



OFFICIAL REPORT
AITHISG OIFIGEIL

Public Petitions Committee

Thursday 24 May 2018

Session 5



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PUBLIC PETITIONS COMMITTEE
9th Meeting 2018, Session 5

CONVENER

*Johann Lamont (Glasgow) (Lab)

DEPUTY CONVENER

*Angus MacDonald (Falkirk East) (SNP)

COMMITTEE MEMBERS

*Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con)

*Rona Mackay (Strathkelvin and Bearsden) (SNP)

*Brian Whittle (South Scotland) (Con)

*attended

CLERK TO THE COMMITTEE

Catherine Fergusson

LOCATION

The Sir Alexander Fleming Room (CR3)

Scottish Parliament

Public Petitions Committee

Thursday 24 May 2018

[The Convener opened the meeting at 10:00]

Interests

The Convener (Johann Lamont): Welcome to the ninth meeting of the Public Petitions Committee in 2018. I remind members and others in the room to switch phones and other devices to silent.

The first item on the agenda is a declaration of interests. In accordance with the terms of the Interests of Members of the Scottish Parliament Act 2006, I invite Rachael Hamilton to declare any interests that are relevant to the committee's remit.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): Thank you, convener. I have no interests to declare.

The Convener: Thank you, and we welcome you to the committee.

New Petitions

Hidradenitis Suppurativa (Specialist Support) (PE1682)

10:00

The Convener: The second item on the agenda is consideration of new petitions. The first new petition for consideration is PE1682, by James Jamieson, on access to specialist support for hidradenitis suppurativa—HS—sufferers in Scotland.

The note that has been prepared by the clerk and the Scottish Parliament information centre provides some background on the condition and explains that there is no cure. It explains the treatments that are typically available and are used to treat the condition, and it mentions the specialist clinic at Guy's and St Thomas' NHS Foundation Trust in London.

The briefing provides some information on research and guidelines and notes that there is no published Scottish intercollegiate guidelines network guideline on the condition. It also includes a note on an informal meeting that Rona Mackay and I had with the petitioner in April.

Members may have received recently a paper by AbbVie with the findings of a survey that it recently conducted with HS sufferers in Scotland with the purpose of understanding not just the impact of living with HS on an individual's health, but the wider impact on their day-to-day living.

Do members have comments? Rona, do you want to say something about our meeting?

Rona Mackay (Strathkelvin and Bearsden) (SNP): Yes. We had an interesting meeting in which Mr Jamieson explained the severity of the condition and the extent to which it affects his day-to-day life. He talked about the lack of public awareness, and he feels that there is not enough specialist knowledge north of the border. That is the nub of it.

The Convener: One thing that struck me was that he has been supportive of other people who have suffered. He said that a lot of people do not want to talk about their condition, that they feel quite isolated by it and that, when they go for help, they are perhaps treated with less sympathy than they are entitled to because the people who deal with them do not have enough specialised understanding of the condition. He said that people need to know more about it, but also that there might be a way to bring people with expertise together in a specific clinic so that people can go to one place where people are aware of the condition. He gave examples of

people being treated quite dismissively and told that the problem is that they are overweight or they smoke too much when, in fact, the condition is chronic.

We had never heard of the condition, which says something in itself. Rona Mackay had no awareness of it, and I think we were both quite taken with the massive impact that it has had on Mr Jamieson's life. He described other people's experiences of the effects on their family life and community life, as well as how it affects their ability to work. They feel that, when they look for help, folk are not sufficiently alive to what they experience.

Rona Mackay: Mr Jamieson has started a support group for fellow patients, which is difficult to run at times when he is not well. He is keen to get some structured support for the condition.

Brian Whittle (South Scotland) (Con): I am struck that there is no SIGN guideline on the condition. That seems to be a recurring theme in some of our work around the medical profession and its understanding of certain conditions. This petition seems to be another example. That almost brings me to the conclusion that we have to ask our educators whether we are informing our medical staff about such conditions. If there are no SIGN guidelines, how on earth are the conditions to be treated? How are we to ask our general practitioners to signpost patients to the available treatment?

Rachael Hamilton: I seek clarification on the referrals that can be made. Our briefing paper notes that referrals can be made to Guy's and St Thomas' NHS Foundation Trust but that health boards would prefer that the treatment be delivered locally. Is that treatment available? Are NHS boards in Scotland making referrals to Guy's and St Thomas'?

The Convener: The petitioner's direct experience was that he got a referral. He was positive about his experience but, given the amount of time and effort that it took to go down to the clinic, he found it exhausting. He argues that a specialist clinic should be available in Scotland so that whomever a person with the condition deals with understands how the condition reveals itself and how to live with it.

I suppose the question that I am interested in asking health professionals is whether it would be possible to run such a highly specialised clinic in Scotland. Are there enough people with the condition? If someone has a condition that few people have, does that mean that they do not get the level of support that they require because there are not enough people with it? That in itself would be pretty horrific. As I said, the petitioner certainly spoke positively about his experience in

London, but he felt that he was probably not going to continue that.

Rona Mackay: He said that, when people attend the clinic, they get a card with details of a dedicated contact point for support in the event of emergency flare-ups. Someone is on hand all the time for people who call the number. However, we do not have that service up here. That is what he wants.

The Convener: Rona Mackay and I found our discussion with Mr Jamieson compelling and challenging.

Rona Mackay: Yes.

The Convener: There are clearly things that we will want at least to ask questions about. We should certainly write to the Scottish Government. Do members have other suggestions?

Rona Mackay: We could write to the British Association of Dermatologists and the Hidradenitis Suppurativa Trust to seek their views.

The Convener: Who should we put the question about the SIGN guidelines to? We could start with the Scottish Government and establish whether the responsible body is Healthcare Improvement Scotland. Forgive my ignorance, but I do not know who instigates guidelines or what prompts them.

Brian Whittle: HIS is our equivalent body up here. It acts as a conduit and it would probably be able to take the matter to SIGN.

The Convener: That is useful. Once we have that evidence, we can reflect further on what we want to do and Mr Jamieson will be able to give us further comments if he wants to do so.

I thank Mr Jamieson for bringing the petition to the committee and we look forward to getting more information from those who we will be writing to.

Rachael Hamilton: Can we get information on what the health boards currently offer other than general dermatology services? Is there anywhere in Scotland that offers a service or specialist treatment for the condition?

The Convener: Shall we start by writing to the Scottish Government and put that question to it? It will perhaps get the information from the health boards, and we will see what comes from that.

Members *indicated agreement.*

Permitted Development Rights (Conservation Areas) (PE1688)

The Convener: The next petition is PE1688, by Alastair Ewen, on behalf of Westerton garden suburb residents association, on permitted development rights in conservation areas. The

petition calls on the Scottish Government to review the legislation on permitted development rights, which the petitioners consider impacts unfairly on residents of conservation areas and listed buildings in Scotland. The background information on the petition says that residents face dilemmas because of the technical requirement to submit a planning application for minor work on properties.

The note by the clerk and SPICe provides some background on the current requirements and refers to the Scottish Government's consultation on raising planning fees. It notes that section 21 of the Planning (Scotland) Bill allows ministers to make regulations allowing planning authorities to reduce or waive fees in certain circumstances. The Local Government and Communities Committee published its stage 1 report on the bill last week, and the Scottish Government's response is expected before the summer recess. Do members have any comments?

Rona Mackay: Mr Ewen is a constituent of mine and the suburb is in my constituency. He has flagged up that he feels that the SPICe briefing does not quite address the issues that the residents face. He cites the example that, if he wants to change the gravel on his drive or put up a small gate, he has to apply for planning permission. For tiny things like that, residents have to pay several hundred pounds in planning fees.

The Convener: Is it the case that, in other communities such changes are deemed to be permitted development, but that in a conservation area they are not?

Rona Mackay: Yes. I did not know that until the petition was lodged. The issue could be addressed in the Planning (Scotland) Bill. I think we should write to the Scottish Government and see what response it provides on that point.

The Convener: Does the petitioner have a view on how to protect conservation areas against people who might abuse the rules on permitted development?

Rona Mackay: I do not believe so. The area concerned is quite distinctive and I cannot imagine anyone abusing it, to be honest. I think that the petitioner just objects to people having to pay extra for minor things that they want to do to their houses.

The Convener: I presume that he also objects to the time that is taken to go through the process.

Rona Mackay: Yes.

The Convener: Rona Mackay has suggested that we write to the Scottish Government for its views on the petition. I wonder whether the Convention of Scottish Local Authorities will have a view on the matter. I presume that the situation

adds a bit more pressure on planning departments that are already under pressure.

Angus MacDonald (Falkirk East) (SNP): I have some sympathy with the petition, but I can see the arguments from both sides. I wonder where we should draw the line.

Rona Mackay: Yes. It is about preserving the look of the area.

Angus MacDonald: There is certainly an argument for waiving or reducing fees for minor work in conservation areas. The Government and local authorities should look at that.

The Convener: Perhaps we should also put the question to the planning authorities. That would capture those areas that are not managed by local authorities.

Rachael Hamilton: I note that listed buildings are included in the rules, as well as conservation areas. There is a balance to be struck. We need to preserve listed buildings and respect conservation areas, but there is also a need to maintain properties. The residents are obviously keen to maintain their properties on a regular basis and they clearly have pride in doing so, but the rules are holding them back. It is about the balance between respecting conservation areas and listed buildings and allowing people to maintain properties on a regular basis.

Brian Whittle: The tension seems to be around gaining permission and the cost of that. Something could be done on that. We have to look after listed buildings, but surely we can do something on the cost of minor alterations to properties.

The Convener: That makes perfect sense, but planning departments have been reduced. The argument has always been that they should be self-financing. However, the situation seems to be onerous for individuals in communities who happen to live in a conservation area. It would be interesting to know how that could be addressed.

Do members agree to the suggestions for action on the petition?

Members indicated agreement.

Angus MacDonald: Our paper states that section 21 of the Planning (Scotland) Bill, which has just passed stage 1, allows ministers to make regulations allowing planning authorities to reduce or waive fees in certain circumstances. The matter has been considered in the bill.

Rona Mackay: It may fall to local authorities to make the decision.

The Convener: The petition has raised some interesting issues.

Continued Petitions

Restraint and Seclusion in Schools (National Guidance) (PE1548)

10:15

The Convener: We move on to consideration of continued petitions. Petition PE1548 is from Beth Morrison.

At our previous consideration of the petition in March, we agreed to write to the Deputy First Minister and Cabinet Secretary for Education and Skills to invite him to respond to the petitioner's feedback on the approach that was set out in "Included, Engaged and Involved Part 2: A Positive Approach to Preventing and Managing School Exclusions", which is referred to as IEI2. The Deputy First Minister has stated that he considers that approach to be correct, but he repeats his commitment to the committee that if it is found that the guidance is not effective, he will report to the committee and consider whether the guidance requires to be put on a statutory footing. He sets out a range of measures that are in place to form an evidence base on which he can report back to the committee in April 2019.

The petitioner welcomes the Deputy First Minister's continued support and his commitment to report back to the committee, but she repeats her concerns that—anecdotally, and based on responses to freedom of information requests—restraint is still being used daily. The petitioner welcomes the formal investigation by the Children and Young People's Commissioner Scotland on that issue.

Members will recall that the petitioner has also previously contrasted the IEI2 guidance with the draft guidance that was being consulted on in England. Through correspondence between officials, the United Kingdom Government has indicated that its consultation closed in January, the responses have been analysed and the report is expected to be published soon.

Do members have any comments on what action to take?

Brian Whittle: With regard to the Deputy First Minister's comments on whether the guidance is effective, knowing whether that is the case will come down to how evidence is gathered and whether reporting on it is effective. We have heard quite a lot of evidence on the issue. I am interested to know when the UK Government's report will come out, so we could ask when it is due, which would inform what we do next.

The Convener: We could contact the UK Government on its consultation and how it will

develop its draft guidance. I suppose that the question for John Swinney is how he will establish whether the guidance has been effective or not. The petitioner is very positive about her experience and contact with the Government, and with John Swinney in particular, but she says that the reality is that the guidance is not being implemented daily.

Rona Mackay: That is the concern.

The Convener: The two things are not being brought together. Should we write to the cabinet secretary asking how he intends to establish whether the guidance is effective, and ask what he will do to make that happen?

Members indicated agreement.

Adult Cerebral Palsy Services (PE1577)

The Convener: PE1577 is from Rachael Wallace. At our previous consideration of the petition in March, we discussed what further action we wished to take. The options included deferring the petition until the findings of the consultation on the national action plan on neurological conditions are published, or closing the petition and inviting the petitioner to submit a new petition in one year if she remains dissatisfied with the conclusions of the action plan.

The committee agreed to ask the petitioner what her preference would be, and she has stated that she wishes the petition to be deferred until the outcome of the Scottish Government's work on neurological healthcare services is known. She expressed concern that, if the petition were to be closed, momentum would be lost on the issues that are raised in her petition.

Do members have views on what we should do?

Rona Mackay: We should respect the petitioner's wish to defer the petition, for the reasons that have been given. The issue is so important that it would not be right to close it, only for her to have to bring it back. I would prefer that we defer the petition.

The Convener: At our previous consideration, there were arguments for both cases, so it felt right to hear the petitioner's view. Deferring it would ensure that we can return to the issue once the findings of the national consultation on the national action plan on neurological conditions are published. Do members agree?

Members indicated agreement.

The Convener: We can thank the petitioner for responding to our request for advice from her.

In Care Survivors Service (PE1596)

The Convener: PE1596 is from Paul Anderson, James McDermott and Chris Daly.

When we last considered the petition in March, we agreed to seek the views of members of the cross-party group on adult survivors of childhood sexual abuse. We have since received submissions from Health in Mind and Wellbeing Scotland.

The clerk's note summarises the differing views in the submissions. It notes that Health in Mind is part of the future pathways alliance, which is tasked with oversight of the operation of the future pathways fund. Health in Mind sees future pathways as a

"gateway to a wide range of flexible, person-centred support and services, which complement the more limited choices available through conventional funding".

It states that cognitive behavioural therapy treatments that are used by NHS providers follow

"a biopsychosocial model, not a medical model".

Wellbeing Scotland, which was formerly called Open Secret, provides the in care survivors service. Although it acknowledges the additional support that is offered by the future pathways fund, it is concerned that it is in

"a subservient power dynamic with Future Pathways".

Wellbeing Scotland adds that it considers that the model of support, whether that is biopsychosocial or medical,

"has caused further confusion and concern".

It suggests that many survivors do not identify with mental health services and adds that anxiety has increased among some survivors because they feel that the future pathways fund is working towards a model of time-limited support and that

"the promise of lifelong support ... has been withdrawn".

I declare an interest as a member of the cross-party group on adult survivors of childhood sexual abuse. I have met the future pathways alliance, the petitioner and Wellbeing Scotland. I had a very productive meeting with the future pathways alliance and was interested to see how that model works. There is a backlog—there is an eight or nine month waiting list. The issue is that if a person who is not registered with future pathways cannot access the services, they are just waiting, even if the service is provided by Wellbeing Scotland. That is a concern.

When I met one of the petitioners and Wellbeing Scotland, the questions that they raised were about the process of future pathways. For example, there was a suggestion that a survivor would have to have a consultation with a clinical psychologist. Many survivors do not want to do

that because of their previous experience and because they do not want to have a clinical diagnosis of something that has happened to them, because that could have an impact on their lives. There is a fear that people might not go to the future pathways alliance because of that.

The petitioners and Wellbeing Scotland are also concerned about whether—a group-work model is used—individual counselling over a longer period will be available, and think that that should not be time limited. When I met the future pathways alliance, it said that support does not have to be time limited.

We also discussed the issue briefly at a meeting of the cross-party group, at which it was not possible to reach a unified view. However, there is no doubt that everyone wants to ensure that people get the support that they require. The argument is really about whether organisations should—as other support services do; for example, Women's Aid—get core funding and be accountable for how they spend it, or be given money by the people whom they treat. Some folk, including Anne Macdonald, who initially petitioned the committee on a strategy for survivors, feel that the brokerage model is not right for people who have experienced that kind of trauma.

I am struck that the debate is now not as much about the specific issue in the petition on funding of Open Secret, as it is about whether we are doing the right thing in terms of how we support survivors. It is a very interesting issue, given the pivotal role of the Public Petitions Committee in getting the Scottish Executive—as it was at the time—to produce a strategy.

Would it be useful to gather evidence on whether the models that are being developed are the ones that people feel the most comfortable with? It is such a live issue because of the current inquiry and because adults are speaking out. We need to ensure that there is support for them. I am sure that we all, including the Scottish Government, agree about that.

Angus MacDonald: There is, of course, the additional issue, which Wellbeing Scotland has highlighted, of the nine-month waiting list and the requirement that survivors must be registered within three months. Clearly, there is disparity and there is a funding issue for Wellbeing Scotland, if it is funded through a brokerage model. The submission from Wellbeing Scotland certainly makes for interesting reading. For someone looking in, at first glance it seems that the brokerage model is working; however, it is not working for Wellbeing Scotland, to the extent that the future pathways alliance claims.

I declare that I had dealings with Open Secret before it became Wellbeing Scotland, so I am fully

aware of the issues that it has been facing. Of particular concern to me is the statement from Wellbeing Scotland that the promised lifelong support does not exist. I remember that that was promised way back at the start, when the new model was being considered. It is extremely concerning if the alliance has gone back on that.

There is a strong argument for asking the future pathways alliance to give us evidence face to face, so that we can get to the bottom of the matter. The issue needs to be addressed once and for all; it has been dragging on far too long.

Rona Mackay: It is exactly as the convener said: we are now considering whether the model and the framework are correct. It is a big issue, so we need to hear directly from the organisations.

The Convener: It would be fair to say that the Scottish Government has put quite significant funding into the future pathways fund. The extent to which that is channelled towards support is, in itself, interesting.

I made an analogy when I met with Wellbeing Scotland. I said that you would not fund an accident and emergency department on the basis of how many broken legs came in; you would provide the service, and if nobody came in with a broken leg, so be it. I am concerned that the service in question is being funded differently, and I am interested in the argument for why that is the case.

As I mentioned, the original petitioner, Anne Macdonald, said to me that she did not feel that that model was in line with the original view of how to support people. I am not saying that the cross-party group would have taken a completely unified view on that, and I would not want to represent it in that way.

Brian Whittle: I do not know whether we will go into this kind of detail, but mental health has taken on a much more prominent role in Parliament during the short time that I have been here. I am interested to see how that model fits into our mental health approach, which is still evolving. I am keen to hear evidence on how that model aligns itself with the current mental health strategy.

The Convener: Certainly, the desire is to have a trauma-informed approach. Survivors often say, "Actually, I am okay; what has caused my problem is the trauma that I have gone through". That touches on the argument about whether it is a medical model or a social model.

It has been suggested, and I think that we all agree, that we would look for a session with the future pathways alliance, Wellbeing Scotland and petitioners—if they feel able—which would afford them the opportunity to hear that evidence and

respond to us. We might want to have another session, after that.

It is also the case that there is among survivors generally a sense that much of the abuse that they experienced was in their own homes and communities rather than in care. That raises the broader point that how we support people who have lived through trauma is important.

Do members agree to give the clerks authority to work out how best to run such meetings?

Members indicated agreement.

The Convener: We thank all those who responded with submissions. I want to thank, in particular, the petitioner, Paul Anderson, for meeting me.

Legal Aid (PE1645)

The Convener: PE1645 is by James Ward. After our consideration of the petition in March, we agreed to write to the Scottish Government to invite it to set out how it would respond to the recommendations of "Rethinking Legal Aid: An Independent Strategic Review", which was published on 28 February.

In its response of 11 April, the Scottish Government indicates that it is giving serious consideration to the recommendations, and that the Minister for Community Safety and Legal Affairs will meet key stakeholders in the light of those recommendations. Do members have any comments?

10:30

Angus MacDonald: We should write to the Minister for Community Safety and Legal Affairs to seek an update on the meetings that she has had, or is still to have, with stakeholders, which include the Law Society of Scotland, the Faculty of Advocates and the Scottish Legal Aid Board.

Brian Whittle: Are we far enough down the line to be able to take evidence from any of those bodies?

The Convener: My sense is that the Government is wrestling with the issue with stakeholders; we cannot have a parallel inquiry before we know what the Government is doing. If we can get an update, the petitioner would be afforded an opportunity to provide a further written submission. Do members agree to take that approach?

Members indicated agreement.

Literacy Standards (Schools) (PE1668)

The Convener: PE1668 is by Anne Glennie on improving literacy standards in schools through

research-informed reading instruction. Since our last consideration of the petition we have received submissions from the Deputy First Minister and Cabinet Secretary for Education and Skills, Dr Sarah McGeown and the petitioner. There are points of agreement in the submissions. For example, there is an acknowledgement of the evidence base to support use of systematic synthetic phonics as part of a broader package of early reading instruction, and that there are some gaps in the knowledge and understanding of some teachers—both new and existing—of the latest and highest-quality research in early reading instruction.

However, the petitioner and Dr Sarah McGeown express concerns about the teaching and learning toolkit, and about the efficacy of the self-evaluation framework, which was referred to by the Deputy First Minister. The petitioner identifies concerns about the ability of initial teacher training departments to evaluate their own work, and queries whether the self-evaluation framework working group includes

“specifically someone knowledgeable in current reading research and best practices for reading instruction”.

Do members have any comments?

Rona Mackay: We need to wait for the framework to be published; the draft framework should be available next month. We will be able to move forward depending on what it contains and whether it addresses the concerns that are raised in the petition. That is my recommendation.

The Convener: I am struck by the fact that the positions in the submissions are closer to each other than had initially been suggested.

Rona Mackay: Yes. I thought that, too.

The Convener: It was useful to hear about research-informed reading instruction in its broader context. It is not so much about whether it is used or not used, or whether it is useful or not useful; the question is therefore about the extent to which research-informed reading instruction is part of teachers’ personal professional development.

Do we agree to wait for publication of the framework and to get the petitioner’s view on whether it addresses their concerns? Do we also agree to ask the Deputy First Minister to respond to the concerns that have been expressed about membership of the working group, and to try to get a timetable for publication of the draft framework?

Members *indicated agreement.*

The Convener: Before we move into private session, I welcome Rachael Hamilton to the committee and thank Michelle Ballantyne for her work with us.

I also note that, sadly, Catherine Fergusson, who has been the clerk to the committee for the past three years, is moving on—and probably up. I, personally, thank her for all the support that she has given to me since I became convener of the committee. She is a brilliant professional and is very organised. She is also very good at dealing with petitioners whose issues are often personal and sensitive, and matter deeply to them. That is a challenge for all our clerking team. The whole team plays a very important role in being as welcoming, considerate and thoughtful as possible to petitioners. I thank you all, but I know that Catherine has led by example. I wish her all the very best: she has visiting rights to come back.

10:34

Meeting continued in private until 10:43.

This is the final edition of the *Official Report* of this meeting. It is part of the Scottish Parliament *Official Report* archive and has been sent for legal deposit.

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