service boards in Scotland to consider suspending routine mesh implant procedures for pelvic organ prolapse and stress urinary incontinence. I can confirm that the acting CMO has now written to all health boards. NHS Inform has provided an information page on its website and, crucially, all boards are currently contacting patients who are listed for surgery and, where necessary, putting in place alternative pathways for those women.

As members will know, the Scottish Government does not have the authority to withdraw the products, as the matter is reserved. However, I am aware that two health boards had stopped mesh implant procedures for treatment of pelvic organ prolapse prior to my announcement last week, due to changes in staff and the small numbers of procedures that were being carried out.

The changes will support the development of any new specialised pathways. The decision to request boards to suspend the routine use of synthetic mesh for the procedures does not prevent individual women and their clinicians from agreeing on the need for a particular service, which will still be available. In addition, I have endorsed the position that, for the improvement of our future evidence, if women are being considered for entry into clinical trials, use of mesh for the conditions affected can be approved for those entered into the arms of the trial, provided that the risks that are associated with the procedure are fully explained.

I have asked for an independent review to be set up urgently to report on the issues that are raised, such as complication rates and underreporting, which have become growing concerns. The review will establish the facts and will report at the beginning of 2015, after taking account of the European Commission's study on the devices, which is due in January. The review will look at synthetic implant procedures for stress

urinary incontinence and for pelvic organ prolapse. I fully understand that they are two very different procedures, and the review will take account of that.

I can announce that Dr Lesley Wilkie, a retired director of public health, will lead the independent review. It will start next month and, as I said, will report early in 2015. The key priority for the review is to establish the facts concerning the number of women experiencing complications and the issue of underreporting of adverse events. I will ask Dr Wilkie to consult the women's group and with clinicians and NHS boards prior to finalising the specific detailed remit for her review. I gave an undertaking that the women would be consulted, and I intend to keep to that.

In addition, the deputy CMO is chairing a working group that includes clinicians and patient representatives and which is considering the issues in more detail. The group has now met twice. I thank the patient representatives and clinicians for their on-going contribution. The group has produced a new patient information and consent booklet for stress urinary incontinence, which was published yesterday on the Scottish Government website. The booklet clearly demonstrates to women, before they make a decision on whether to proceed, the risks that are associated with the procedure and the available alternatives. The information in the booklet will be the absolute minimum information that is provided to patients in future by NHS boards.

Two patient guidance booklets are being developed that set out the pathway for the management of pelvic organ prolapse and for women who present with complications. The deputy CMO will work with NHS colleagues and the women to develop the service as a matter of urgency.

I can confirm that, in the past year, the CMO has written three times to all general practitioners, through medical directors, alerting them to the possibility that women may suffer complications following insertion of the mesh implants, and that all adverse events should be reported to the MHRA. I recently received correspondence from the Scottish pelvic floor network proposing that MHRA reporting of complications should be made mandatory, and I have responded to say that I agree with that proposal.

As members have heard, mesh implants are classified as medical devices and are governed through the EU medical device directives. The MHRA is the competent authority in the UK and has responsibility for the removal of any device from the market for the whole of the UK. Evidence is required for the MHRA to take such a step, which is why the research that we are supporting is so important.

Individual medical devices are subject to procedures that are set out in the EU directives and followed by manufacturers to gain a CE conformity marking, which is awarded by notified bodies. The MHRA oversees the work of those organisations and performs regular audits. The rules for classifying medical devices apply in all EU member states.

I have previously spoken to the MHRA's chief executive and medical director, and yesterday I met the chairman, Sir Gordon Duff, and the medical director. I was reassured in discussions that they are taking the issue very seriously, and they have confirmed that they are happy to participate in the Scottish review in addition to the work that they are undertaking.

I have also written to the European Commission, which is currently working towards formulating a scientific opinion on the safety of the devices—as I said, that work will be available in January. The chairman of the relevant scientific committee has assured me that they are taking the issue very seriously, and I have requested that, if they can take further action before the research is available, they should do so.

We are aware of the US Food and Drug Administration's proposal to reclassify the mesh device for pelvic organ prolapse from moderate risk to high risk. Currently, Europe has given a IIb classification, which represents moderate to high risk.

The Scottish Government will participate in the UK working group, whose remit includes determining the means of ensuring the clinical quality of procedures involving tapes and meshes for the treatment of stress urinary incontinence and pelvic organ prolapse. The group will meet for the first time next month.

In conclusion, I reassure members that we are taking every possible action to address the issues with mesh implants and to improve the situation. I am happy to take questions.

Neil Findlay (Lothian) (Lab): I thank the cabinet secretary for early sight of his statement, and I welcome the action that he has belatedly taken to suspend the use of polypropylene mesh.

However, the cabinet secretary's statement and his year of dithering throw up many more questions than they answer. Almost a year ago, in rejecting the call for the suspension of the use of mesh, the cabinet secretary claimed, first, that he had no power to act and, secondly, that he could not act because he feared litigation by the manufacturers. He also claimed at that time that the number of women who had experienced problems with mesh was very low.

How many women have had complications following mesh surgery for stress urinary incontinence or pelvic prolapse, and how many have had to have the device removed? What advice have those women been given since the cabinet secretary's announcement?

Given the limited number of consultants available in Scotland to deal with mesh complications, and the fact that some patients are waiting five months for a review appointment, will the cabinet secretary agree to fund health boards to allow patients to be seen elsewhere in the UK? It is my understanding that, at present, some health boards have advised mesh victims that they will not fund out-of-area consultations.

Why, a year ago, did the cabinet secretary claim that he had no powers to act when clearly he did? Who gave him that advice, and will he publish it? When did the cabinet secretary become aware of the fact that NHS Dumfries and Galloway had acted last year to suspend the use of mesh despite his protestations that he did not have the powers to act?

How many more women have been treated with mesh during the cabinet secretary's year of dithering? Why did he fear litigation by the manufacturers a year ago when he apparently does not fear it now?

Finally, I pay tribute to each and every one of the mesh victims. They were doubted by some in the medical profession and let down by the cabinet secretary. They deserved better, and they deserve answers now.

Alex Neil: It is a great pity that the Opposition spokesman for the Labour Party can never rise to the occasion. I would have hoped that members in the chamber would be united on the matter.

I will give the facts, because I know that Mr Findlay sometimes confuses facts with arguments. In the latest full year for which figures are available, which is 2011-12, there were 313 POP mesh procedures and 1,436 SUI tape procedures. In that same year, the York health economics consortium report showed that the estimated complication rates for POP procedures were between 2 and 6 per cent, and for SUI tape procedures between 1 and 3 per cent. That was the evidence that was available to me last year.

I should point out that it is a very serious matter to suspend any procedure, particularly when a total of 1,700 to 1,800 people are going through those procedures and the official figures show that for 95 per cent of them the procedure is successful. What has convinced me is that after discussion with the MHRA it became clear to me that the scale of underreporting of adverse events was far higher—[*Interruption.*] I will get it from the scientists, Mr Findlay, not from you. [*Interruption.*]

The Presiding Officer: Order. Mr Findlay.

Alex Neil: The scale of underreporting suggests that the rate of adverse events is far higher than anyone has officially estimated it to be.

Let me give the figures that underlie my concerns, just on SUI tape procedures. It is estimated, based on the York report, that in Scotland up to 45 women per year experience complications after such a procedure. However, although in one year the total number of cases reported to the MHRA by healthcare professionals was four, the total number reported to the MHRA by the public was 110. There is clearly a problem.

In my job I must base my decisions on evidence. It is the evidence that led me to take the decision to make a request to health boards. I do not have the power to tell health boards to suspend operations willy-nilly. Nor do I have power over the product itself, because, as I explained in detail in my statement, that power is reserved and lies with the MHRA, which works within the overall EU directive.

Jackson Carlaw (West Scotland) (Con): I thank the cabinet secretary for advance sight of his statement. I pay tribute to my constituent Elaine Holmes, who together with others I helped to support when she presented her petition to the Public Petitions Committee. Her evidence was highly emotional, compelling and brave. The cabinet secretary's response is brave, too.

Has the cabinet secretary had conversations with the Department of Health since his announcement? Have health departments from other countries been in touch with him?

A tremendous number of women who believe that they have had a successful implant might now be reading that late complications can arise. What reassurance or guidance will the minister make available to women who have had a mesh implant and who might now have a concern that they did not have a week ago, before the announcement?

Given that a number of health issues arise from implants more generally, will the Scottish Government consider leading a campaign to ensure that all implants are barcoded in future, so that when issues arise, perhaps some years after the event, we are able to establish who has had an implant and might therefore need to be consulted or reassured?

Alex Neil: The member asked intelligent questions, which, as usual, were fairly put.

On the latter point, there is barcoding for some products but there is no database of the mesh that has been used in a particular woman at a particular time in a particular hospital. Therefore, we and the MHRA are—and have been since the women brought the issue to our attention—

engaged in an exercise to create a database for future use, so that we will always know not only how many procedures took place but which mesh was used in which procedures, in which women, and in which hospitals, so that if anything goes wrong we can trace back and establish the type of product that was used.

Unfortunately, to date there has been no such database, which is one of the reasons why the information that is available to us is so sporadic and, to be frank, unreliable in the context of measuring adverse events.

On guidance to women who have had implants, the chief medical officer has instructed that guidance be issued to all women. Our immediate priority is women who are due to have a procedure in the immediate future, who are all being contacted as we speak to invite them to a consultation with the relevant consultant, so that he or she can map out a pathway for them, given that they will obviously need help during the period ahead. Secondly, we will issue advice to people who have already had implants, about how they can find out whether they are likely to have problems in the future.

I know of a case in my constituency in which the mesh implant only caused a problem 12 years after it had been implanted. That is another reason why we need much more in-depth study; there has been no longitudinal study of the impact of mesh implants or longitudinal analysis of the incidence of adverse events. Without such analysis, it will be much more difficult to reach an evidence-based, scientific and objective conclusion about what is going wrong in many cases and why.

As for conversations with the Department of Health, I have to say that our main conversations have been with the MHRA. That said, all the UK departments of health are involved in this issue through the MHRA and they are all represented on the MHRA working party. Furthermore, because the matter is very much guided by EU directives, we are through the MHRA in touch with all the health departments in Europe, and the MHRA itself is now working closely with the Food and Drugs Administration in the United States.

This is very much a global problem. Last week, I had an email from a lady in New Zealand who has had problems similar to those that were outlined by the ladies who presented to the Public Petitions Committee. It is a world-wide phenomenon and, as the MHRA has pointed out to me, Scotland is actually the most advanced in trying to get to the bottom of why these adverse events are taking place.

Aileen McLeod (South Scotland) (SNP): I, too, welcome all the actions that the cabinet secretary has taken to address the very serious concerns

that have been raised about mesh implants. Professor Don Berwick commented that thanks to the Scottish patient safety programme, Scotland is “the safest nation on earth from the viewpoint of healthcare”.

How has the collaborative approach that has been taken in the patient safety programme informed the Government’s approach to mesh devices?

Alex Neil: The main motivation for asking the health boards to suspend the treatments is patient safety; after all, the issue is not just the adverse events themselves but the horrific impact on women when things go wrong. It really ruins lives, which is why patient safety and quality must be absolutely at the top of the healthcare agenda. Indeed, that is why, according to Professor Don Berwick, who is, of course, an adviser to Prime Minister Cameron as well as to President Obama, Scotland has the safest health service in the world.

The approach fits very well with the patient safety programme’s overall governing philosophy, which is that patient safety, alongside the quality of care that we provide, must be the number 1 priority. Because of that approach, a recent Canadian study rated the Scottish and, indeed, the UK health services as the top health services in the world.

The Presiding Officer: I must notify members that I am going to struggle to call everyone who wishes to speak or ask the cabinet secretary a question. Nevertheless, I will do my best and press on.

Rhoda Grant (Highlands and Islands) (Lab): I wonder whether the cabinet secretary will clarify a statement that seems to run contrary to a comment by NHS Dumfries and Galloway, which has said:

“Following the concerns that have been raised nationally and internationally we have taken a local decision to suspend the use of meshes and this has been in place since last year.”

As for the review, what will be its remit and terms of reference? How will the cabinet secretary ensure that there is no conflict of interests, and that the concerns and experiences of the women who have been affected will be at the very heart of the review? Finally, what alternative treatments will be available to women who are suffering from the conditions?

Alex Neil: I think that in evidence to the Public Petitions Committee, the medical director of NHS Dumfries and Galloway said—it was certainly reported in the press—that Dumfries and Galloway had suspended the procedures. In fact, NHS Dumfries and Galloway has stopped the

procedures; it did not suspend them, because it has no intention of reinstating them.

The fact is that we are looking at creating centres of excellence for the procedures, because one of the problems in NHS Dumfries and Galloway was that the throughput of patients was inadequate for keeping up the required quality. In the end, the health board decided to stop the procedures, and the expert that it had employed no longer works there. However, because of the way in which that was reported in the press, it appeared that NHS Dumfries and Galloway had suspended the procedures, which suggests that it might reintroduce them. That is not currently its intention.

In terms of potential conflict of interests, I spelled out to the Public Petitions Committee last week that I will ensure that whoever is appointed to lead the review will have no potential conflict of interests and, in particular, no previous or current contractual relationship with the manufacturers. I can confirm that Dr Wilkie fits the bill: she has no such previous or current contractual relationship.

As for the review itself, as I said in my statement I am asking Dr Wilkie—as her first step—to sit down with the women and agree the remit for the review in detail because I want to be absolutely sure that we satisfy them. We owe it to them to ensure that the review is comprehensive enough to cover all aspects of their concerns. Obviously, Dr Wilkie will also consult the clinicians and NHS boards. I will confirm the detailed remit to the chamber at the appropriate time.

On advice, there is clear direction from the CMO about the need to offer all women a clear pathway in relation to their treatment—especially women who were due to have procedures in the immediate future, as I said earlier. There are a number of ways in which they can be supported—weight loss is one of them—and that support will happen. We will ensure that all the women who are on the waiting list are contacted and offered a special session to get advice on the way forward and to work out a pathway in co-production with clinicians.

John Wilson (Central Scotland) (SNP): I welcome the statement today and the announcement that the cabinet secretary made last week at the Public Petitions Committee. I also welcome the announcement about the booklet outlining the associated risks of the procedure. Does the booklet contain information on the possibility that, following the procedure, women may not be able to have children? Also, how can patients feed back concerns about the lack of information that would allow them to make informed choices prior to the operation?

Alex Neil: I have the “Synthetic Vaginal Mesh Mid-urethral Tape Procedure for the Surgical Treatment of Stress Urinary Incontinence in Women” booklet in front of me. For the sake of ensuring that I cover this properly, I will list what it covers in its 18 pages. It includes an explanation of terms, a definition of stress urinary incontinence, alternative treatment options, what the synthetic vaginal mesh tape procedure is, possible risks of the procedure, useful resources, questions that women should ask their surgeon, what their expectations should be from surgery, and the consent form. It is a detailed booklet and I am happy to ensure that a copy is placed in the Scottish Parliament information centre so that all members can see exactly what issues are covered in it.

Jim Hume (South Scotland) (LD): Will the cabinet secretary advise campaigners who are here today what support will now be offered to mesh patients who have already undergone a traumatic experience and are now left with health complications? Will he also advise what discussions he will have with the European Commission on the regulatory regime, given that manufacturers are the ones who are apparently policing the devices when adverse incidents are reported, and will he note that the MHRA, by its own admission, has no independent test facility?

Alex Neil: First, on discussions with the manufacturers, clearly the whole purpose of the work that is going on in Europe, in the UK and in Scotland is to find out exactly what we need to do to guarantee the future safety of any of the procedures and the use of particular products.

There will be a strong interface with manufacturers as part of the work that is being done because we want to be absolutely sure that we identify whether, in most cases or in any cases, the actual products—and there are varied products—have been the problem, whether the procedure has been the problem, or whether it is the procedure and the products that have been the problem. That is clearly one issue that we need to focus on to get to the bottom of why the implants have gone wrong in so many cases.

As for women who have had an adverse event and a bad experience and whose health has been damaged as a result of the procedures, I have said from the beginning that we will ensure that any medical assistance, including any further procedures, that those women require and which they agree with their clinician will be provided on the national health service. We will ensure that that happens.

The Presiding Officer: I intend to allow the statement to run on for a bit more time, because a number of members still wish to ask questions. The issue is important and sensitive. The

consequence is that decision time is not likely to take place until quarter to 5. We will sort out the procedural bits later.

John Scott (Ayr) (Con): I, too, thank the cabinet secretary for an advance copy of his statement. Sadly, we are where we are. What will be the care pathways—apart from weight loss—for adversely affected women? Will a specialist centre be set up to deal with and perhaps develop removal techniques to address the problems? Perhaps that could be in Glasgow; there may already be a de facto centre. If so, has a budget been allocated or will one be allocated?

Alex Neil: We are already working on the latter issue. Before the suspension was requested, most health boards provided one or both of the procedures. I stress that they are two different procedures—there is commonality on the problems, but we need to address both procedures separately. There is undoubtedly some division in the clinical community about the safety of tapes versus the safety of meshes. Clinicians do not all agree with each other about that.

We are looking at the future delivery of all services that relate to the procedures. That includes dealing with the complications and the consequences of complications.

It is clear that we need areas of expertise rather than necessarily to have procedures widely available across the country. In some places, as in Dumfries and Galloway, the throughput of women did not really meet the new standards on patient safety more generally. For some procedures, it is important to have a high throughput so that clinicians can maintain their high standards and upgrade their skills continually to meet changes in technology.

The work is under way. I expect it to be concluded at the turn of the year, when we will allocate budgets to health boards if they are to host any centres of excellence in relation to the procedures.

As I have said, the chief medical officer will issue details on the pathways that can be offered to women, which include weight loss and—in theory—a traditional operation, although the failure rate of operations is such that we and boards would not recommend them. Another option is to wait for the results of the reports. If women can suffer their problems long enough to take that option, they can see what is and is not safe, which will put them in a better position to make their own judgment about the procedure that they want to have.

Jim Eadie (Edinburgh Southern) (SNP): All surgical procedures in the NHS must be based on the latest clinical evidence, backed by robust data

and open and transparent record keeping, but does the cabinet secretary agree that the most important factors must always be the patient experience and patient safety? Will he commit to ensuring that the voice of patients through the Scottish mesh survivors group and the hear our voice campaign continues to be heard during the independent review process and at all decision-making levels?

Alex Neil: Absolutely. I stress that it is important to involve the patients. The working group that is operating under Dr Frances Elliot's leadership already contains two representatives from the women's group. Such representation is extremely important at every level. Nobody knows better the consequences—particularly of the adverse events—than the affected women.

Richard Lyle (Central Scotland) (SNP): As a member of the Health and Sport Committee I welcome today's statement and I compliment the cabinet secretary on his action. The cabinet secretary said that alternative care pathways would be developed for women who have suffered complications and women who decide to go ahead with a mesh procedure. Can the cabinet secretary offer any guidance on how quickly those pathways could be in place?

Alex Neil: The chief medical officer has already contacted all the health boards to make sure that the clinicians get in touch with the women affected to offer and arrange early appointments with them. Each woman will go through with her clinician what the most appropriate pathway is for her. It is extremely important that, first, we do that for every woman who could be affected, which is everybody on the waiting list; secondly, that we do that quickly; and thirdly, that we do it in terms of the advice that is on offer. There is already fairly extensive advice on a range of issues relating to this from the National Institute for Health and Care Excellence and other sources, all of which is already in the hands of the health boards and clinicians. The chief medical officer will be keeping a very close eye on the issue of guidance on the different pathways available to the women.

Hugh Henry (Renfrewshire South) (Lab): Will the cabinet secretary consider requests for a funded support service for those affected and will he ensure patient involvement in any such group, which he acknowledged is vital? These women deserve our support.

Alex Neil: I anticipate that that will be one of the bits of work that the review will address, and work is already going on regarding what support is required in addition to the medical support. Medical support is the immediate priority and I have made it absolutely clear that whatever medical support these women need, they will get. Any additional support would need to be identified

systematically, and then we would look at what has to be provided, where it has to be provided, how much it would cost and how it would be funded.

Chic Brodie (South Scotland) (SNP): Thank you for extending the statement to allow me to ask my question, Presiding Officer.

Mesh implants have created great misery for some—misery for one being misery for one too many. What assurances can the cabinet secretary give that the MHRA and the relevant European authorities that issue product directives will be asked to review their practices, processes and legal responsibilities, to avoid similar events in future, and to carry out that review quickly? What positive involvement and direct role does he see for Scotland in that process?

Alex Neil: As I said in my statement, I have already written to the European Commission, and although the MHRA is a statutory body for the United Kingdom, clearly we want to have direct dialogue with the European Commission to satisfy ourselves that everything is being done objectively to address all the issues.

Mr Brodie's points are the subject of the discussions that we are having with the MHRA and that we want to have with the European Commission, particularly in terms of its current review, which is due to report in January 2015.

Rhoda Grant: On a point of order, Presiding Officer. In his answer to my question the cabinet secretary suggested that I was quoting from press reports. I quoted from a letter from NHS Dumfries and Galloway to the Public Petitions Committee, which is available on the Parliament's website. Can you advise how the cabinet secretary can amend his statement to give the accurate position of NHS Dumfries and Galloway?

Alex Neil: I was not saying that Rhoda Grant was quoting from the press report. I was quoting from the press report.

The Presiding Officer: Thank you, cabinet secretary. That ends the statement and questions.

City of Edinburgh Council (Portobello Park) Bill: Final Stage

The Presiding Officer (Tricia Marwick): The next item of business is a debate on motion S4M-10379, in the name of Siobhan McMahon, on the City of Edinburgh Council (Portobello Park) Bill. Given that I allowed the cabinet secretary's statement to run on a bit, I am minded to accept a motion without notice to extend the debate.

Motion moved,

That, under Rule 8.14.3, the debate be extended by up to 30 minutes.—[*Kezia Dugdale.*]

Motion agreed to.

15:39

Siobhan McMahon (Central Scotland) (Lab): As convener of the City of Edinburgh Council (Portobello Park) Bill Committee, I am pleased to open this final stage debate.

I thank all who have assisted the committee in its scrutiny of the bill, including the objectors to the bill and the promoter of the bill. The contributions from both sides on this issue have assisted the committee in reaching decisions on what has been a complex and highly controversial piece of legislation.

I also thank my colleagues on the committee, James Dornan, Fiona McLeod and Alison McInnes for their diligence and hard work in scrutinising the bill and for their support throughout this entire process. I greatly appreciate it.

I also thank the Parliament staff who have assisted the committee in our deliberations, in particular Mary Dinsdale, Stephen Fricker, Lynda Towers and David McGill, for their guidance and dedication throughout the process. Not only were they with us every step of the way, I know that they have given up their personal time to assist us in this lengthy process. For that, I and the other members of the committee are truly grateful.

Finally I would like to thank Richard Welsh, in my own office, who has had the unenviable task of putting up with me throughout the process.

Today represents the culmination of more than a year of hard work since the bill was introduced on 25 April 2013. In total, the committee undertook around 15 hours of scrutiny and evidence taking at consideration stage alone, which resulted in the publication of our consideration stage report on 22 May.

By way of background, for anyone who may not be familiar with it, the purpose of the bill is to remove a legal obstacle that prevents the City of Edinburgh Council from changing the use of

Portobello park so that it might become the site of the new Portobello high school. In effect, the bill would change the legal status of Portobello park from inalienable to alienable common good land for the purposes of part VI of the Local Government (Scotland) Act 1973, to allow the council to appropriate it to its education function and build the school on the park. The bill does not itself authorise the building of the school, that being subject to the local authority planning process.

At preliminary stage, the promoter provided details of the alternative legal approaches that had been considered to achieve the promoter's objective, none of which was as attractive to the promoter as pursuing a private bill. In that context, the committee, at preliminary stage, was aware of the apparent legal anomaly whereby councils can dispose of local authority land to third parties, with the consent of the courts, but are unable to appropriate common good land for other uses, and considered whether one way of addressing that might be by a change to the general law, which applies throughout Scotland.

We therefore wrote to the Minister for Local Government and Planning at that stage and were advised on 21 November 2013 that

"The Scottish Government has not reached any decisions on the subject".

The minister acknowledged the "importance of the issue" and referred to the consultation on the draft community empowerment bill, which would include

"provisions on greater transparency in the management and disposal of the Common Good".

The committee concluded at that time that it appeared that, even if the Scottish Government decided to legislate in this area, no such legislation was imminent.

I am aware that the Community Empowerment (Scotland) Bill was subsequently introduced on 11 June and that the provisions of the bill place a statutory duty on local authorities to establish and maintain a publicly available register of all property that is held by them for the common good, and to notify and receive any representations from community bodies or other persons in respect of the list of property that they intend to include on the register. They are also under a duty to publish their proposals and consult community bodies before disposing of or changing the use of common good property. It is clear therefore that the proposals included in the Community Empowerment (Scotland) Bill would not address the wider specific legal anomaly that is addressed in this bill, so the committee's decision at the preliminary stage that the private bill procedure was suitable for this bill remains appropriate.

With regard to our deliberations at consideration stage, the committee's task was to consider all remaining objections, which was phase 1, and to lodge any amendments that it felt were necessary as an outcome of those deliberations, which was phase 2.

The committee was very aware that its role included acting and complying with the Parliament's obligations in terms of human rights. The procedures that were followed by the committee therefore ensured that the parties involved had a fair opportunity to present their respective cases. That was achieved through the extensive evidence that we had before us—the objections themselves, supplementary written submissions and the oral evidence sessions, which ran from 12 March to 7 May 2014. Once we had considered all the evidence, our task was to assess each objection and consider whether the private interests of those adversely affected by the bill outweighed the wider public interest in what the bill seeks to deliver.

John Mason (Glasgow Shettleston) (SNP): Will the member give way?

Siobhan McMahon: I am sorry; I do not have time to take interventions.

The committee had before it 59 objections to the bill. Consideration of those objections was not an easy task. We considered a diverse range of subject matters during the course of this phase: the promoter's pre-introduction consultation process; the possibility of the bill setting a precedent for other local authorities to use as a mechanism to bypass the protection of common good land which, it was argued, would occur if the bill proceeded; and issues that are also subject to the planning process.

In determining the approach to assessing objections, the committee was also keenly conscious, as it had been from the start of the scrutiny process, that its role was not to carry out a planning inquiry. Planning matters had already been addressed during two planning application processes. The committee's consideration of objections under the standing orders was in the context of determining the extent to which an adverse effect of the bill, which might also be a planning matter, would impact on an individual's private interests and the extent to which that would be balanced by the overall benefit to the community from the bill.

In relation to the practicalities of our approach to the consideration of objections, the objections were provisionally divided into a number of groups on a geographical basis. For example, objectors who live adjacent to the park were identified as one group and those who live in the surrounding area to the north of the park were identified as

another group. We put the main group opposed to the school being built on the park—Portobello park action group—and known associated objectors in a group on their own, as we did the golfers, who we considered to be a special interest group.

We consulted all objectors in each of the six groups regarding the selection of lead objectors who, when that was agreed, were invited to co-ordinate oral evidence on behalf of their respective groups. All 59 objectors were also given the opportunity to provide supplementary written evidence in support of their original objection. In the event, only six objectors took up that invitation.

All groups of objectors were represented at oral evidence sessions at the committee. The promoter also attended those sessions. That was intended to allow each party the opportunity to present its case on specific issues and cross-examine the other side.

Before commenting on our views on other issues related to objections, I want to refer briefly to matters that the committee had also considered at preliminary stage. Those included the Parliament legislating after a Court of Session decision; the possibility of the bill setting a precedent; and alternative sites for the school. We set out our views on those issues at the preliminary stage and the committee was not convinced that there was any substantive reason to change those views as a result of the further evidence produced at consideration stage.

At preliminary stage, the committee had encouraged the promoter to reflect on the lessons learned from each aspect of the process in relation to the consultation. We were reassured to learn that the promoter intended to take into account a number of actions for future consultation exercises, such as ensuring that for any public meetings that involve non-council representatives, all participants should be able to comment on the proposed format of the meeting.

Although we did not consider that any shortcomings identified in the consultation process were sufficient to sustain any objections regarding the consultation's adequacy, the committee noted that the continued reference by objectors to their concerns in this area illustrated a lack of trust between objectors and the promoter.

We continued to be concerned about adequate protection for the site to ensure that it could not be used for any purpose other than the proposed educational function. At consideration stage, therefore, an amendment was lodged by Alison McInnes whose intention was to ensure that, if the park is appropriated under the terms of the bill and then ceases to be used for educational purposes, it will revert to its legal status and be subject to the title restriction on its use at the time of cessation of

use. The amendment has also allowed for circumstances where the appropriation occurs but, for whatever reason, the park is not used for educational purposes. In such a case, if the park were not used for that purpose within a period of 10 years—if, for example, school premises were not provided—the legal and title restrictions would once again apply to the park when that period expired. The bill has now been amended to include the terms of that amendment.

In relation to the replacement of open space promised by the council, which would be formed from part of the existing combined site of Portobello high school and St John's primary school, objectors voiced concerns about the site being outwith the local vicinity, being smaller than the space that would be lost and being beside an existing park.

The council's commitment to the provision of open space was also questioned, as was the protection that would be provided by Fields in Trust status, which the council intends to seek for the replacement site. The committee had previously urged the council to consider whether there are any other additional measures that could be taken to allay concerns about the security of the replacement open space's future. In response, the promoter provided details of the other possible measures that it had considered and concluded that none of those measures would provide additional protection at this stage. The preferred solution remained the designation of the land as having Fields in Trust status. The council stated at the committee meeting on 7 May:

"in the circumstances, Fields in Trust protection is the best proposal for allaying any concerns that objectors might have."—[*Official Report, City of Edinburgh Council (Portobello Park) Bill Committee, 7 May 2014; c 361.*]

We are content that that designation should provide a satisfactory additional safeguard for the future of the site.

The committee took account of each objection on its own merits and circumstances, but a number of clear themes featured consistently. The main issues that arose included the loss of amenity and green space; road safety, traffic and congestion issues; the visual impact of the proposed development, including the loss of views, the height of the building and lighting; and a number of environmental issues, such as noise pollution, operational disturbances and the loss of wildlife and biodiversity.

In relation to the mitigation measures that might be sought to alleviate concerns in connection with those issues, I highlight that the promoter asked objectors, including in evidence sessions, what proposals they had that might mitigate their concerns in the context of the bill being passed and the school being constructed on the park.

Objectors argued that the only mitigation measure would be the school being built on another site.

In conclusion, the committee has spent over 12 months considering the issues pertaining to this divisive bill and is disappointed that there has not been a greater degree of constructive resolution and engagement between the parties. We acknowledge the objectors' concerns on various fronts. For example, there will inevitably be adverse impacts due to noise and operational disturbance; there will be a visual impact from the construction of the building and some loss of views to Arthur's Seat; and there are indeed health benefits to be derived from open space, which the park provides. However, the committee also recognises that compensatory and mitigation measures will be implemented as required by the planning process; that there are other green and open spaces in the vicinity; and that there will be other benefits to the community from the new sporting facilities.

Overall, we are satisfied that an appropriate balance has been struck between the private interests of those who would be adversely affected by the proposal and its benefits to the wider community.

I move,

That the Parliament agrees that the City of Edinburgh Council (Portobello Park) Bill be passed.

15:51

The Minister for Local Government and Planning (Derek Mackay): I acknowledge the work of the City of Edinburgh Council (Portobello Park) Bill Committee in considering the bill and the efforts of those who made written submissions or gave oral evidence.

As I said when I spoke in the preliminary stage debate on the bill in January, the Scottish Government has taken a neutral position on the bill, as is the case in such matters. The bill does not have any direct impact on Scottish Government policy; the Government is content that it will not have any direct consequences for the general law; and the Government does not have a view on the merits of the proposed site—that is a matter for the council. However, I recognise the widespread agreement that the current Portobello high school building is not fit for purpose and needs to be replaced. I also recognise that the council has identified land at Portobello park as its preferred site for a replacement building, as well as the concerns of those who do not wish to see the park being used for that purpose.

None of those issues is for the Scottish Government: they are local issues that should be resolved locally. The only reason why the matter

was brought to the Parliament was that, following a decision by the Court of Session, the only way for the council to achieve its preferred option for the replacement Portobello high school was to secure the passage of a private bill.

An important part of the committee's consideration was whether there had been sufficient consultation by the council on its proposals. In its preliminary stage report, the committee concluded that there had been adequate consultation, but also that a number of issues had been raised about the detail of the consultation process. It therefore encouraged the City of Edinburgh Council to reflect on those issues.

I share that sentiment. It is vital that local people are properly consulted about and able to influence decisions that affect them. I therefore encourage all local authorities—not just the City of Edinburgh Council—to consider the points that were made during consideration of the bill and to make any changes to their procedures that may be appropriate.

In that context, I will say something briefly about the Scottish Government's Community Empowerment (Scotland) Bill, which was introduced earlier this month. That bill's core purpose is to help communities to achieve their own goals and aspirations through ownership of land and buildings and by having their voices heard in the decisions that affect their area. It includes a requirement for local authorities to publish their proposals and consult community bodies before they dispose of or change the use of common good assets. I do not propose a wider redefinition of common good assets.

There can often be uncertainty about what constitutes common good land or the purposes for which it can be used. The Community Empowerment (Scotland) Bill would therefore place a statutory duty on local authorities to establish and maintain a register of all property that they hold for the common good. Taken together, the provisions in the bill would thus substantially improve transparency and accountability in relation to common good land.

In conclusion, the City of Edinburgh Council (Portobello Park) Bill Committee carefully considered the issues that were raised during the bill's progress. In particular, I note that it sought to address concerns about the future of the site by passing an amendment that was aimed at securing that, if the land ceased to be used for educational purposes, it would revert to its original use and status. That is to be welcomed as being true to the core purpose of the bill. However, I look forward to hearing what other members will say this afternoon. I emphasise once again that the

Government continues to take a neutral position on the bill.

15:55

Kezia Dugdale (Lothian) (Lab): I, too, thank committee members, and indeed the clerks, who do the work behind the scenes.

When we last met to discuss the bill, I expressed my frustration at the rules that preclude members who represent an area from participating in a private bill process that affects that area. I was worried that my colleagues would not understand the complex and long-standing community interest in the issue and that they would be cold to the arguments from both sides and simply go through the motions, without an affinity for the community in question.

On reflection, that approach was exactly what was needed. I commend committee members and the clerks for their dedicated but dispassionate approach to the bill. They have examined the detail in great depth and have often delved into the detail beyond the strict application of the bill, producing a report that is thorough, robust and a credit to the Parliament.

I have received a number of emails from people who are opposed to the bill, which have questioned the committee's integrity. Each email follows the same format and highlights the same key points; it feels co-ordinated in the way that many charity-led campaign emails do, but it does not have the parallel numbers.

The same email says that MSPs across Scotland were being told to vote in favour of the bill before any evidence had been heard, and that there is clear evidence that the bill is being rushed through as a political decision and is not being considered on its merits. I categorically refute those suggestions. There is no Labour whip in place for this afternoon's vote and I understand that every other party represented in the chamber has taken the same decision.

I say to colleagues across the chamber who have perhaps yet to make up their minds that I will vote for the City of Edinburgh Council (Portobello Park) Bill at 4.45 this afternoon, and I will do so with every confidence that it represents the majority will of the community.

There is substantial evidence of community support in the preliminary stage report and in the consideration stage report that was published last month. Let me add to that the reality of my five years of solid campaigning in the constituency. I have spoken to thousands and thousands of voters face to face on their doorsteps. I know that the community wants this school and wants it on the park.

I will say a bit more about the community in my closing speech, but I will spend the last few minutes of my opening speech examining the suggestion that has been made by the objectors that the bill will somehow set a precedent on common good land. The objectors' email states that because

"there are no plans to reform common good legislation, this bill if passed will allow other councils to take common good land for any purpose they wish".

It is exactly because the bill is so narrowly defined that no precedent is set. Should Parliament vote in favour of the bill this afternoon, the law of common good remains unchanged except for the specific instance of Portobello park. Paragraph 38 of the consideration stage report could not be clearer in that regard.

The final point that is made regularly in emails from objectors is that the Parliament is overruling a judgment of the courts. The committee addressed that point ably by highlighting the role of the courts as interpreting and applying the law as it stands. Parliament has the power to legislate as it considers appropriate, even if the effect is to change the law as determined by a court. In the simplest terms, that is democracy.

The committee also addressed the European convention on human rights issues. I understand that objectors are considering that as their next legal move. The committee's preliminary stage report noted that

"a fair balance has been struck between the competing interests of those adversely affected by the scheme and the benefits to the wider community."

The principle of proportionality has been applied, and I would ask the objectors to consider the concept of proportionality when they consider their next attempt to block the school.

I reiterate my thanks to my diligent colleagues who have served the committee since its establishment. I urge my colleagues in the chamber to vote based on the strength of the consideration stage report. They should be in no doubt that the vast majority of community support is for the bill to progress.

15:59

Gavin Brown (Lothian) (Con): I am grateful to the convener for her remarks and for their tone, and for the way in which the committee approached what I think was a difficult task. There was a range of evidence to look at and some complex issues for committee members to get their heads around, and there was a great degree of contention between the promoter of the bill and those who were, quite rightly in their view, objecting to it. That process had to follow the form

that it did, and the committee did its job properly and particularly well.

The promoter's memorandum, which was quoted earlier, says that the purpose of the bill is

"to address the legal obstacle which is currently preventing the new Portobello High School being built on Portobello Park",

with the aim of reclassifying the park

"as alienable common good land for the purposes of Part VI of the Local Government (Scotland) Act 1973."

The significant progress that has been made on a couple of items has encouraged me to make my up mind to vote in favour of the bill at decision time today. The first was the firm commitment that was given to designate the existing site as a new park or recreation facility and to give it Fields in Trust status. Although that is not a statutory provision, it provides a degree of safeguarding and weakens some of the arguments against the bill. Secondly, as was referred to earlier, the amendment in the name of Alison McInnes that was lodged at phase 2 of consideration stage restricts the situation somewhat. Effectively, the bill can do only what it says on the tin—it will not give any wider scope to the City of Edinburgh Council or to any other council. Those two points are quite important and they tip the balance in favour of our passing the bill.

Like many other members, I have had a number of contacts from constituents, and from some who are not constituents, criticising the bill and challenging it. It is worth dealing with some of those points by looking at them in some detail.

One of the complaints is that the bill is being rushed through. Rushing through legislation is never a good thing, so that charge must be looked at seriously. However, I compared the timescale of the bill to the timescales of several other bills going through Parliament, and I do not think that they are particularly different.

The City of Edinburgh Council (Portobello Park) Bill was introduced on 25 April 2013. It went through the preliminary stage in January this year and the consideration stage earlier this month, and it reaches its final stage today, at the end of June. That is an approximate timescale of one year and two months.

The Housing (Scotland) Bill was also a complex piece of legislation and we spent a considerable amount of time looking at it in the chamber yesterday. That bill was introduced on 21 November 2013. It had completed stage 1 by the end of April and went through stage 2 earlier this month, and it was passed yesterday. The Housing (Scotland) Bill therefore went through in a shorter timescale than the City of Edinburgh Council (Portobello Park) Bill.

Let us compare the City of Edinburgh Council (Portobello Park) Bill with another very complex piece of legislation that is going through Parliament. The Revenue Scotland and Tax Powers Bill was introduced just before Christmas last year, and it went through stage 1 in May and stage 2 a couple of weeks ago. Although we do not yet have a final date for stage 3, I understand that it will come to the chamber in August. Again, that is a slightly shorter timescale than the timescale that we had for the City of Edinburgh Council (Portobello Park) Bill.

The argument that the bill has been rushed through can be made, but when I compare its timescale to those for other bills, I am not sure that that argument stands up.

On lack of scrutiny, I did not sit through the evidence sessions, and it is valid for objectors to put their point. However, on looking at the *Official Report* of some of those evidence sessions, the number of evidence sessions that there were during the 14 months and the length of some of those sessions, the level of scrutiny does not strike me as being particularly different from that of other bills that have been passed, having been looked at by committees.

Kezia Dugdale touched on the issue of precedent. I am not convinced that the bill sets a precedent. It is very tightly defined around the coordinates within Portobello park, and it is unlikely that lots of councils will now be able to bring private bills to the Parliament—for a start, the Parliament would have capacity issues. For those reasons, I do not think that the bill sets a precedent.

As I have said, come decision time, I will support the bill.

16:05

Fiona McLeod (Strathkelvin and Bearsden) (SNP): I speak as a member of the committee that considered this private bill and will concentrate my remarks on reassuring MSPs—both those who are in the chamber and those who are following the debate in their offices—before they vote at 4.45 this afternoon, given the number of emails that they have received and the assertions that have been made in them, that the committee conducted itself in an exemplary fashion.

Having been the convener of a previous private bill committee—the National Trust for Scotland (Governance etc) Bill Committee—I understand how private bill committees have to conduct themselves, and the City of Edinburgh Council (Portobello Park) Bill Committee conducted itself in an exemplary fashion. All submissions from all parties were very carefully considered by all members of the committee, at length and in great

detail. When the committee needed clarification, it asked for it from all parties, whether they were objectors or the promoter.

As other members have said, we added an extra meeting to ensure that the witnesses got as much time as possible to give the evidence that they thought the committee had to hear. Indeed, one meeting began at half past 8 in the morning to ensure a timetable that meant that we did not have to curtail the evidence of any witness. We had the timetable and we had the time, if the witnesses could have stuck to it.

As the convener said, we issued two reports—one at the end of our deliberations at the preliminary stage and one at the end of our deliberations at the consideration stage. Private bill committees do not always do that. At all points in the process and at all meetings of the committee, every member took their duties seriously and worked accordingly.

The convener did not have an easy job. In her opening statement, she thanked the other committee members and the clerks and parliamentary officers who supported us. I am sure that I speak on behalf of my fellow committee members when I thank the convener for helping us through this long process. I also record my thanks to the clerks and the parliamentary officers for the support that they gave us in coming to a clear understanding of the process that we were going through and the decision that we reached.

One of the assertions in the emails that I would particularly like to address is the assertion that there was a whipped vote on the bill at the preliminary stage and that there will be a whipped vote today. Presiding Officer, you know that I am a member of the Standards, Procedures and Public Appointments Committee. I take that role as seriously as I took my role on this private bill committee. I am also the senior Government whip, and I make it absolutely clear that neither at the preliminary stage nor at the final stage today have Scottish National Party members been in any way whipped or influenced. The individual members of the Scottish National Party will vote today on the basis of their consideration of the committee's reports, which were produced with care and due consideration.

My fellow MSPs can be confident in the committee's reports, confident that everything was examined robustly and confident that those reports are excellent supporting evidence to aid each individual member of the Parliament in making their decision today on whether the bill should be passed.

16:09

Alison McInnes (North East Scotland) (LD):

The very nature of the private bill process, in rightly giving objectors a proper process for their views to be heard, tends to emphasise the negative. After months of considering objections, members of the committee would be forgiven for thinking that no one supported the council taking the proposed course of action, so Kezia Dugdale's speech was welcome, in that it reminded us just how much support there is in the community for that course of action.

As has been referred to, over the past week all members will have received emails urging them to vote against the bill. In those emails, objectors claim:

"The bill has not been properly scrutinised; evidence has been ignored and objections have been dismissed without even being heard."

Others complain that the bill is being rushed through, and some suggest that the outcome of the bill process was agreed before it even started.

As a member of the committee who has invested countless hours in the process over the past 13 months, I completely refute those claims. I believe that all members of the committee carried out their duties objectively and conscientiously. We set out our views in a detailed way in two separate reports—our preliminary stage report and our consideration stage report. At this point, it is appropriate for me to take the opportunity to thank the clerks who supported us in that process.

The bill was introduced in April 2013 and the committee has been dealing with it at consideration stage since January. That is hardly rushing it. The procedures that the committee followed ensured that the promoter and the objectors had a fair opportunity to have their respective cases presented. It is worth emphasising that the fact that objections were not upheld by the committee does not in any way indicate that the committee did not take into account all the concerns that were put forward in the objections. Indeed, the committee considered the issues that were raised in a number of ways: through the consideration of individual objections; by giving every objector the opportunity to submit supplementary written evidence at consideration stage; and by ensuring that every objector had the opportunity to be represented by a lead objector at oral evidence sessions.

In a number of areas, the committee acknowledged or accepted that it was possible that there could be a detrimental effect on objectors' private interests as a result of the construction of the school. For example, we accepted that it was inevitable that there would be some adverse impact from operational disturbance

while the school was being constructed and thereafter. However, we were also satisfied that that had been subject to the planning process and that measures would be implemented to mitigate any such impact.

Our role as a private bill committee was to reach a view on the extent to which an individual's private interests would be affected, and the extent to which that was balanced by the general benefit to the wider community as a result of the school being built. As the convener said, we ultimately concluded—taking account of factors such as the compensatory and mitigation measures that would be implemented—that the general benefits that would be brought to the community as a result of the proposal were more significant than the private interests of those who might be adversely affected.

As the convener explained, only one amendment was lodged during phase 2. It was lodged by me and it was agreed to unanimously. Section 2A of the revised bill will ensure that, once the status of the park has been changed for the limited purposes in question, should that use cease, the inalienable common good status would reapply automatically. It provides safeguards regarding any future use of the land and it protects its inalienable common good status in circumstances in which the land is no longer used for an educational purpose, or in which it is not used for such a purpose in the first instance.

It is worth remarking on the apparently polarised positions of the parties involved with the bill. It is clear that the council has much to do to rebuild trust in some sections of the community. It has an opportunity to do that in taking forward the replacement open space—getting everyone involved to shape the exact nature of that provision could be a way to bring the different factions together around a positive outcome for the community.

If the bill is passed today—and I, for one, will support it—I really hope that the energy and determination that objectors have so far spent on trying to prevent the school from being built on the park, perfectly legitimately, will now be harnessed to ensure that the community of Portobello gets the school that it so badly needs.

The Deputy Presiding Officer (John Scott):

Many thanks. I now call on Alison Johnstone, after whom we will move to closing speeches.

16:14

Alison Johnstone (Lothian) (Green): First, I declare my interests as a City of Edinburgh councillor from 2007 to 2011, a current Lothian MSP and a board member of Fields in Trust Scotland. I, too, thank the committee members,

and the clerks who supported them in their deliberations.

As an Edinburgh councillor, I visited Portobello high school and was, frankly, appalled by the condition of the building. Learning and teaching in that poorly designed and poorly maintained building is needlessly challenging. If Portobello high school had been properly designed in the first place and had been allocated a meaningful life-cycle maintenance budget, we might not be here today. I know that those who oppose building on the park also whole-heartedly agree that Portobello needs a new school. Passions have run high in this debate because our parks and our schools are among our most precious and most important community assets, and the local community concerned cares deeply about those assets.

The City of Edinburgh Council obtained advice from senior counsel in 2008 that advised the council to seek the court's permission to appropriate Portobello park before taking any further action. However, that expert advice was not made known publicly and has come to light only as a result of a freedom of information request. The council should have established, without a shadow of a doubt, that it could build on the park. Offers to share costs to do so were not taken up, and the on-going lack of clarity lengthened the debate around the future of the school and the park by some years.

We are now years down the line and we must ensure the best possible outcome for the entire community. My amendment committing the City of Edinburgh Council to provide an area of replacement parkland for that lost if the bill is enacted was not selected for the debate this afternoon, but it can be seen in Tuesday's *Business Bulletin*. The people of Portobello want and need a new high school where their young people can flourish and learn. The people of Portobello also need certainty that their environment and quality of life will not be diminished. I fully understand why there are community concerns around that issue. The City of Edinburgh Council has changed its mind previously regarding the provision of replacement open space, so making that part of the bill's provisions would provide greater protection and recognition at a national level.

That said, Green councillors in the City of Edinburgh Council have ensured, via an addendum that was lodged, that the council will secure the replacement park with Fields in Trust status. As I said, I sit on the Fields in Trust Scotland board and I am reassured that Fields in Trust protection is formally being processed with the City of Edinburgh Council for both the golf course at Portobello park and the new open area

that will be where the school currently stands. It is worth noting that there has been no challenge to any site protected by Fields in Trust since it was formed in the 1920s and that it has always successfully negotiated for appropriate replacement provision in cases in which councils have approached it.

I will support the bill at this final stage. Although they are not part of the bill's provisions, there are assurances in place for the replacement park. I welcome the consideration stage amendment from Alison McInnes on protecting the land's legal status should it cease to be used for education. There are lessons to be learned from this experience and process, not least about how we design our schools in the first place. Are we seriously maintaining them? Are we putting funds aside to ensure that they do not deteriorate to the state that Portobello high school finds itself in?

I look forward to the arrival of a school that pupils in Portobello deserve and the community can be proud of. I look forward, too, to the provision of quality open space that will genuinely enhance the quality of life of people in Portobello. I hope that in future the community can regain the cohesion that makes Portobello such a special place to live.

The Deputy Presiding Officer: We now move to the closing speeches. I call Gavin Brown, who has up to five minutes.

16:19

Gavin Brown: This has been a pretty constructive debate. I was struck by the contributions of a number of members.

Fiona McLeod talked about her experience of previously chairing a private bill committee, although the National Trust for Scotland (Governance etc) Bill was perhaps a little less contentious than the City of Edinburgh Council (Portobello Park) Bill. Nonetheless, she has had experience of a private bill. She also carefully explained the way in which the committee had worked and how it tried to take into account all the competing interests, for example, by accepting all supplementary evidence in written form, organising an extra meeting and changing the planned hours for meetings to try to ensure that all witnesses could say everything that they wanted to say and put it on the table.

I was struck by Alison McInnes's speech and in particular by her comment that, just because the committee did not uphold complaints, that does not mean that it did not take them into account. Objectors to the bill, in reading the consideration stage report, might feel that the committee did not consider things, because none of the complaints was upheld in its entirety. However, as members

have pointed out, on a number of occasions, the committee acknowledged disadvantages and then carefully laid out why it felt that a complaint should not be upheld, because those acknowledged disadvantages were superseded by the advantages.

Alison McInnes rightly said that the council has a job to do not just in building a school but in rebuilding trust throughout the community. Most speakers have acknowledged that certain parts of the council process, although described as "adequate", were not what they should have been and were not of the standard that people are entitled to expect. The council has to learn lessons from that.

Alison Johnstone touched on a really important issue in allowing us to focus on the conditions at Portobello high school, which appalled her. The school has thrived, although the original design was perhaps flawed and the maintenance has not been what it ought to have been. Despite that, the school has succeeded enormously, which is a real tribute to the students, teachers and parents. Given the success of the school in those conditions, imagine what it would be capable of achieving were it to have the building and facilities that it deserves and merits. That is one reason why there is wide support for the bill.

Of the emails that members have received on the issue over the past week or two, very few if any have been from those who support the bill. One email made it clear that there was a deliberate attempt among those who are in favour of the bill not to send individual emails to MSPs—there was one email on behalf of everybody who is in favour of the bill. From the consultation and the public meetings, it is pretty clear to me that there is a substantial majority in favour of the bill and that it has support more widely.

The committee said that it attempted to achieve "a fair balance ... between the competing interests of those adversely affected by the scheme and the benefits to the wider community."

The committee considered the bill carefully and took complaints into account. It decided on balance, and without division, that the bill ought to be passed, as that would have greater benefits to the wider community. As I said earlier, on that basis, I will support the bill at decision time.

16:23

Kezia Dugdale: It is our last day of term but, instead of getting out the board games, we are here discussing a very important issue. It is worth pointing out how full the public gallery is. I welcome a number of community councillors, the chair of the Portobello for a new school—PFANS—campaign and a number of PFANS

members, as well as my Labour colleagues Joan Griffiths and Maureen Child, who are both councillors for the school catchment area. I have also seen the outstanding headteacher of the school, Peigi Macarthur.

There are many other local residents in the public gallery and watching online. Perhaps some are following the debate through the TalkPorty Twitter account or through the Facebook page “A New Porty High School in the Park”, which has more than 2,500 followers. That is evidence of a real community spirit and support for a school on the park.

In the preliminary stage debate, I shared with members the story of Jessie, whose mum and dad I met while chapping doors in the area. Jessie challenged me to take a tour of the school and I did so, recognising how important it was to see the school through the eyes of a child.

Jessie was in primary 2 at Towerbank primary school when she was first promised a new school. She will most likely leave Portobello high school having achieved a complete set of highers in the current building. She has spent an educational lifetime waiting for a new school, and it will likely pass her by.

Jessie has had a first-class education at Portobello high school, as every failure of the building has been more than compensated by the determination of the staff to deliver that education. I pay tribute to the headteacher, Peigi Macarthur, for leading a school that is pounding with life, culture, sport and opportunity. She has never let the challenges of the building overshadow the school’s achievements, and for that she must be commended.

I was at Portobello high last week to see the school show, “Schools Will Rock You”, and I was blown away by the talent of pupils and the dedication of staff who were involved in the production. However, there was a sense of make-do-and-mend: there were a lot of plugs for various bits of equipment all jammed in one place, and the windows were blacked out.

I can contrast that experience with my visit last week to the new Dunfermline high school, which has a dedicated theatre space with all the rigging and the fancy stuff that many an Edinburgh festival theatre venue would envy.

In addition, the Dunfermline school has dedicated 3G pitches, which made me think of the bus trip that the Portobello pupils have to take to the Jack Kane sports centre for physical education lessons. The provision for PE at Portobello is so poor that the school has a special dispensation for the target of two hours of PE, as it has had for years.

I look at the bright, airy and spacious school in Dunfermline and contrast it with the stairwells at Portobello, which are cramped and fraught with problems. Classes at the school are timetabled on the basis of the traffic in the stairwells, in an attempt to minimise the amount of time that the kids spend walking through them from class to class.

I am not envious or jealous of Dunfermline high school, but proud of it. I am proud that we have a school that befits the ambitions of its pupils and teachers, and I want that for everyone, including those in Portobello. I want Portobello to have a first-class community school because of its building, not in spite of it. It would be a community asset and, in my view and according to a number of members in the chamber, an enriching one.

The committee’s report is not black and white. It recognised that the consultation was not perfect, but it stated:

“The Committee does not consider that any shortcomings identified in the consultation process are sufficient to sustain any objection regarding the consultation’s adequacy.”

That takes us back to the concept of proportionality. The question is not whether the consultation was flawed, but whether any flaws were considered to be serious enough. The same goes for the minor loss of green space, views or house price values. The question is not the validity of those arguments, but whether they constitute enough of a reason to block the building of the school on the park.

Members should look at the report’s conclusion. It is quite unusual, as Alison McInnes pointed out, for a committee to comment on the polarisation of the parties involved in a bill. The committee has sent a strong message to the community that it should find a way through the situation. We may think that the referendum debate is fractious and divisive, but it has nothing on the school debate in the Portobello community.

I hope that the journey towards reconciliation and the future will start today, with a vote in this Parliament in favour of building the school on the park. With that vote, I understand that the shovels could be in the ground as soon as September and a new school could be ready for the start of the 2016 term. I hope that today we can all help to realise that ambition.

The Deputy Presiding Officer: I call on the Minister for Local Government and Planning, Derek Mackay, to wind up the debate.

16:28

Derek Mackay: Thank you, Presiding Officer—that is something of a challenge when one has to

remain neutral, as is the case with these matters, but I will do my best.

The debate has been consensual and constructive, and it has focused on a number of areas. First and foremost, we must consider the pupils who are being educated in a building that is clearly no longer fit for purpose. Finding a solution to that problem has been central to everyone's consideration.

It would be remiss of me not to remind members of the new moneys that were announced today to enable further investment in Scotland's school estate in partnership with local authorities. The Portobello issue was not necessarily about resourcing, but about the options that were available for a new site.

In her excellent speech, Siobhan McMahon went into great depth about the factors involved. She talked about how we must separate out all the different considerations—what is relevant for a planning authority, how a council considers estate management, legal status and people's objections and views, which must be in no way dismissed but balanced against the other considerations so that a decision can be taken.

There are calls to enhance the legislation around common good. We will do that through the Community Empowerment (Scotland) Bill, but there will be no wholesale revisiting of common good legislation, because I fear that if we tried to rewrite hundreds of years of legislation we would create many unintended consequences. However, greater transparency and community involvement will feature in the bill in the context of common good assets, which run to a value of hundreds of millions of pounds in Scotland.

There are people in local authorities, for example, who think that common good funds are overly bureaucratic and should be wound up and rolled up into mainstream council funding. I have decided that that is not the appropriate approach. Common good funds are communities' inheritance and should have a degree of protection.

For that reason, all members were right to point out that the bill will not set a legal precedent and open a new channel for adjusting common good funds. Any council would have to go through a process such as this one to achieve an outcome such as the City of Edinburgh Council is seeking—I must restate that from the Government's point of view. Like Gavin Brown and other members, I see no great rush from local authorities to come to the Scottish Parliament for similar legislation, even if they aspire to conduct a similar exercise.

Kezia Dugdale made a number of points. A central point was about the quality of education; she also talked about the need for a thorough approach, which delves into the detail, provides

robust consideration and shows determination to make the process work. She said that the Labour Party is not whipped, and Fiona McLeod reminded us that Scottish National Party members are not whipped either—I do not think that any party has whipped its members, including the Liberal Democrats and our two Greens. Members are free to vote with their heads and, of course, their hearts.

Kezia Dugdale also told us a very human story to remind us why the new school is so necessary.

Gavin Brown pointed out that the issue has been contentious and the committee has had a difficult task. As the planning system must do, the committee had to balance different interests in coming to its conclusions. It had to consider public benefit and overall benefit. Gavin Brown also talked about the timescales for the bill and the need to ensure that it received careful consideration.

Fiona McLeod said that the committee carefully considered all submissions, as we would expect a committee to do. She reminded us that conveners of private bill committees do not have an easy job. I can tell members that it is also difficult for a minister who has responsibility for decisions to do with local government and planning to balance all the different issues. At some point, we must reach a decision and then justify our decision.

Alison McInnes reminded us that the bill has attracted support as well as objections. She talked about how the planning process for any application sets necessary and relevant conditions, as does the bill. Section 2A, which was inserted by amendment, provides safeguards in relation to future use of the park, which was a key concern of many residents and objectors.

A number of members expressed hope that, whatever the outcome of today's vote, the community and parties involved, including City of Edinburgh Council, can build bridges and reconnect.

Alison Johnstone talked about the condition of the school building and the need to get the best possible outcome. I have sometimes been a critic of City of Edinburgh Council, but I note what she said about the Greens' clear view on the outcome of the bill. I am sure that, given their credentials, the Greens will pursue the point about open space, which has been made loudly and clearly.

I talked about enhancing transparency and community involvement in relation to the common good, and about on-going investment in the school programme. It will be for members to decide what is the right thing to do, having heard the arguments that have been expressed not just today but throughout the past year.

Today is the day we make a decision, and then we will move on to focus on all the different issues that have been played out. All I can say about the correspondence that I have received is that we as constituency MSPs, Government ministers and members of the individual parties are contacted by very strong campaigns, but we have to decide and come to a conclusion not simply on the basis of numerical gain but on the basis of what is right after considering all the different factors.

Even if it is inappropriate for me to do so, I will say that having listened to the debate, heard the deliberations and considered the information that has been shared I believe that, whatever members choose to do today, every member who has spoken and expressed such a well-informed opinion has put our collective integrity beyond question on this matter.

First and foremost in our minds has been ensuring a fair process and an equitable hearing and that the rights and interests of individuals as well as the general public good are pursued. In that sense, I think that the debate has been very constructive and takes us to the conclusion of the bill's passage and the vote in which members will make what they think is the right decision for Portobello high school and on the bill that has been presented to Parliament.

The Presiding Officer: Thank you, minister. I call James Dornan to wind up the debate. Mr Dornan—if you could continue until 4.44, I would be very much obliged.

16:36

James Dornan (Glasgow Cathcart) (SNP): Thank you, Presiding Officer—I think.

First of all, I support the motion in the convener's name and thank my fellow committee members and those who have taken part in this afternoon's debate.

As has been mentioned, this has been a lengthy process. To reach this point has taken more than a year, and we have held 14 meetings, including six oral evidence sessions. I do not intend to rehearse everything that happened at the preliminary stage—we have had that debate, and the convener referred to it in her speech—but I note that, following a substantial amount of written evidence and having heard oral evidence from the promoter, supporters and objectors, the committee recommended that the general principles of the bill be agreed to and that it should proceed as a private bill, which Parliament subsequently agreed.

That took us to the consideration stage. With 59 objections outstanding, the committee considered long and hard what would be the best approach to

scrutiny. The convener has already outlined our approach to grouping objections, but it might be worth noting that, given that the same or similar issues were being raised in the majority of objections, the committee could have divided objections into just two or perhaps three groups. We consciously avoided that, in the reasonable expectation that objectors who are living in different parts of the area around the park might envisage different degrees of adverse effect—for example, in respect of loss of amenity or concerns about traffic. In order to maximise the opportunity for evidence, we agreed to have six groups to ensure that all objectors had an increased opportunity to have their say. To further facilitate evidence from objectors, we accommodated requests from objector groups to reschedule their proposed evidence sessions.

Objections covered a range of issues from loss of amenity to traffic and road safety issues and visual impact. I will touch briefly on some of those points in the time that is available, but I note at this point that having considered all the written and oral evidence that was presented to us by the objectors, and all the responses and commitments that were received from the promoter in relation to compensatory and mitigation measures, the committee reached the view that the adverse effects on the private interests of individuals—that is, the objectors—were outweighed by the benefits that enactment of the bill and subsequent construction of the new school would bring to the local community.

As other members have pointed out, another concern that was presented by the objectors was that the bill would create a precedent for other local authorities to follow suit by trying to introduce bills that would have an impact on common good land in their areas. That point has been considered throughout the process, and we remain of the view that the bill does not create a precedent because it relates solely to a particular area of land in a particular part of a particular city in Scotland. Any bills covering common good land elsewhere would, of course, require to be considered on their own merits and circumstances.

The convener has referred to the compensatory measure of the creation of an area of replacement open space at the site of the current school; I note, as was discussed earlier, that Alison Johnstone lodged an amendment whose effect would have been to bind the City of Edinburgh Council to provide such replacement open space by including the provision in the bill. I echo the convener's point that the committee was keen to ensure that the council provided such space, and we are satisfied with the promoter's commitment in that respect. For example, we note the full council's commitment, in 2012, to make provision for

replacement parkland or green space to be used for social and recreational purposes, and that those purposes will be safeguarded by Fields in Trust. Moreover, in March 2013, the council agreed to refer the question of the most appropriate use of that new open space, within the parameters of social and recreational purposes, to a local neighbourhood partnership for consultation.

In written evidence to the committee on 26 March, it was stated:

"The promoter's letter ... of 31 January 2014 ... confirmed the commitment to securing the area of replacement open space, offered to provide a further express undertaking to the Committee to that effect, and summarised the ... intention to secure Fields in Trust ... On 6 February 2014, the Council's elected members unanimously approved giving Fields in Trust a written undertaking to the effect that both the replacement open space and the remaining area of open space on the Park will ... be dedicated as Fields in Trust".

I will provide a flavour of some of the objectors' concerns. As I have mentioned, a number of the groups had predominantly the same or similar concerns, including loss of amenity and visual and environmental impacts, but as the convener said, when objectors were invited by the promoter to put forward any ideas that might mitigate their concerns in those areas, they argued only that the school should be built elsewhere.

The vast majority of objectors argued that they would lose a significant amenity and that it would impact on a variety of recreational activities were the park to be appropriated for the council's education functions. They supported the argument by suggesting that the loss of green space would have a negative impact on their health and wellbeing.

The committee acknowledged that loss of the park would represent a loss of green space, and acknowledged the general health benefits that are to be derived from such spaces. However, we noted that there are other parkland areas in Portobello. We also recognised—as we had at the preliminary stage—that should the park be built on, replacement open space compensatory measures were planned. We were content that issues of loss of amenity did not outweigh the benefits to the community of a new school's being built on the park—in particular when considering that the local community would, where appropriate, have access to the sports and leisure facilities that it is proposed will go with the school. Objectors expressed concerns about the visual impact of the development, including the loss of views, the height of the building and the fencing. *[Interruption.]*

The Presiding Officer: One moment, Mr Dornan. I ask members, particularly those who are just coming into the chamber, to settle down and

let us hear Mr Dornan to his conclusion at 4.44 pm.

James Dornan: Thank you very much, Presiding Officer.

In response, the promoter argued that the visual impact had been taken into account as part of the planning process with, for example, the building being designed to retain views of Arthur's Seat and the majority of fences being low and integrated within boundary planning. It was confirmed that the new football pitches would be floodlit and that the lighting was designed not to spill out to neighbouring houses, and that planning consent was subject to the hours of use of the pitches being restricted.

Objectors maintained that development of the park would lead to a loss of wildlife and the removal of trees, which would cause a loss of habitat for birds and wildlife. The committee acknowledged those and other environmental impacts that would result from the development, but was satisfied with the promoter's references to compensation measures, which included additional planting and a condition to the planning permission requiring a detailed landscape and habitat management plan.

Objectors who do not live in the immediate vicinity of Portobello park, or who do not live in Edinburgh at all, were included in one group. Their concerns related primarily to issues that had been covered at the preliminary stage: for example, the role of the Parliament in legislating subsequent to a Court of Session ruling, the precedent argument, and alternative sites. However, they also had some concerns about loss of amenity. The committee took the view that although those objectors might experience some loss of amenity, it was clearly not at the same level as that which would potentially be experienced by objectors in the immediate area of the park.

Portobello golf course golfers objected as a special interest group. They principally had two concerns: health and safety and future use of the golf course. On health and safety, the objectors were concerned that there would be risks to school pupils taking short cuts across the golf course. Evidence that was presented by the promoter suggested that there would be mitigation measures to counter those concerns, including appropriate fencing being put in place. On the future of the golf course, the objectors feared that a case might be made for development on the site. The promoter referred to previous assurances that there were no such plans. The committee was satisfied that the golf course did not form part of the area to which the bill applies and that mitigation measures had been proposed to protect the users of both the course and the school.

The committee was satisfied that, although the bill does not authorise the construction of a new high school in Portobello park, the removal of the legal obstacle that is currently preventing it will allow the development to go ahead. The committee, having considered the evidence that was presented to it, including the mitigation measures and commitments that were provided by the promoter, concluded that the benefits that will result from the bill's being enacted and the construction of the new school on the park will outweigh any adverse effects on the private interests of objectors.

I pass on my sincere thanks to Siobhan McMahon for her role as committee convener. She fulfilled the role particularly diligently. Her handling of all the evidence was impressive; she demonstrated patience and flexibility in managing the oral evidence sessions, giving witnesses ample opportunity to contribute, and she dealt with a significant volume of written evidence and separate correspondence, much of which was unpleasant, to say the least.

I support the motion.

Parliamentary Bureau Motions

16:44

The Presiding Officer (Tricia Marwick): The next item of business is consideration of three Parliamentary Bureau motions. I ask Joe FitzPatrick to move motions S4M-10487, S4M-10488 and S4M-10489, on the approval of Scottish statutory instruments.

Motions moved,

That the Parliament agrees that the Provision of Early Learning and Childcare (Specified Children) (Scotland) Order 2014 [draft] be approved.

That the Parliament agrees that the National Confidential Forum (Prescribed Care and Health Services) (Scotland) Order 2014 [draft] be approved.

That the Parliament agrees that the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Amendment Regulations 2014 [draft] be approved.—[*Joe FitzPatrick.*]

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

Decision Time

16:45

The Presiding Officer (Tricia Marwick): There are two questions to be put as a result of today's business. The first question is, that motion S4M-10379, in the name of Siobhan McMahon, on the City of Edinburgh Council (Portobello Park) Bill, be agreed to.

Motion agreed to,

That the Parliament agrees that the City of Edinburgh Council (Portobello Park) Bill be passed.

The Presiding Officer: I propose to ask a single question on motions S4M-10487, S4M-10488 and S4M-10489, on the approval of Scottish statutory instruments. Any member who objects to a single question being put should say so now.

There is no objection, so the question is, that motions S4M-10487, S4M-10488 and S4M-10489, in the name of Joe FitzPatrick, on the approval of SSIs, be agreed to.

Motions agreed to,

That the Parliament agrees that the Provision of Early Learning and Childcare (Specified Children) (Scotland) Order 2014 [draft] be approved.

That the Parliament agrees that the National Confidential Forum (Prescribed Care and Health Services) (Scotland) Order 2014 [draft] be approved.

That the Parliament agrees that the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Amendment Regulations 2014 [draft] be approved.

The Presiding Officer: That concludes decision time. Enjoy your recess—I am sure that you will all be busy. I will see you again in six weeks.

Meeting closed at 16:46.

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