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Scottish Parliament

Tuesday 24 May 2022

[The Presiding Officer opened the meeting at 14:00]

Time for Reflection

The Presiding Officer (Alison Johnstone):

The first item of business this afternoon is time for reflection. Our time for reflection leader today is Lorraine McMahon, head of community outreach for Scotland, England and Wales with Aid to the Church in Need.

Lorraine McMahon (Aid to the Church in Need): I am honoured to be invited to address our Scottish Parliament today—thank you.

Aid to the Church in Need's mission is to support Christians where they are persecuted or in pastoral need. My teams in the United Kingdom work with schools, parishes and volunteers to help raise awareness and funds for communities throughout the world where it can be life threatening to have a faith.

As individuals, we fight hardest for the causes that we witness, such as family members suffering from cancer. I became such a witness in 2016 and in 2018. I visited countries in the middle east to interview victims of Daesh, more commonly known as ISIS, and there I saw for myself the devastation, trauma and poverty suffered by Christians, Yazidis and other minority faith groups. ACN was there to give a voice to the voiceless, and to listen to the groups that felt invisible and alone in their persecution. It is important for all of us to tell their stories, but first we need to know their stories.

In Lebanon, I met a young Syrian family who had witnessed their 11-year-old neighbour being butchered. His remains were placed in a bin bag and offered to his parents for \$20,000. Why? Because he refused to join the ranks of Daesh. I witnessed Yazidis sleeping by the roadside in tents, and Christians living five families to one room and in tents and containers.

In Iraq, I entered a town called Teleskof on the Nineveh Plains. I experienced the eeriness of a deserted town, where people had to abandon their homes and belongings when Daesh invaded: sewing machines, chairs and tables broken in the streets, buildings destroyed, and churches and graves desecrated. No one was present except the Peshmerga, guarding the town against another invasion. The evil there felt like a physical entity. With the battle not yet ended, I stood on the front line and spoke with soldiers about how isolated

they felt from their families, and about their pride in defending their border and their frustration at not stopping Daesh soon enough.

I came home to our beautiful, peaceful country determined to bear witness to my time there, but I was not prepared for the emotion and attachment that I felt towards the people whom I had met. I realised that every person's words and the way that they made me feel will stay with me for life.

Emotion is what makes us human and, when displayed effectively, it can lead to audiences taking notice and, often, to engagement and understanding. I am sure that all of you in our Scottish Parliament can relate to that as you do what you feel is best for our country.

ACN has been able to support refugees and displaced people around the world through helping to rebuild homes and churches and by providing shelter, clothing and food to those in need. We live our lives and do our work through our faith.

Ukraine is another country that we have worked in since the 1980s, and we continue to work in it today during its present hardships. Our aim is always to support the community and keep Christianity alive in our world.

In each country that I visit, I am humbled by the strength of people's faith. People are astounded that, through ACN and other charities, the Scottish people know of their plight. They always ask for you to pray for them, and they always promise to pray for you.

A Jewish writer and survivor of Auschwitz, Elie Wiesel, used the phrase:

"The opposite of love is not hate—it is indifference."

He added that we should awaken our conscience, because if we remain indifferent, we become part of the evil, but through love and prayer, we can fight all that is evil.

Thank you for listening.

Topical Question Time

14:06

The Presiding Officer (Alison Johnstone):

The next item of business is topical question time. In order to get in as many members as possible, I would be grateful for short and succinct questions and responses.

ScotRail (Revised Timetable)

1. Tess White (North East Scotland) (Con):

To ask the Scottish Government what discussions it has had with the sports and events sectors regarding alternative transport arrangements in light of the revised ScotRail train timetable. (S6T-00730)

The Minister for Transport (Jenny Gilruth):

Discussions with sectors across a range of portfolios, including sport and events, have been taking place in relation to the impact of ScotRail's temporary timetable and alternative transport. For example, culture officials joined the event industry advisory group's meeting on 20 May, at which I understand the group discussed the impacts on the events sector. The EIAG's members include those from cultural, sporting and business events.

Although we want the temporary timetable to be in place for as short a period as possible, engagement is on-going, as required, with those organising individual events. Many attendees will already have plans to make use of Scotland's extensive bus services on key routes.

Tess White: The world cup qualifier on 1 June is one of the biggest games in 20 years, with more than 50,000 people flocking to Hampden. Considering the last-minute changes on the day that 700 services were axed, can the minister give fans the assurances that they need that extra capacity will be provided to get them home from Hampden—many will be going to northern cities—and that that capacity will not fall foul of more unplanned cancellations?

Jenny Gilruth: I thank the member for her question. First of all, it is important to remember why the dispute is happening. ScotRail has taken the decision to put in place a temporary timetable, which has been made necessary by the decision of train drivers, as part of a pay dispute, not to take up the option of Sunday and rest-day working. That decision is in train drivers' gift; rest-day working is entirely voluntary. That has been a feature of British railways for many years; it entirely predates nationalisation last month.

However, it is true to say that Scotland, like many other parts of Great Britain's rail network, relies on rest-day working to allow the network to

function. Over the past few weeks, the network has, of course, not been functioning. We have had mass cancellations. For example, on Sunday—the last day of the old timetable—there were more than 300 cancellations.

I understand the concerns of supporters who are planning to attend the Scotland match against Ukraine on 1 June, which is just over a week away. Of course, that is Scotland's most important game in a long time, and we want to ensure that supporters can get both to and from the match on public transport, including by using, where possible, our bus services across Scotland. I note that, before the reduced timetable was introduced, the last train from Glasgow to Aberdeen would have been at 21:40, so it still would not have returned people home to Aberdeen after the match.

ScotRail is aware of the various large cultural and sporting events across the summer and it is currently reflecting on how it will address the impact that the reduced timetable might have on those events.

Last Friday, I asked ScotRail for an update specifically on the Scotland-Ukraine match, and it has assured me that plans are in place and that it will publicise details of those in due course, as it does with all major events. I will meet ScotRail tomorrow to seek an update on that work, and more broadly on the negotiations, as it is due to meet with the Associated Society of Locomotive Engineers and Firemen this afternoon.

Tess White: The night-time economy and the cultural sector are already on their knees as a result of the pandemic. The Night Time Industries Association has described the cuts to rail services as "devastating" and has said that

"Scotland's economic recovery and the future of many thousands of small businesses and jobs"

are at risk as a result of the rail service being cut to the bone.

Last week, Douglas Ross asked the First Minister what compensation will be made available to businesses that are affected by the cuts. The First Minister did not answer. Can the minister provide a response now?

Jenny Gilruth: Ministers are of course very aware of the impact of the pandemic on the night-time sector and the wider hospitality sector, and on Scotland's cultural sector. As a former culture minister, I know just how challenging the pandemic and the restrictions have been for our theatres and cultural venues. Undoubtedly, it has been the most challenging time for the industry in living memory. We are also of course aware of the emerging pressures from the cost of living crisis, which are due to the cost of doing business and to

the consequences of reduced household incomes for things such as leisure spending.

ScotRail will keep the timetable under review. With regards to the member's question, it is absolutely essential that we now get a resolution to allow for the restoration of the timetable so that services can go back to normal for passengers and staff alike. I will seek an urgent update from ScotRail on the meeting with ASLEF that is taking place later this afternoon.

Jackie Dunbar (Aberdeen Donside) (SNP): ScotRail's temporary revised timetable is one facet of industrial action that is taking place throughout the United Kingdom. However, although the Scottish Government wants all parties to get round the table and negotiate a fair and affordable pay deal, the Tories seek to use the dispute to illegalise industrial action. Therefore, what discussions has the transport minister had with Grant Shapps on his proposal to make industrial action illegal unless a minimum number of rail employees are working?

The Presiding Officer: Ms Dunbar, I draw your attention to standing order 13.7.8, which tells you—well, it tells all members—that

“A member may ask a supplementary question only on the same subject matter as the original question”.

That being the case, we will move on.

Neil Bibby (West Scotland) (Lab): The current ScotRail crisis is causing misery for many people every day, but especially for those who do not work regular hours. One of my constituents is a national health service nurse who finishes her 12-hour hospital shift at 7.45 pm. Her last train home is now at 8.04 pm, but she will miss it because she has less than 20 minutes to get changed and jog down to the station. There is no bus service and no rail replacement bus. How does the minister suggest that my constituent, and countless others like her, get home?

Jenny Gilruth: This is a really challenging time for shift workers and many people travelling across the country. That was alluded to in the original question, which relates to sporting events and the events industry more broadly.

I am more than happy to address the specifics of Mr Bibby's question about his constituent. If he would like to write to me, I will raise the matter directly with ScotRail.

We absolutely do not want the current scenario to go on for any longer than it has already gone on for. The new timetable started just yesterday, and we saw a reduction of cancellations on the network. As I mentioned in my response to the first question, on Sunday, we had more than 300 cancellations, which was not sustainable, so we had to get to a better scenario for the delivery of

services. ScotRail has put in place a temporary timetable as a result of drivers refusing to work on their rest days. I am absolutely committed to working with ScotRail and ASLEF to get a resolution for Mr Bibby's constituent and for the thousands of other passengers who have been inconvenienced by the dispute.

Mark Ruskell (Mid Scotland and Fife) (Green): It is clear that unsustainable and unfair working practices have been allowed to build up across the rail industry over many years. Does the minister agree that that is why having union and passenger voices on the ScotRail board will be so important in future? While passengers wait for the dispute to be resolved, can the minister ensure that no communities—communities such as Dunblane—are disproportionately impacted by the emergency timetable?

Jenny Gilruth: The member will be aware that there will be representation via union and passenger roles on the new ScotRail board, which is certainly welcome news. I know that it was welcomed by the trade unions with whose representatives I spent a lot of time following my appointment back in January, discussing their views on nationalisation and what future they saw for Scotland's rail network. I want them to be part of that vision, through, for example, developing our plans on women's safety. The unions have raised with me their concerns about staff safety, and I am keen to work with them on that matter.

The specific issue of disproportionality that Mr Ruskell mentioned in his question has been raised with me, primarily in relation to rurality. I have raised it with ScotRail and I will be happy to provide Mr Ruskell with an update on the restoration of a number of services, which I hope will be coming in matter of days.

Willie Rennie (North East Fife) (LD): The minister has to accept that this has been an utter failure of industrial relations on the part of the Government.

Organisers of July's 150th Open golf championship in St Andrews are banking on more rail services being available for the almost 300,000 people who will descend on the town for that world showcase. Does the minister not understand the humiliation that will be imposed on Scotland if she does not get the rail strike sorted by then? If it is not, what plans does she have for ensuring that the roads of Fife will not be gridlocked by those 300,000 people?

Jenny Gilruth: Many moons ago, when I was a teenager growing up in St Andrews, I worked at the Open, so I very much recognise its importance to the local economy of St Andrews and the surrounding Fife villages.

I am advised that a meeting of the silver command group for the Open, on which the Scottish Government's major events team is represented, is taking place today. It is expected that the traffic and transport group, on which Transport Scotland is represented, will be formally tasked with investigating the impact further and looking at the contingencies that Mr Rennie spoke of. I hope that that will reassure him that plans are being put in place. However, I point out that the Open is quite a wee bit away yet. I hope that we will be able to reach a resolution with the trade unions before then, and I am committed to working with them to deliver that in conjunction with ScotRail.

Jeremy Balfour (Lothian) (Con): The minister will be aware that the Edinburgh international festival is just around the corner. At that time, many people travel into the city from other parts of Scotland to go to the theatre or to shows. Some people have already contacted me to say that they have bought tickets but will no longer be able to attend events because the trains back to where they will be staying will no longer be running. Will the Scottish Government offer compensation to people who have already bought tickets but who will no longer be able to get home safely because of the rail strike?

Jenny Gilruth: The premise of Mr Balfour's question is that no tickets assumes no festival. I do not accept that.

Ministers are engaging with cultural stakeholders on a range of matters. That engagement includes Angus Robertson's meeting with the director of Festivals Edinburgh just last week, at which I am advised the issue was not raised. As I have mentioned, as a Fifer myself, I am well aware that people travel into the capital city to attend the festival. As I outlined in my response to Mr Rennie, I hope that we will have reached a resolution far in advance of that date. Officials are also engaging regularly with culture and events stakeholders to understand the difficulties that they face in their respective sectors.

Again, I appeal to the trade unions and ScotRail to work together. I am delighted that they are meeting this afternoon. I look forward to sharing with members an update on the resolution from that meeting—later today, if I am able to do so—on the progress that we might be able to identify as we move forward, including, as I mentioned to Mr Ruskell, the reinstatement of a number of services.

Monkeypox Virus

2. Paul O'Kane (West Scotland) (Lab): To ask the Scottish Government, in light of reports of an outbreak of the monkeypox virus in the United

Kingdom, including a case in Scotland, what action it is taking to monitor transmission of the virus in Scotland and support people affected. (S6T-00732)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): As the member would rightly expect, I am being regularly briefed by officials and clinicians on the monkeypox outbreak. Public Health Scotland is working with the United Kingdom Health Security Agency, Public Health Wales and Northern Ireland's Public Health Agency to monitor and respond to potential and confirmed cases of monkeypox in the UK. Work is progressing with national health service boards and wider partners in Scotland and the UK to investigate the source of the infection. Close contacts are being identified and provided with health information and advice. That may include the offer of vaccination.

There are well-established and robust infection prevention and control procedures for dealing with such cases of infectious disease, and they will continue to be followed strictly. The Scottish Government continues to work closely with PHS as we monitor the situation.

Paul O'Kane: I highlight the comments of Dr Nick Phin, who is the director of public health science and medical director of Public Health Scotland, who has said that

"The overall risk to the general public is low."

He has also said that "early identification and vaccination" can prevent close contacts from "going on to develop the condition."

Given the interest in tracing people who are travelling within the UK, and given the confirmed case in Scotland, will the cabinet secretary outline how any required contact tracing will be carried out and what role can be played by test and protect services, which were developed during the Covid-19 pandemic?

Humza Yousaf: I thank Paul O'Kane for reiterating at the beginning of his question the important advice of Nick Phin and Public Health Scotland, and the assurance that the overall risk is low for the general public.

There are well-established procedures in place. As has been widely publicised, there is one confirmed case of monkeypox in Scotland, and appropriate contact tracing has been done for that case. For the cases in England, too, contact tracing is well under way. The contact tracing processes and procedures for infectious diseases pre-date Covid. I give Paul O'Kane an absolute assurance that they are in place.

I ask people to familiarise themselves with what to do if they have any of the symptoms that are

associated with monkeypox. There are good well-established procedures in place, and there is a good four-nations approach being taken in our response to the virus. I am having a meeting later today with the other health ministers of the UK to discuss issues around vaccinations and antiviral treatments.

Paul O’Kane: The World Health Organization has highlighted the importance of tackling misinformation about the virus. Monkeypox has previously been most common in Africa, and recent UK cases have been more common among people who identify as gay or bisexual, and among men who have sex with men. However, there is no link to race or sexual orientation. I am sure that, like me, the cabinet secretary has been appalled by racist and homophobic assertions in the press and online regarding the virus.

Dr Derek Sloan, who is senior clinical lecturer in the school of medicine at the University of St Andrews and consultant in infectious diseases at NHS Fife, has written extremely well in *The Courier* today, busting myths about monkeypox and trying to ensure that

“health anxiety does not—even accidentally—fuel racist or homophobic discrimination.”

Does the cabinet secretary agree that we must do all that we can to tackle misinformation and discrimination? Will he outline how the Government plans to do that?

Humza Yousaf: I strongly associate myself with all of Paul O’Kane’s remarks. I have not seen the piece in *The Courier*, but I will ensure that I do so after I leave the chamber because, like him, I have been appalled by the disgusting and bigoted reporting on monkeypox that I have seen.

It is important that we work hard to get the appropriate public health advice out to the communities that might be more affected by the current outbreak, but we must do that in a way that does not stigmatise those communities and does not allow the issue to be weaponised for other purposes.

To give Paul O’Kane and other members some assurance, I note that I have tasked my officials to work with a number of organisations and stakeholders in the LGBTQI community. Some good material, which I strongly recommend to everyone, has already been put out by the likes of the Terrence Higgins Trust.

Emma Harper (South Scotland) (SNP): It is important to highlight that anyone who has a confirmed case of monkeypox or who has been in close contact with a confirmed case should avoid children and people who are pregnant or immunosuppressed.

Will the cabinet secretary reiterate how that information can be passed on to members of the public?

Humza Yousaf: Public Health Scotland is putting out regular updates. It provided an update yesterday that gives really good details on symptoms that are associated with monkeypox and which people should look out for. If anybody is concerned that they might have such symptoms, they should, of course, call their general practitioner or, if the call is out of hours, call 111. More advice will be put out.

We are in the early stages of the situation, and I fully expect more cases of monkeypox to be identified. However, I return to what I said to Paul O’Kane: there are very robust infection prevention and control procedures in place to deal with such cases.

Gillian Mackay (Central Scotland) (Green): Despite the relatively self-limiting and mild nature of monkeypox, some people might be more susceptible and might require hospital care, if they catch it. How is the Government ensuring that all health and social care workers are protected from the virus and have information about how to keep themselves and their patients safe from on-going transmission?

Humza Yousaf: Gillian Mackay raises a very important point that is part of my discussions with clinicians. To give her some assurance, I say that those conversations with health and care staff are important—they are vital, in fact—especially for health and social care staff who work in high-consequence infectious disease units and deal with people who have infectious diseases. That work is under way.

As Gillian Mackay knows, we have limited amounts of vaccine, although there will be discussion of further procurement of vaccine at the meeting that I will attend later today. Antiviral treatments could also be helpful in keeping healthcare workers safe, so that they, in turn, can treat anyone who has the virus.

The Presiding Officer: That concludes topical questions.

European Charter of Local Self-Government (Incorporation) (Scotland) Bill and United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill

The Presiding Officer (Alison Johnstone):

The next item of business is a statement by John Swinney on next steps with the European Charter of Local Self-Government (Incorporation) (Scotland) Bill and the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill. The Deputy First Minister will take questions at the end of his statement and so there should be no interventions or interruptions.

14:26

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney):

On 6 October, the Supreme Court gave its judgment on the European Charter of Local Self-Government (Incorporation) (Scotland) Bill and the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill. When I updated Parliament that day, I explained that comprehending the implications of the judgment would require careful consideration. I also committed to keeping Parliament updated as and when I could.

Since the Supreme Court's judgment, I have made clear that I remain committed to incorporation of the UNCRC to the fullest extent possible and that, to allow incorporation of the UNCRC as soon as is practicable, our preference is to address the Supreme Court's judgment by returning the UNCRC bill to Parliament via the reconsideration stage.

I reassured Parliament that, although the European Charter of Local Self-Government Bill was a member's bill, the Scottish Government remained committed to supporting the bill and would work closely with Mark Ruskell, as the designated member in charge, to support him in taking forward the next steps.

I have also been open about my attempts, since receiving the judgment, to engage with the Secretary of State for Scotland to explore potential routes to increasing the effectiveness of incorporation of the UNCRC. Regrettably, the secretary of state has made it clear that he is unwilling to address the issues with the devolution settlement that have impacted on our ability to do that.

Members will be aware that the Supreme Court judgement had implications regarding the

application of the UNCRC to United Kingdom legislation that predates devolution but that is now within the legislative competence of the Scottish Parliament, such the Education (Scotland) Act 1980. Although that legislation relates to our own children, in our own schools and our own country, it is Westminster legislation, so we cannot, following the Supreme Court judgment, apply the UNCRC to it. That is the ludicrous constitutional position that Scotland finds itself in.

Our approach to the UK Government also included steps that could be taken to ensure that all legislation on devolved matters is brought efficiently within the scope of the UNCRC bill, without altering the devolution settlement.

The secretary of state has now made it clear that he is unwilling to explore even standard Scotland Act 1998 order options, which are within the current devolution settlement. Members will form their own views, but I cannot see how that is consistent with the secretary of state's comments in October, when he committed

"to engage constructively with the Scottish Government to ensure relevant issues that may arise are addressed at the earliest possible stage."—[*Official Report, House of Commons*, 20 October 2021; Vol 701, c 48WS.]

The UK Government has refused to countenance expanding the devolution settlement to allow for full incorporation of the UNCRC into Scots law. It has also refused to take steps to support incorporation of the UNCRC into areas that are wholly devolved. At every stage of the process, it has acted as a barrier to this Parliament legislating to protect the rights of children in Scotland.

Having exhausted those pragmatic options with the UK Government, I am now in a position to update Parliament on what we consider is necessary to fix the bills. I am grateful to the Presiding Officer and the Parliamentary Bureau for making time for this statement today.

When the UNCRC bill was unanimously passed in March 2021, Parliament came together to make a significant statement of intent about who we are and what we collectively seek to achieve as parliamentarians for the people of Scotland. That was a landmark moment in the Scottish Parliament's history.

The intent behind the bill was to deliver a proactive culture of everyday accountability for children's rights across public services in Scotland. As passed, the bill would require all of Scotland's public authorities to take proactive steps to ensure the protection of children's rights in their service delivery, and it would make it unlawful for public authorities to act incompatibly with the UNCRC requirements as set out in the bill. Children, young people and their

representatives would have a new ability to use the courts to enforce their rights.

On 12 April, the United Kingdom Government referred four provisions of the bill to the Supreme Court. They were section 6, which makes it unlawful for a public authority to act in a way that is incompatible with the UNCRC requirements; section 19, which creates an obligation to interpret legislation compatibly with the UNCRC requirements in so far as it is possible to do so; the section 20 remedial power to allow a court to strike down certain legislation that is found to be incompatible with the UNCRC requirements; and section 21, which allows a court to declare certain legislation to be incompatible with the UNCRC requirements. The Supreme Court's judgment was that aspects of each of those sections were outside the legislative competence of the Scottish Parliament.

The referral also covered the European Charter of Local Self-Government (Incorporation) (Scotland) Bill. That bill aimed to strengthen the status and standing of local government by incorporating the European Charter of Local Self-Government into Scots law. Starting as a member's bill, it, too, was passed unanimously by the Scottish Parliament and was supported by the Scottish Government and by local government through the Convention of Scottish Local Authorities.

The bill was intended to develop and further strengthen the relationship between the Scottish Government and local government in Scotland, so ensuring that priorities and policies are developed and delivered in partnership. The Supreme Court's judgment was that section 4, which creates an obligation to interpret legislation compatibly with the requirements of the charter in so far as it is possible to do so, and section 5, which gives the courts the power to declare legislation to be incompatible with the charter, were outside the competence of the Scottish Parliament for the same reasons that applied to the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill.

In my statement on 6 October, I expressed my disappointment that the court's judgment could potentially limit the aspirations that were agreed to by this Parliament. The judgment made plain that we are constitutionally prohibited from enacting legislation that this Parliament unanimously decided was right for Scotland. We have, however, fully respected and carefully considered the implications of the judgment. We will now begin engagement with key stakeholders on what we believe are necessary changes to the bill at reconsideration stage to address the judgment, and we will support Mark Ruskell in doing the

same for the European Charter of Local Self-Government (Incorporation) (Scotland) Bill.

To address the judgment in relation to section 6 of the UNCRC bill, it is clear that we need to expressly limit the compatibility duty to devolved functions and devolved bodies. We also need to include in the bill a provision that is equivalent to section 6(2) of the Human Rights Act 1998 so that public authorities cannot be found to have acted incompatibly where the underlying primary legislation cannot be read in a compatible way.

To address the judgment on the judicial remedies in both bills, we need to remove UK acts from the application of the interpretative obligation, the strike-down power and the incompatibility declarator power.

This is a disappointing dilution of the effect of the bills. The Supreme Court judgment means that this Parliament's power to give the courts remedial powers is limited by the mere fact that existing statutory provision happens to be in an act of the Westminster Parliament, even when they concern matters on which the Scottish Parliament could and frequently does legislate.

To be clear, the judgment does not prevent the Scottish Parliament from amending or repealing legislation in devolved areas in an act of either our Parliament or the UK Parliament. Where we need to take action to ensure that legislation in devolved areas is UNCRC compliant, that power will be available to us. As a Parliament that has, across all political parties, demonstrated its commitment to the UNCRC bill, I hope and expect that we will exercise that power whenever we need to. However, a simpler and faster route to remedy would have been for the courts to have access to the judicial remedies for all legislation in devolved areas, including UK acts.

There will now be three weeks of engagement with key stakeholders, including with children and young people and COSLA. For the UNCRC bill, the purpose of that engagement will be to ensure that those who have lobbied passionately for it understand the changes that are being made and why. It will also help us to understand any concerns that need to be aired during reconsideration stage.

On the European Charter of Local Self-Government (Incorporation) (Scotland) Bill, we will engage extensively with Mark Ruskell to explain the changes that we think are necessary and support him in taking his bill forward.

Following that engagement, I will update the relevant parliamentary committees before amendments are lodged. We will liaise with the parliamentary authorities about the timescale for reconsideration stage, recognising that we need to

make sufficient time to engage with the Parliament on the substance of our proposals.

We will also engage with the United Kingdom Government, given the UK law officers' power under the Scotland Act 1998 to refer a reconsidered bill to the Supreme Court.

It is regrettable that the UNCRC bill and the European Charter of Local Self-Government (Incorporation) (Scotland) Bill have been delayed and will not become law in the form that our Parliament agreed. I reassure the Parliament that, although the UNCRC bill has been delayed, work in relation to the implementation of the UNCRC has continued at pace. That includes building the capacity for public authorities to take a child's rights-based approach to the delivery of services, and ensuring that children, young people and their families are aware of and understand the United Nations Convention on the Rights of the Child.

I am delighted that we can move forward with legislation to build a Scotland that values the unique role of local government and in which a respect for human rights anchors our society and the institutions that govern and deliver public services for the people of Scotland—especially the young people of Scotland.

The Presiding Officer: The Deputy First Minister will now take questions on the issues that were raised in his statement. I intend to allow around 20 minutes for that, after which we will move on to the next item of business. I would be grateful if members who wished to ask a question were to press their request-to-speak buttons.

Miles Briggs (Lothian) (Con): I thank the Deputy First Minister for advance sight of his statement.

Following the ruling by the Supreme Court, both bills have been left in limbo for months. As the Deputy First Minister concluded, I hope that we will now see movement on the legislation and on Parliament's ability to enact it. The UK Government and the Office of the Advocate General for Scotland have reached out to the Deputy First Minister on a number of occasions to try to speed up the process, and they stand ready to engage and to help the Scottish Government in taking forward workable amendments to bring the bill within the legislative competence of our Parliament.

Previously, the Deputy First Minister stated that this is urgent, and I hope, genuinely, that we will see how the Parliament can be fully included in developing the amendments that are needed to make the bills legally competent. I therefore ask the Deputy First Minister about something that was not included in his statement: when will ministers set out a timetable for the bill to be

brought back to the Parliament and for that committee process to start?

The European Charter for Local Self-Government seeks to protect the powers of local government. That is something on which I think we all agree and that, when we passed the bill, we supported. What assessment will ministers now make of the impact of the Scottish Government's proposed national care service and the removal of powers from local government, when the bill on that is passed?

John Swinney: I am grateful to Miles Briggs for his points. The idea that the United Kingdom Government and the Office of the Advocate General for Scotland "reached out" is an interesting observation on my statement. I made it clear that there was complete inflexibility from the United Kingdom Government on those questions, and no willingness to use the existing Scotland Act orders arrangements in order to expedite those issues.

I thought that it was reasonable for me to approach the United Kingdom Government, given that the Parliament had unanimously passed the legislation. I did not think that it was in my gift, essentially, to undermine the legislation that the Parliament had passed. I therefore sought an understanding from the UK Government, to get it to a position of respecting the will of this Parliament, and it has refused to do so. If, as Miles Briggs describes it, the conduct of the UK Government over the past few months has been a reaching out, I would hate to see what outright hostility looks like.

On the question of the involvement of the Parliament, this is the first bill that will have had to go through a reconsideration stage, so we are in new territory. It is not in the gift of the Government to specify to the Parliament what a reconsideration stage looks like, so we will engage with the parliamentary authorities, through the Parliamentary Bureau and the committees, to make sure that we undertake that scrutiny as effectively as we can. Obviously, I want to move quickly, but I have to be mindful of the requirements of parliamentary scrutiny, so those will be the parameters that we work within.

On the point about the European Charter of Local Self-Government (Incorporation) (Scotland) Bill and the national care service, Parliament has passed the bill and any future legislation that the Government brings forward must be compatible with that.

Michael Marra (North East Scotland) (Lab): I thank the Government for advance sight of the statement. We on the Labour benches are glad that we are now dealing with the reality of the situation, and I give the Deputy First Minister the

assurance that the Labour Party will engage to ensure that the reconsideration stage is dealt with at pace, so that we can finally get the legislation commenced.

That the Conservative Government is recalcitrant is beyond question, but we believe that the events of the past year beg some serious self-examination from Scottish ministers. On 4 March 2021, the UK Government informed the Deputy First Minister of its interpretation of the legal position. Nothing was told to this Parliament and the legislation passed, amid great fanfare, on 16 March.

The real common ground found in Parliament was that the children of Scotland deserve so much better than they currently get. Savage cuts to education funding for the poorest and scandalous waiting times for mental health contravene the rights-based approach that this Government purports to uphold. The use of Mosquito devices to disperse children breaches articles 2, 3, 15, 19 and 31 of the UNCRC. What time have ministers found, amid the constitutional wrangling, to act on those issues, which are harming Scottish children every day?

John Swinney: I welcome the assurance from Mr Marra that the Labour Party will work with us on undertaking this work expeditiously, and I have committed to doing exactly that.

It is very interesting that Mr Marra describes the events of the past year or so as “constitutional wrangling”. Parliament unanimously passed a bill that Parliament believed was necessary to protect the rights of children and young people in Scotland. I do not think that Parliament should be cowed from its aspirations by the UK Government. I think that Parliament should be bold in its aspirations and I think that Mr Marra probably agrees that Parliament should not in any way be inhibited from making the boldest possible commitments. I am sure that he and I agree about protecting the rights of children and young people in Scotland.

If Parliament wants to take a maximalist position to give that protection, I do not think that it should be inhibited from doing that, but we are now inhibited because the UK Government has intervened. I have spent a number of months trying to find pragmatic ways of getting the UK Government to accept a fairly basic reality, which is best expressed as follows.

The Education (Scotland) Act 1980 is an act that we are empowered to revise, but under the Supreme Court judgment, we cannot do that through the UNCRC bill. The Supreme Court judgment says that the 1980 act is an act of the Westminster Parliament, and, because of the Westminster sovereignty principle, we cannot put

that legislation into this framework. I have simply tried to find a pragmatic way to enable that to happen, because that is what Parliament wanted and legislated for. I have just been trying to protect the interests of Parliament, and it is not part of my duty—[*Interruption.*]

I am not sure what is going on on the Conservative benches—

The Cabinet Secretary for Health and Social Care (Humza Yousaf): They do not care about this Parliament.

John Swinney: No, they do not care.

I do not believe that this Parliament should be trampled over by the UK Government. That is why I have been doing what I have been doing. That is my self-examination analysis complete.

As for some of the other measures that Mr Marra talked about, this Government is doing a lot to address the circumstances of children and young people in our country. Doubling the child payment and extending it even further is one of the strongest things that we can do to support the human rights of children and young people in Scotland.

Joe FitzPatrick (Dundee City West) (SNP): In session 5, the Equalities and Human Rights Committee unanimously recommended that Parliament agree to the general principles of the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill, and I welcome the cabinet secretary’s renewed commitment to implementing the UNCRC to the fullest extent possible. That really matters to Scotland’s children and young people. Can the cabinet secretary say more about the discussions with the UK Government on routes to ensure the effectiveness of incorporation beyond those that are currently available to this Parliament, so that all legislation within the competence of this Parliament can be meaningfully made subject to international human rights standards?

John Swinney: Essentially, I put two propositions to the United Kingdom Government: that the devolution settlement could be altered to offer the Scottish Parliament additional routes to increase the effectiveness of incorporation and that the standard Scotland Act 1998 orders could be used to allow us to bring UK acts in devolved areas within the scope of the bill. Both propositions were ruled out, and we will now proceed to the reconsideration stage. I suspect that the committee that Mr FitzPatrick now convenes may well be involved in that, but that will, of course, be a matter for us to discuss with the parliamentary authorities. I look forward to engaging with the relevant committees on that question.

Mark Ruskell (Mid Scotland and Fife) (Green): I can confirm that, as the member who is now in charge of the European Charter of Local Self-Government (Incorporation) (Scotland) Bill, I will seek a reconsideration stage to ensure that the work of Mr Wightman, the Convention of Scottish Local Authorities and the Parliament as a whole is not lost.

The Deputy First Minister made a clear commitment to work closely with stakeholders on amendments to the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill. Will he also make a commitment that he will work with me and with stakeholders—COSLA, in particular—on the European Charter of Local Self-Government (Incorporation) (Scotland) Bill and that we will have a meeting sooner rather than later to discuss the shape of some of the amendments that might be lodged and what the options might be?

John Swinney: I am very happy to confirm my willingness to do that.

A really important parliamentary point is that, at the reconsideration stage, the issues that emerged out of the Supreme Court judgment need to be looked at very tightly. It is not a reconsideration of the whole bill or its principles; it is a reconsideration of the issues at stake in the judgment. I have applied a very tight judgment to that in relation to the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill, and I will take the same approach in relation to the European Charter of Local Self-Government (Incorporation) (Scotland) Bill. However, I am very happy to engage with stakeholders and with Mr Ruskell to ensure that he is well supported in bringing forward the appropriate measures to Parliament.

Meghan Gallacher (Central Scotland) (Con): The Scottish Government's legal experts no doubt warned the Deputy First Minister that the bills were not compliant with UK law, so why did the Scottish National Party choose to push forward with the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill anyway?

John Swinney: I know that Meghan Gallacher was not a member of the Scottish Parliament when that bill was passed, but her Conservative colleagues—every single one of them—voted in favour of it. It looks as though Conservative Party members are trying to suggest that they did things only because I told them that they were the right things to do. I generally do not think that I command such influence. However, if that is now the scope of my influence over the Conservative Party, the prospects for it are improving no end from the doldrums that it was in.

Members of the Scottish Parliament looked at that bill and it was thoroughly scrutinised by all of them. As I said in answer to Mr Marra's question, Parliament wanted to have the most ambitious set of provisions in place to protect children and young people. The Conservative Party is now running away from a commitment that it made only a little while ago, which is a terrible indictment of the Conservative Party.

Elena Whitham (Carrick, Cumnock and Doon Valley) (SNP): What can the Scottish Government do to ensure that local democracy is upheld and supported in the light of the absurd constitutional position that Scotland finds itself in within the devolved settlement, which sees our will thwarted, specifically on the basis that the European Charter of Local Self-Government (Incorporation) (Scotland) Bill sought to strengthen local government by incorporating the European charter into Scots law, that the bill was passed unanimously in the Parliament and that it was supported by the Scottish Government and local government through COSLA's community wellbeing board, as well as leaders' decisions in the previous council term?

John Swinney: Obviously, the bill gives us many abilities to protect the position of local government in Scotland. We will seek to make the necessary remedies to ensure that the bill is compliant so that it can come into effect and achieve the objectives that Elena Whitham has set out.

Of course, there are other measures that the Government can take to support the position of local government in Scotland. The Government will engage with the leadership of COSLA when the local authority administrations and the new leadership of COSLA are in place. Elena Whitham has significant, formidable experience of exercising such authority over many years of service in local government and in COSLA.

Sarah Boyack (Lothian) (Lab): Would the Deputy First Minister like to confirm that the Scottish Government knew that there were issues with both bills but did not respect MSPs enough to tell us about them before we voted for those bills in Parliament? The Deputy First Minister says that he is "delighted" that we can now make progress, but is it not the case that we could have progressed both bills, transforming children's lives and empowering local government, through agreeing to amendments at stage 3 last year had the SNP not preferred a constitutional falling out and delays to both of those pieces of vital legislation?

John Swinney: Just as we are seeing in several local authority chambers around the country, the Labour Party is being enthusiastically supported by the Conservatives. I am lost for

words at the question that Sarah Boyack has just put to me. I thought that people like Sarah Boyack were interested in maximising the protection for children and young people in Scotland—we should not be trampled over by the UK Government in doing that.

Fulton MacGregor (Coatbridge and Chryston) (SNP): On the back of that question, does the Deputy First Minister hope, as I do, that the cross-party spirit that led to the initial unanimous passing of the bills can be found again as the Parliament tries as hard as it can, within its current powers, to legislate in favour of our having a world-leading status of which we can all be proud in relation to the rights of children and the empowerment of local democracy?

John Swinney: I hope that that is the case. When Parliament considered the bills, particularly the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill—I was more closely involved with that than with the European Charter of Local Self-Government (Incorporation) (Scotland) Bill—we had extensive evidence taking throughout the full parliamentary process. Indeed, Mr MacGregor may have been on the committee that scrutinised the bill.

It was very clear that Parliament wanted to take the maximal position, and I was enthusiastic about that. That was the proposition that I put to Parliament, and Parliament appeared to be very supportive of that objective. Therefore, legislating to the maximum extent possible is a critical part of the contents of the bill. I want to ensure that, at the reconsideration stage, we maintain as much of that protection as we possibly can while satisfying the legislative competence requirements placed on us by the conclusions in the Supreme Court judgment.

Willie Rennie (North East Fife) (LD): People expect our two Governments to be able to work together, but, to be frank, that relationship has been atrocious for years. The responsibility for that lies with both Governments, and pointing the finger does not help. Meanwhile, children and local communities have lost out.

Given that there was nothing new in today's statement, why has it taken so long for the Government to start another consultation with stakeholders? Why was it not done months ago?

John Swinney: Mr Rennie talks about the relationship between the Governments. I have put on record today, as dispassionately as I possibly can, the comments of the secretary of state, who told the House of Commons in October that he was ready to

“engage constructively with the Scottish Government to ensure relevant issues that may arise are addressed at the

earliest possible stage.”—[*Official Report, House of Commons*, 20 October 2021; Vol 701, c 48WS.]

In my answer to Joe FitzPatrick, I set out two propositions that I put to the secretary of state, both of which were rejected. They were attempts by me to ensure that the will of the Parliament was protected. The secretary of state has essentially vetoed that, and I regret that very much.

I will have to bring a reconsideration proposition to Parliament that will restrict what Parliament passed in the spring of 2021. I regret that. However, I certainly did not think that it was in my gift to do that without exhausting the dialogue with the Secretary of State for Scotland. He has not been interested in engaging in that dialogue. I hope that the secretary of state and the office of the Advocate General will engage with us constructively in the advice that is required to ensure that the bills are compliant in the next period. I will update Parliament on that.

Mr Rennie says that there was nothing new in my statement, but I set out to Parliament the legislative changes that I will make, and it is the first time that I have done that. I did not want to do that earlier because I did not want to give up on the possibility of the Secretary of State for Scotland saying, “With these changes, you can keep your bill the way it is.” That is the explanation.

It is obvious that there has to be adequate consultation in Parliament, and we will engage with the parliamentary authorities to do all that and to minimise the impact of the changes on the bill.

Ruth Maguire (Cunninghame South) (SNP): Despite the wholly unnecessary obstacles that were put in the way of full UNCRC incorporation, Scotland is today a good place in which to raise a child safely and happily. Will the Deputy First Minister assure the Parliament that the interventions of the UK Government have not undermined and will not undermine the will of the Scottish Government to adhere to our shared vision of reinforcing the civil, political, economic, social and cultural rights that all children everywhere are entitled to?

John Swinney: I agree whole-heartedly with the statements that Ruth Maguire makes and that it is important to ensure that, in two respects, we live up to the very high ambition that she sets out. First, the Parliament should be prepared to change legislation when we do not believe that it lives up to those aspirations—for example, if there are provisions in the Education (Scotland) Act 1980 that we do not believe are UNCRC compliant, we can legislate to change it and should be prepared to do so. Secondly, the way in which we exercise our wider policy responsibilities—I am thinking particularly about

the work on getting it right for every child—is fundamental to ensuring that the aspirations that Ruth Maguire sets out are lived up to. I give that commitment to Parliament.

Jeremy Balfour (Lothian) (Con): There is a danger that the Deputy First Minister is trying to rewrite history. Does he agree that, at stage 3 of the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill, two amendments were lodged that would have made the bill legally compliant? If the Scottish Government wants to protect our children, why does he not simply bring those two amendments to the chamber today and get cross-party support to get the bill passed, instead of spending time debating things that he knows cannot happen under law?

John Swinney: I am not doing that; I am offering Parliament a resolution to an issue and a difficulty that has arisen out of Parliament's unanimous support for a bill. It is not a bill that just my colleagues voted for; every member voted for it. I do not think that it would be appropriate for me to undermine the unanimous will of Parliament as expressed by the legislation that we have put in place.

We will bring forward the reconsideration stage. Mr Balfour says that it should all be done this afternoon, but if I said that it was all going to be done this afternoon, Stephen Kerr would be on his feet saying that there was not enough time for us to do it all, that we were railroading Parliament and all the rest of it. We will take the necessary time to discuss these issues with the parliamentary authorities and will lodge the necessary amendments.

Clare Adamson (Motherwell and Wishaw) (SNP): Far from being about constitutional wrangling, this is about the rights of children. Accidents disproportionately impact children from more deprived backgrounds, making accident prevention a social justice imperative. The UNCRC contains provisions that are directly linked to accident prevention. Article 19 outlines the right to protection from harm, and article 24 more specifically includes the right to accessible information in support of the prevention of accidents. What possible reasons are there for denying the rights of children under those articles, and what measures is the Scottish Government taking to ensure that accident prevention and children's safety are a priority?

John Swinney: The whole focus of the UNCRC incorporation bill is to proactively establish an approach in public authorities and public bodies in Scotland that is about protecting the rights of children. It is vital that such a culture is created as a consequence of the legislation, and the obligations that the bill places on public bodies are

exactly the type of obligations that will enable the aspirations that Clare Adamson put to me to be fulfilled as a consequence of the legislation.

I assure Clare Adamson that much of the preparatory work has already been undertaken, but we will be able to reinforce that with the passing of the bill. There will, of course, be legal remedies available to a range of different people around the country should they feel that those rights are not fully enacted in existing legislation and not protected by the UNCRC bill.

The Presiding Officer: That concludes questions on the ministerial statement.

Miles Briggs: On a point of order, Presiding Officer. This will be the first time that Parliament will undertake a reconsideration stage of a bill, and I do not believe that any member wants to see the Scottish Government setting the parameters for that. Could you advise members of what process will be developed to enable all MSPs across the Parliament to influence the bill?

Secondly, could you look at the publication of the Parliament's legal advice, which the Presiding Officer at the time received, on the legislation and its competence when it was originally passed?

The Presiding Officer: Sorry, Mr Briggs—could you repeat your second point?

Miles Briggs: It is about the publication of the Parliament's legal advice, which the Presiding Officer at the time received and which pointed to the legal competence of the legislation when Parliament was considering it. Would that advice be published?

The Presiding Officer: Legal advice is not shared, for very good reasons.

With regard to Mr Briggs's point on the reconsideration stage, clarity will be provided for all members. The matter will be discussed at the Parliamentary Bureau and all members will be notified accordingly to enable them to fully take part in any scrutiny.

Stephen Kerr (Central Scotland) (Con): On a point of order, Presiding Officer. So as not to disappoint the Deputy First Minister, if it is your judgment that further time should be allowed for questions to be put to the Deputy First Minister, under rule 8.14.3 of standing orders, would you consider extending the time for questions? A precedent was set by the ministerial statement on Dr Gray's maternity unit in Moray just a few months ago.

The Presiding Officer: The time that was set aside today was agreed by the Parliamentary Bureau. Therefore, we will move on to the next item of business. There will be a short pause before we do so.

Health and Social Care

The Deputy Presiding Officer (Liam McArthur): I ask members who are leaving the chamber to do so as quickly and as quietly as possible.

The next item of business is a debate on motion S6M-04567, in the name of Kevin Stewart, on keeping care close to home and improving outcomes.

15:03

The Minister for Mental Wellbeing and Social Care (Kevin Stewart): The Parliament will be well aware of the scale of challenge across our public services and the level of uncertainty that we have faced over the past two years. In that context, it gives me particular pride to reflect on the ways in which our front-line national health service and social care workforce, and all those working to support them, have stepped up and adapted to new ways of working during the most challenging of times.

I will take a few moments to set out some reflections on the health and social care response to Covid-19 and some of the lessons learned, which are supporting us to future proof our NHS and social care services to provide sustainable reform and better care for the people of Scotland.

We know that demand for health and care services is increasing and the Covid-19 pandemic has accelerated the need to make optimal use of our resources. Innovation and transformation are critical to enabling our NHS to achieve reforms in the delivery of care.

The impact of addressing the Covid-19 pandemic meant that many health and care services had to be suspended or reduced in scope and scale. That affected almost all aspects of NHS care. As a result, demand for our healthcare services has increased, which is impacting on the efficiency of our services—for example, attendances at our accident and emergency services have increased and are now above 95 per cent of pre-Covid average levels; the average length of stay in hospital is up by about one day on recent seasonal averages; planned care waiting times have significantly increased; and acute capacity levels are regularly at above 95 per cent. Those issues are compounded by other challenges such as infection prevention and control measures, workforce pressures and delayed discharge.

The challenge of Covid-19 compelled our public sector to empower services to be flexible and adaptable and to provide alternative pathways for people to access healthcare. Teams blurred

organisational boundaries, with unprecedented levels of collaborative working between sectors. We must all now build on that momentum to transform how we deliver care and how our systems work together.

With NHS 24 as the key point of contact, we have through our redesign of urgent care programme provided wide-scale triage of people away from hospital services and towards virtual hubs, which are staffed by A and E teams and have been established to prevent unnecessary exposure to a hospital setting and to ensure the right care at the right time. When hospital attendance is required, that can be scheduled. We are now seeing a reduction of between 15 and 20 per cent in people who self-present.

NHS 24 has focused on ensuring that patients receive the correct advice immediately, without a requirement to be placed in a queue. That means that patients sometimes have to wait longer for their call to be answered, but more than 95 per cent of calls are closed first time, as patients get appropriate support and advice without any requirement to be placed in a queue for a call back.

The Scottish Ambulance Service continues to increase see-and-treat outcomes to ensure that patients receive the most appropriate care first time, which reduces demand on operational ambulances. As a result, 41 per cent of patients were managed in their homes or community settings last year. Through the advanced practitioner role, the SAS has provided vital virtual pre-assessment care, which positively impacts on reducing avoidable A and E attendances and safeguarding patients in the community.

We have significantly increased the options for people to access health and care services. That includes increasing the availability of digital support and therapies for mental health, the ability to monitor a condition from home or the ability to have a video consultation with a health or care professional.

A key area for keeping people at home is telecare, which supports 180,000 people in Scotland. The Digital Office for Scottish Local Government is leading on local government's transition to digital, which will support a more joined-up and resilient service across our country.

During the pandemic, the use of Near Me video consultations rose from about 1,000 consultations per month to a peak of 90,000 per month. Our aim is to continue to provide safe, person-centred and sustainable care through video consulting, with public choice as a key priority. Just after Christmas, the health secretary announced a series of actions to increase virtual capacity. That is key to reducing demand on our hospitals and

ensuring that there is enough capacity in the community to provide care closer to home. To manage on-going pressures on acute care as a result of the pandemic and to support recovery towards a sustainable future, we have focused on building virtual capacity since early in the new year.

That work focuses on four priority pathways, which I will discuss in a moment. In combination, those services have avoided or saved about 655 bed days per day. That is the equivalent of adding the acute care capacity of a large district general hospital to our existing bricks-and-mortar hospitals. Without those services, patients would have been admitted to hospital and/or experienced a longer length of stay, thereby adding to the already significant pressures and providing a poorer outcome for the patient.

Through that work, we have enhanced hospital at home services across Scotland over the past few months. We are already seeing that work, which is critical as we move into the recovery phase, making a significant impact.

The level of care that we are able to provide at home continues to evolve and grow, and we are now seeing the spread of services such as hospital at home. I have visited hospital at home services in Edinburgh, and the cabinet secretary recently visited the Forth Valley service, on its first birthday, and was extremely impressed with the care that it provides. At that visit, he announced that an additional £3.6 million was being made available this year to support further development. That takes our total investment in hospital at home to more than £8 million.

Those services enable people to receive treatments that would otherwise require admission to hospital, such as an intravenous drip or oxygen supply. They also provide access to hospital tests under the care of a consultant in people's own home. Evidence shows that those benefiting from the service are more likely to avoid hospital or care home stays for up to six months after a period of acute illness. For older patients, the service means that they are able to stay at home longer without losing their independence, which has contributed to overall improvements in patient satisfaction.

Local management information that has been collected by Healthcare Improvement Scotland shows that, between September 2021 and February 2022, 4,500 people were treated by hospital at home services who would otherwise have been admitted to hospital. That equates to about 26,700 bed days.

Acute exacerbations of chronic obstructive pulmonary disease—COPD—are the most common cause of admission to hospital in

Scotland. The condition affects 120,000 people in Scotland, a figure that is predicted to increase by 33 per cent in the next 20 years. Ambulatory respiratory services support patients with COPD in the community. Once in place, services can be expanded to manage other chronic lung conditions. We have increased capacity for respiratory rapid response services and they are reducing the number of occupied bed days, the length of stays and readmission rates. Since mid-January, 21,000 bed days have been avoided, which is an average of about 176 beds a day.

We continue to work with NHS boards to upscale that service and to reduce the variability of what respiratory services are in place. The impact will grow as boards further develop their pathways, particularly in the community.

We have also enhanced out-patient parenteral antimicrobial therapy capacity, which is a multidisciplinary service that provides an alternative for hospital admission or supports early discharge for a variety of patients with infection usually requiring IV therapy. To date, 22,000 bed days have been avoided, which is the equivalent of up to 197 beds daily.

To ensure that we can respond to future waves of the pandemic and a potential resurgence of the virus, we have been working with partners to roll out nationally a Covid remote health monitoring pathway. More than 6,400 Covid remote monitoring patient packs have been provided to 10 territorial boards and the Scottish Ambulance Service, and another 6,000 packs will be distributed this month. We are also embedding the remote monitoring approach across other specialties such as respiratory and maternity.

Planning continues with a view to expanding virtual capacity and aiming to double the overall provision of acute care that is currently provided in a patient's own home, creating greater on-site hospital capacity and resulting in better patient outcomes at lower cost.

We are progressing a range of other actions to support flow through the hospital and minimise delays for patients either being admitted or discharged, including the discharge without delay programme.

To support our ambition of providing more care in the community, we are committed to expanding our district nursing service, as set out in the national workforce plan, which was published in 2019, and providing the necessary funding to support that. We are investing £47 million from 2020 to 2025 to increase the workforce by 12 per cent; that will introduce a minimum of 375 additional nurses to the district nurse service. The service supports people to stay in their homes, avoiding the need for them to be admitted to

hospital or a care home, and it can support early discharge from hospital.

Our health and social care services continue to face unprecedented pressures. We have a lot of work to do to help the system recover; deliver on our ambitions; ensure that the people of Scotland receive the highest standard of care as they deserve; reduce waiting times; and increase our workforce across the system. There is no doubt that we have a long way to go to address the full scale of the challenge in our health and social care services, but I am optimistic that, by working collaboratively, and with the continued commitment and dedication of NHS staff and those in the social care sector, we will not only recover but innovate and redesign to deliver lasting improvements for the future.

The Government and I will continue to update members in the chamber on progress.

I move,

That the Parliament thanks Scotland's NHS and social care staff for going above and beyond during the COVID-19 pandemic; welcomes the focus on stabilising and recovering healthcare through investment and reform; notes the efforts to ensure that more patients receive high-quality person-centred care and treatment in the right place, at the right time; supports the focus on building and enhancing virtual capacity to support a sustainable future providing alternatives to hospital and improving patient experience; recognises the recent progress on the roll-out of hospital and home and community respiratory services, for example, and agrees with the commitment to upscale these services in the community, utilising technology and digital opportunities to support improvements.

The Deputy Presiding Officer: I advise members that we are already tight for time, so I require colleagues to stick to their allocated speaking time, even if they take interventions.

15:16

Sandesh Gulhane (Glasgow) (Con): If we are going to make a difference and deliver improvements, we need to reject complacency, but the Scottish National Party-Green Government has once again lodged a motion that is heavy on self-congratulation but hollow on real targets, real commitment and delivery.

We know why—across the board, the SNP's record on delivering on its policies and promises is abysmal. If members want examples, here they are: ferries wildly overdue and over budget; the Highland aluminium smelter; Burntisland Fabrications; Prestwick airport; the privatisation of ScotRail; free laptops or tablets for every child; bikes for the poorest youngsters; and renewing play parks. The SNP cannot even run a census.

On health and social care, the SNP promised to end delayed discharge from hospitals. There is a nursing and midwifery staffing crisis, there are

record A and E waiting times and our social care sector is at breaking point—all on the SNP's watch. We need to see decisive action and a commitment to quality, and we need to think about measurable outcomes.

Joe FitzPatrick (Dundee City West) (SNP): Could the member tell us what the record is on those matters south of the border, where his party is in charge?

Sandesh Gulhane: I think that the member's constituents, and the people of Scotland, will want to know what is happening in Scotland. Does he know why? Because we represent the people of Scotland and we should do better. That is why.

The SNP-Green Government should surely recognise that Scotland is strong in data-driven technology and that we should be adopting and integrating technological solutions to deliver our hospital at home care services. I was pleased to hear the minister underscore the importance of technology in a health and social care setting. Data-driven innovation and artificial intelligence in Scotland are thriving through United Kingdom and Scottish Government programmes; funding from major donors equates to more than £1 billion and is being pumped into innovation and skills development in Scotland.

In healthcare, Scotland has greatness literally at its fingertips. It has the potential to be a world leader, developing, testing and providing medical technology. We just need to want it.

Emma Harper (South Scotland) (SNP): Would Sandesh Gulhane agree that the Scottish Government's implementation of its "Respiratory Care Action Plan 2021-2026", which includes technology in delivery, is a good step forward, given that that isnae happening south of the border right now?

Sandesh Gulhane: There is an obsession with what is happening south of the border, but I agree that using technology to help people in the way that Emma Harper describes is good for the people of Scotland. Scotland has the potential to be a world leader in developing testing and providing medical technology. We just need to want it more and to embrace our home-grown and home-funded start-ups and university spin-outs. I would argue that we do not really have a choice and that we need the Scottish Government to speed up funding.

We all know that our NHS and social care services face huge workforce challenges. On hospital waiting times, we have a toxic cocktail of delays, growing backlogs and delayed discharge, all of which impact our social care system, despite the incredible work of our health and social care staff.

A huge concern is the SNP-Green Government's drive to create a national care service, which threatens to further delay reforms. The minister might wish to reflect on how centralised social care provision would simultaneously support vulnerable people in both Glasgow and Shetland.

Gillian Martin (Aberdeenshire East) (SNP): Will the member take an intervention?

Sandesh Gulhane: I am afraid that I am now pushed for time.

The SNP Government forever complains about being hamstrung by a lack of cash, but we learned earlier this month that it has spent nearly £1 million on private consultants as part of its plans to centralise social care. One such consultant raked in £90,000 a month.

Audit Scotland has said that reform cannot wait for a top-down structural reorganisation. I urge the minister to accept that localism must be at the heart of social care reform.

Kevin Stewart: As we have spelled out, localism will be at the very heart of the delivery of the national care service. Can Dr Gulhane tell us how he would eradicate what is often a postcode lottery when it comes to care without bringing into play the standards that will come into play with the national care service?

Sandesh Gulhane: It is amazing that you want to do that but are not able to do the same when it comes to long Covid clinics. Perhaps you need to have a consistent policy.

The Deputy Presiding Officer: Please speak through the chair, Dr Gulhane.

Sandesh Gulhane: This is not the time to centralise social care services, and I am glad that the minister said that this is not the time to do so. Instead of pressing ahead with a bureaucratic overhaul of services, which could lead to an increase in out-of-care services, the SNP must engage with carers and those who need support to ensure that the highest level of care is delivered.

Let us consider what respected bodies outwith the Parliament have said about the SNP's latest flagship adventure. The Convention of Scottish Local Authorities says that the plans for a national care service are "an attack on localism". It says that it is

"deeply concerning that the consultation"

represents a

"considerable departure from the recommendations"

of the Feeley review. COSLA adds that

"Councils know their communities and all the evidence suggests that local democratic decision making works."

Audit Scotland is concerned about the extent of the SNP Government's plans for reform

"and the time it will take to implement them."

Its report outlines that

"Many of the issues cannot wait for the Scottish Government to implement"

a national care service. Stakeholders told Audit Scotland of

"services in near-crisis and explained that a lack of action now presents serious risks to the delivery of care services for individuals."

Lessons need to be learned from previous restructuring and public reform. Audit Scotland notes that previous reports on such matters have found that

"reform is challenging and public bodies have experienced difficulties implementing elements of reform—expected benefits are not always clearly defined",

but they really should be. The Audit Scotland report goes on to say that

"reform does not always deliver the expected benefits, particularly in the short term."

Kevin Stewart: Will Dr Gulhane give way?

Sandesh Gulhane: I am afraid that I am pressed for time now.

Audit Scotland says:

"Any difficulties in implementing social care reform could have a significant ... impact on vulnerable people who rely on care and support."

There is another highly qualified view that we should listen to. The Fraser of Allander Institute states:

"Until we know the final shape of the National Care Service, we can't say too much about the funding settlement required."

The Scottish Government's programme for government states that it will increase spending

"by 25% over this Parliament—providing over £800 million ... by 2026-27."

However, that is some way short of the more than £1 billion that is expected to come from national insurance contributions. Analysis by the Fraser of Allander Institute states that the

"definition of social care"

that the £800 million relates to is

"hard to follow",

and that it is not clear whether it is a

"cash or real terms increase".

No one is suggesting that reforming our country's social care system is anything other than complex, but we need to focus on working with and supporting those who know the problems

best. That is why the Scottish Conservatives have proposed a local care service, which would ensure that support is delivered as close as possible to those who need it, especially in our rural and island communities.

We must avoid imposing a centralised system, which could well be disjointed and fragmented and would lose local responsiveness and creativity. As we have seen with the SNP's control freakery in asking its MSPs to submit supplementary questions in advance, the Government has a tendency to favour a command and control model and to have an insufficient focus on enabling flexibility. It is not as if we are dealing with an Administration with an amazing track record of delivering on its promises and goals and of delivering value—we most certainly are not.

Our health and social care staff continue to work incredibly hard and they deserve a system that works for them. That is why I will be pleased to move the Scottish Conservative amendment.

I draw members' attention to my entry in the register of interests, which shows that I am a practising NHS doctor.

I move amendment S6M-04567.2, to leave out from "welcomes" to end and insert:

"supports increasing the focus on building and enhancing virtual capacity to provide alternatives to hospital and improve patient experience; agrees that more needs to be done to ensure that patients receive high-quality person-centred care and treatment in the right place, at the right time; requests that the Scottish Government provides regular updates on progress towards these goals; notes that care reform cannot wait for the establishment of a National Care Service; shares concerns that the National Care Service will be centralised, bureaucratic and less sensitive to local needs and geographical variation; is concerned that the National Care Service could lead to an increase in out-of-area care; regrets, in particular, that the centralisation of other public services in Scotland has made them more geographically remote; regrets more broadly that the commissioning of care at the moment is focussed on cost rather than quality or outcomes; calls, to this end, for a move towards ethical commissioning; notes that a lack of care-at-home packages is having a detrimental impact on delayed discharge; regrets that the use of technology and hospital-to-home services is insufficient, and welcomes the calls for a Local Care Service and a local care guarantee to protect individual choice and control, and ensure that support is delivered as close as possible to those who need it, especially in rural and island communities."

15:25

Paul O'Kane (West Scotland) (Lab): I begin by thanking our NHS and social care workforce. Their efforts over the past two years have been beyond exemplary, and they have worked tirelessly to keep our families safe and well, and to ensure that people continue to get the care that they need in their local community.

I note the aspiration that the Government has expressed in the motion and the debate. The minister said that there is a lot to do and that

"we have a long way to go".

Forgive me if I take a few moments to question his unfettered optimism, but it is clear that there are significant challenges and barriers to building and enhancing virtual capacity to support a sustainable future and to provide alternatives to hospital while also improving the patient experience.

The Government's motion fails to acknowledge many of the realities that patients and health and social care workers face. I am sure that all members have heard constituents say that they are waiting too long to see their general practitioner and are not always aware of how to access alternative clinical pathways or why they are doing so. That is in stark contrast to the Government proposition today. We cannot ignore the failure to meet accident and emergency waiting times, the continued delayed discharge figures and the lack of a robust plan to recover services and support staff as we emerge from Covid-19.

The Government's motion puts significant emphasis on alternative pathways, but evidence to the Health, Social Care and Sport Committee has shown that nowhere near enough work has been done to make people aware of those services. Evidence that was submitted by people who work in services and who support patients to access them shows that waiting times are too long and that the route is often convoluted, which puts additional pressure on general practices and accident and emergency departments.

That is not just a recent trend that can be explained away by the pandemic. One respondent to the committee's consultation said:

"Even before the pandemic waiting times are over long and normally by the time you see anybody your condition is worse".

General practices are at breaking point and patients are paying the price, with the pandemic having exacerbated years of decline under the Government. In a poll that was carried out last month, 86 per cent of Scotland's GPs who responded said that they have felt anxiety, stress or depression in the past year. That is what happens when the Scottish Government does not properly fund and support our NHS. The result is that patients and the people who care for them suffer.

Those examples are not just one-offs. The recently published 2021-22 health and care experience survey has exposed plummeting satisfaction with health and care services in Scotland. The proportion of people who are satisfied with the overall care that is provided by

general practices dropped by 12 percentage points in two years, with almost a third of people rating their overall care negatively. I do not believe for a second that that is a reflection of our hard-working GPs and their support and reception staff; rather, it reflects the fact that there is not enough clarity and support for people who are on alternative pathways.

When it comes to building back the foundations of the NHS stronger than before, “NHS Recovery Plan 2021-2026” has failed to deliver. Audit Scotland has highlighted that the recovery from Covid-19

“remains hindered by a lack of robust and reliable data”

across the NHS.

For all the Government’s talk of increasing the number of allied health professionals, in December 2021, there were more than 1,000 whole-time equivalent vacancies. That is simply not good enough and shows that the Government’s rhetoric does not always match reality.

Social care is in dire straits. The SNP has presided over slashing of care packages and withdrawal of respite care, and it has failed to immediately implement key recommendations of the Feeley review, including on removal of residential care charges.

The crisis in social care clearly impacts on our NHS. Delayed discharges are hitting record levels and there are unacceptable waiting times in accident and emergency departments. Despite that, the pace of change in social care has been slow and is faltering in the face of growing pressures from increasing demand and demographic changes. For months, the Royal College of Emergency Medicine has been warning that longer waits will lead to more preventable deaths; this week it repeated its calls for 1,000 new beds across the system.

In short, I say that failure to tackle social care pressures is bad for patients and bad for key services across our NHS. Our social care workforce is demoralised and understandably feels undervalued. There are significant shortages across the workforce, which is resulting in a record high number of delayed discharges that puts strain on key services across our NHS.

Unfortunately, the Government is doing little to make social care a more appealing career choice. Only six months ago, the SNP Government rejected Scottish Labour’s calls to deliver an immediate pay rise to £12 per hour; instead, it opted for a measly 48p per hour increase.

Today, Scottish Labour is calling for steps to be taken to ensure that patients who need to be seen in person can receive speedy treatment. Urgent

action is needed to fix our social care system. The “wait and see” approach of the SNP Government regarding the national care service is not good enough. Non-residential care charges must be removed immediately, and the recent narrowing of eligibility for care packages must be reversed and the independent living fund reopened.

There is an urgent need not only for reform, but for tackling poverty pay in the social care sector, which has a predominantly female workforce and experiences long-standing issues of gender inequality. The Scottish Government’s proposed pay increase does not reflect the skilled nature of social care work. The growing staffing crisis that is having a direct impact on our NHS will never be addressed while people can earn more by working in a supermarket or a pub. The future of our social care sector is dependent on a strong, stable and valued workforce. That is why Scottish Labour supports the “Fight for £15” campaign to increase social care workers’ pay. We believe that they need an immediate pay rise to £12 per hour, followed by a further rise to £15 per hour.

Kevin Stewart: Will Paul O’Kane give way?

Jackie Dunbar (Aberdeen Donside) (SNP): Will the member take an intervention?

Paul O’Kane: I think that I am in my last minute.

The Deputy Presiding Officer: You are, Mr O’Kane, and you have no additional time, I am afraid.

Paul O’Kane: I apologise to Mr Stewart and Ms Dunbar—I have no time. Had they tried to intervene earlier, I would possibly have given way.

Presiding Officer, I will conclude. Scottish Labour’s amendment proposes tangible actions that will truly focus on building the capacity that we need in our health and care system. Having a focus on our social care workforce, improving alternative pathways and ensuring that people can get home and that there is no wrong door for them as regards their healthcare will ensure that people can get out of hospital and improve their experience in our local communities.

I call on members to support the amendment in my name.

I move amendment S6M-04567.1, to leave out from “welcomes” to end and insert:

“supports the focus on building and enhancing virtual capacity to support a sustainable future, providing alternatives to hospital and improving patient experience, but is concerned by the ongoing pressures across primary care in Scotland, with many patients experiencing persistent problems in accessing GP appointments and Allied Health Professionals (AHP) clinical care pathways; considers that the Scottish Government must ensure that patients who need to be seen in person can receive speedy treatment; regrets the Scottish Government’s failure to take decisive action in addressing the social care crisis, with

people unable to access essential care packages and unpaid carers reaching breaking point, whilst the sector faces a recruitment and retention plight; recognises that this is having a severe impact on NHS services, with delayed discharge at record levels and persistently long waits in A&E; agrees that the establishment of a National Care Service cannot be used as an excuse to delay reforms, and calls on the Scottish Government to immediately deliver its commitment to end non-residential care charges, as well as reverse the recent narrowing of eligibility to care packages, reopen the Independent Living Fund, and address poverty pay among social care workers by backing an increase in pay to at least £15 per hour."

The Deputy Presiding Officer: I again remind members that we are very tight for time.

15:32

Alex Cole-Hamilton (Edinburgh Western) (LD): I am pleased to rise on behalf of my party in this important debate.

It will come as no surprise to members to hear me say that, as a Liberal Democrat, I will always champion services being kept as local as possible to the people whom they support. That is one of the principal reasons for my party's being against the creation of a national care service. Centralising services to ministers is not the answer to the on-going crisis in social care. It would take good local services and bring them under Scottish Government control, which would take power away from the providers who—let us be honest—know far more about what patients and staff require than the Government does. We have only to look at the scandal of sending untested and even Covid-positive patients into Scotland's care homes at the start of the Covid-19 pandemic to know that the Scottish Government should be nowhere near the issue.

However, it is not just the plans to create a national care service that highlight the fact that the Government does not want to keep care close to home, no matter what the motion may state. In Caithness, many expectant mothers now need to travel more than 100 miles down the A9 to Inverness to give birth. That journey takes more than two hours and there are on-going fears about unexpected complications for mothers and their babies. Women face being stranded too far from home or a hospital to give birth safely.

Compare that with the situation right here in Edinburgh. An expectant mother in my constituency—in Cramond, say—would need to travel for only half an hour to get to the maternity unit at the Royal infirmary of Edinburgh. Given the work that the Government has rightly undertaken to resolve issues with the Moray maternity service, you might think that it would strive to do something similar for Caithness—but, Presiding Officer, you would be wrong.

My colleague in Westminster Jamie Stone has been raising the issue since he was elected in 2017. He has repeatedly asked the Scottish Government to undertake a safety audit, and even got to the point of inviting the Cabinet Secretary for Health and Social Care himself to make the journey from Wick to Raigmore that many women are forced to endure every day.

The cabinet secretary has, it seems, so far refused to do so. He has not explained what meaningful action he is taking instead, which is simply not good enough. Every expectant mother in the country should be able easily to access maternity services close to home. They deserve access to the support that they need as they go through a major chapter in their lives. That should go without saying.

Earlier this month, my colleague Beatrice Wishart raised the fact that, north of Livingston, there are no dedicated inpatient mental healthcare beds in mother and baby units for new mothers to receive care alongside their babies. That means that mothers in places such as Lerwick, Stornoway, Ullapool, Dundee, Hawick and Stranraer could travel for miles to get the care that they need.

Kevin Stewart: Mother and baby units are highly specialised units for perinatal and infant mental healthcare, and they could never be everywhere in the country. That is why we are strengthening community-based facilities.

We currently have a consultation under way on MBUs, and I would like as many folk in Scotland as possible to respond to it. It closes at the end of this week.

Alex Cole-Hamilton: I am grateful for the intervention, but MBUs are not in the places where they are required and the peripatetic services that could offer the service are not on the ground. That means that mothers and their babies are forced far from home and from their networks of support just when they are most in need of support.

The Government might point out that MBUs need to support only 150 women a year, but it is vital to note that, every year, within 12 months of childbirth, 125 women receive treatment at an inpatient mental health unit, where they are separated from their babies.

The Government might also say, as the minister said earlier this month, that it is aware of barriers that are associated with receiving treatment far away from home, hence the existence of the mother and baby unit family fund. However, families need more than that. Women need access to treatment much closer to home. As the Royal College of Psychiatrists has said, they do not want a postcode lottery when it comes to perinatal health services.

Sadly, it is not only new and expectant mothers who have to travel far from home. Many of our children and young people have or are waiting for referrals to child and adolescent mental health services. I am sure that I am not the only MSP who has had, in increasing volumes, families getting in touch to share their experience of the system.

Gillian Martin: Will Alex Cole-Hamilton take an intervention?

Alex Cole-Hamilton: I am afraid that I do not have time.

Many of the young people who need support will have access to community services that provide help close to home. However, sometimes, more specialist treatment is required and, in such cases, options are beginning to become severely limited. There are only three inpatient units dedicated to the mental health of children and young people, and none of them is north of Dundee. In 2018-19, there were 118 admissions involving 101 young people under the age of 18 who desperately needed mental health support.

Gillian Martin: Will Alex Cole-Hamilton give way on that point?

Alex Cole-Hamilton: I really do not have time.

However, due to lack of space, many of those young people went to adult units.

We live in a time of increasing awareness about the mental health of our young people, yet we still fail to provide the right support for them. Some of them might be forced to travel hundreds of miles from their communities and families, just when they are most in need of stability and support. I find it appalling that this Government has allowed the situation to get to this stage. It simply must do better for our children and young people.

No one in the chamber or across the country doubts for a moment the vital work that our NHS does. That said, many people will not have access to that vital support in their communities, which must be rectified once and for all. This Government talks a good game when it comes to the health and social care of Scotland, but warm words and platitudes mean nothing to patients and staff who are having to suffer at the business end. It is time for the Government to act in their interests.

The Deputy Presiding Officer: We move to the open debate. Before we do so, I remind members that, if they intend to speak in the debate, they must be in the chamber for not just the closing speeches but the opening speeches.

15:38

Gillian Martin (Aberdeenshire East) (SNP):

There is lots in the Government motion and the minister's speech to mention, but I want to talk about two aspects of reform: the roll-out of national treatment centres and the types of working that keep elderly people living independently for longer. I will highlight evidence on those issues that has been received from people who have engaged with the Health, Social Care and Sport Committee over the past year.

I am obviously pleased that NHS Grampian is one of the five boards to receive Scottish Government funding to build a national treatment centre. The likely location for the Grampian centre is Aberdeen royal infirmary. It is planned that the centre will be up and running this year, with the aim being to improve the patient care service. The services to be included in the centre are out-patient, urology, dermatology, respiratory medicine, day surgery, endoscopy and facilities for magnetic resonance imaging and computerised tomography scanning. One aim of the development of the 10 centres is to reduce waiting times and give patients quicker access to procedures and diagnoses.

I will point to something that the Health, Social Care and Sport Committee has heard a few times and that I want to draw to the minister's attention, because it needs serious investment—patient information. We have often heard that patients feel that they have been left in limbo when they are put on a waiting list and hear nothing more until they get an appointment letter. A system in which patients could monitor where they are on a waiting list and when they can expect their treatment would reduce anxiety, manage patient expectations and allow people to plan and get ready for procedures.

Clinicians have said to the committee and to me that if a patient knows when they will undergo an elective procedure that allows their GP and other health professionals to work with them on pre-operative care, it can mean that there can be dietary programmes, exercise, physiotherapy and other regimes ahead of surgery that can ensure that the body recovers more quickly. It also allows the patient to feel that they are working towards treatment, and that they have a locus and are actively involved in the treatment, rather than simply waiting for a letter to arrive. That is a psychological thing, but it is important. There can be quite a gap between diagnosis and finding out that they will have a procedure and actually getting a letter about that.

I said at the start of my speech that I would also mention independent living and care packages for the elderly. That issue will chime with any of us who have elderly loved ones, which is probably all

of us. Many of this country's elderly population end up having quite long hospital stays when that could be avoided. There are variable rates of delayed discharge among health board areas. I was very encouraged to hear that there are only 19 delayed discharges at Aberdeen royal Infirmary. The minister mentioned that in evidence last week when he talked about the success of the Granite Care Consortium's strategies for getting elderly patients out of hospital swiftly and with appropriate care packages.

The goal is to have systems and interventions that keep people living independently for as long as possible. We know from clinical evidence that elderly patients can become disoriented outside their familiar home environment, and that physical strength and mobility can also deteriorate when they are in hospital. That can mean that some patients might not be able to go home at all, while others might need intensive nursing home care. Waits for enhanced care packages can mean that patients are in hospital for far longer than they need to be, or for longer than is good for their mental and physical health, given the potential for deterioration that I have just outlined.

A hospital at home system—which was mentioned by the minister—with targeted acute care interventions being delivered at home, can prevent hospitalisation in the first place. I look forward to evaluating how that will be rolled out. I realise that it has not yet been rolled out to the whole country, but I look forward to seeing how it is rolled out and what the outcomes are.

I am obviously going to mention good practice in Aberdeen as much as possible. That is what I was going to mention in an intervention on Alex Cole-Hamilton when he talked about CAMHS, because there is a success story about CAMHS in the Aberdeen and Grampian area.

The good practice in Aberdeen was highlighted by Dr John Macaskill when he came to speak to our committee in February. He pointed to agencies working in collaboration to prepare care packages at the assessment stage and doing so with the person whom they are supporting. That person is made aware of the available options and can exercise control and choice with the front-line worker whom they see all the time. That front-line worker is also able to exercise autonomy, because they know their client's needs best. They do not have to get a second opinion from someone else; they do not have to go through any procedure. There is trust.

Dr Macaskill highlighted the interesting role of the care technologist in allowing people to live independently in their own homes for longer. He again pointed out that Aberdeen is getting that right. That good practice should be rolled out and

communicated across health boards and health and social care partnerships.

That good practice is not only best for so-called clients—a word that I hate—and people who need care; it also creates a culture of trust in which front-line workers will be best able to do their jobs and, hence, more likely to have the job satisfaction that will keep them in the sector. We keep hearing about people leaving the sector, and about churn.

I will finish by quoting Dr Macaskill's words on the successful model. He said:

“There are lots of models, but they have a consistent thread, which is partnership, collaboration, equality of treatment and, critically, trust.”

He added:

“What best practice has as its heart is collaboration rather than competition, and trust rather than suspicion.”—*[Official Report, Health, Social Care and Sport Committee, 22 February 2022; c 13.]*

15:45

Alexander Stewart (Mid Scotland and Fife) (Con): I am grateful for the opportunity to contribute to this debate, which is key to the Parliament setting out its vision for care services in the coming years. I speak in support of the amendment in the name of my colleague Sandesh Gulhane.

As others have done, I put on the record my thanks to all the hard-working staff in the care sector in my region and across Scotland. Those individuals have faced immense pressures over the past two years, yet they have gone above and beyond to provide services to those who require them.

The debate concerning how our social care system should be delivered is rightly being viewed with fresh eyes as the country continues to learn the lessons of the past two years. However, although this is a good time to be debating the issues, it is also clear that many of the questions predated the pandemic entirely. The case for meaningful investment in and reform of our care system has long been clear, but how far such reform should go and how quickly it should be delivered is far less clear.

Unfortunately, the sector is facing the prospect of significant centralisation. Change may be needed, but now is not the time to overhaul care services in the way that has been proposed. Our amendment mentions the importance of services being tailored to meet local needs. Sure enough, one thing that was clear to me throughout my 18 years in local government was why care services are most effectively delivered at a local level. It is no accident that good-quality care has always been associated with highly localised delivery of

care, and any changes to that must be scrutinised very carefully.

For 15 years, I worked as a senior support worker for Ark Housing, which gave me a first-hand insight into the processes and procedures in the sector and the difficulties that face both the sector and the service users.

We are clear that care services are best delivered at a local level, but it is equally clear that their effective delivery depends on them being properly funded. This is not the time to rerun debates about local government funding, but the erosion in real terms of funding that local government has endured over the past decade is part of the reason for some of the problems that the care service has to deal with daily. As colleagues have said, there are many challenges, and providers need financial security—they continue to provide support services, but reforms are required.

Kevin Stewart: Mr Stewart talked about funding, as did Sandesh Gulhane in relation to the national insurance increase and the possible consequential that will come to Scotland. Will Mr Stewart and his colleagues join me in asking the chancellor for clarity on when we are likely to see that money and how much we are going to get here, north of the border?

Alexander Stewart: I thank the minister for the intervention. I say to him that billions of pounds have been supported by the UK Government into Scotland over the past few years, and will continue to be. I have no doubt that that money will come in close contact.

The Fraser of Allander Institute has stated that the total cost of the national care service is not known at this time, but Audit Scotland has estimated that the reforms will cost about £600 million—a figure that may rise even further depending on the full reach of the reforms. We are yet to receive clarity on the costs and a commitment from the Government that it will meet them, despite the fact that we and COSLA have been calling for that since last September.

The Government has had issues with workforce planning for some time and it is still getting it wrong. The warnings from BMA Scotland about the health and social care workforce pressures predate the pandemic. We need to support the workforce and its professionalism. The publication of the national workforce strategy in March was a step in the right direction, but it leaves many important questions unanswered.

The strategy very much emphasises the importance of attracting people into the caring professions, but we also need to look at the long-term retention of workers. Although I welcome the 1,800 training places for caring roles, which will be

funded through the national training transition fund, it is important that the uptake of those places is monitored closely to ensure that the supply meets the demand. The recruitment strategy for social care, which is due to be published by the end of 2022, must be appropriately ambitious, given the scale of the challenges that the sector is facing.

Fundamentally, we believe that a local approach should be central to any care reforms, and that local government should receive the support that it needs to deliver high-quality, integrated services that meet the demands of the individuals and the community.

The title of the debate is “keeping care close to home”. That is a good soundbite. However, I hope that, in the coming years, it will become not just a narrative but the reality for communities all across Scotland, because that is what they deserve.

15:51

Paul McLennan (East Lothian) (SNP): The past two years have been the most difficult that this country and indeed any health service have ever seen. No one could have forecast the impact that the pandemic would have, is still having, and will have for quite a while yet.

Most people want to be cared for at home, if possible, and to recover at home as soon as they can. A number of Scottish Government policy developments seek to keep care close to home and improve outcomes. I will touch on those later.

The NHS in Scotland remains under severe pressure. Covid-19 created a growing backlog of patients who had to wait much longer for treatment. That backlog creates a significant risk to our recovery plans, as the minister acknowledged.

Reform is key to the sustainability of the NHS, and must remain a focus, building on the innovation that was seen throughout the pandemic. During the pandemic, many new and different ways of working were developed to support the continued delivery of critical services. We need to support innovation in and redesign of services, to ensure that more patients receive person-centred care in the right place, at the right time, and in a way that helps staff to deliver high-quality care and treatment.

A range of partner organisations are central to research, innovation and service redesign, including the new national centre for sustainable delivery, NHS National Services Scotland, the Digital Health and Care Innovation Centre, Healthcare Improvement Scotland and the Scottish health industry partnership group.

The increase in digital, which was planned for before the pandemic and significantly accelerated as part of the response to it, means that the time is now right to ensure that digital is always available as a choice for the people who access services and the staff who deliver them. That will allow more people to manage their condition at home, to be able to carry out pre and post-operative assessments remotely, and to continue to manage their recovery from home.

The new national centre for sustainable delivery for health and social care will be particularly important in driving innovation. It has been established to pioneer and deliver new, better and more sustainable ways of delivering services. It will be key to supporting NHS recovery and will aim both to reduce unnecessary demand for services and to help to develop new pathways of care. It will work collaboratively with partner organisations, academia, the third sector and industry to identify and implement improvements to care pathways across Scotland. It will also ensure that patients have access to appropriate, clinically relevant information to inform their decision making, and will make sure that they are aware of the alternatives that are available to them, including non-operative interventions.

As part of our recovery, NHS and social care workforce planning has never been more important. Our workforce is at the heart of delivering health and social care services to the people of Scotland. More than 400,000 skilled and compassionate people work in many different roles and settings, in an integrated way. The Scottish Government has introduced measures to support staff and is monitoring the effectiveness of those. Its plans to recruit and retain staff are ambitious and will be challenging to achieve, given the NHS's historical struggles to recruit enough people with the right skills.

Our NHS social care and social work staff have been remarkable throughout the challenges that have been faced in the Covid-19 pandemic. We all have to acknowledge the significant pressures that the workforce has faced and the fact that sustained actions are required—from planning for and attracting people into the workforce through to supporting and developing that workforce—in order to deliver its recovery, growth and transformation. The workforce strategy sets out a framework for achieving the vision of a sustainable, skilled workforce.

The Scottish Government has a track record of investing in our people, with record staffing levels in our NHS and 10 consecutive years of growth.

In 2021, the Scottish Government published the “NHS Recovery Plan”, which set out key ambitions and actions to be developed and delivered over the next five years, in order to address the backlog

in care and meet the healthcare needs of people across Scotland. It is part of a wider whole-system response, including social care and support from within communities.

I want to touch again on hospital at home, which I referred to earlier. Hospital at home is one of the main ways to provide more care in the community and reduce pressure on hospitals. The minister referred to the £3.6 million that was available to support the expansion of hospital at home services, with the aim of doubling current capacity by the end of 2022. The purpose of the service is to reduce hospital admissions for elderly patients by providing them with treatment in the comfort of their own home. All health boards can apply for money to either develop or expand the services. The Scottish Government's total investment in the service is £8.1 million since 2020.

Evidence shows that those benefiting from the service are more likely to avoid hospital or care home stays for up to six months after a period of acute illness. We know that frail patients tend to occupy hospital beds for a longer period, and that is why the scheme has been expanded. By reducing the number of long hospital stays, we will free up more hospital beds.

In 2021, our new £20 million community living change fund to help redesign services for people with complex needs was launched. It helps to address issues that were raised in the 2018 “Coming Home” report about the need to avoid out-of-area placements and delayed discharge. The community living change fund is available to health and social care integration authorities to design and redesign community-based support for people with complex needs, who in the past have endured long stays in hospital settings or had to seek care outside Scotland.

Continuing investment in the NHS workforce and digital transformation, combined with specific stay-at-home initiatives, will see more people cared for at home, where they want to be.

15:56

Sarah Boyack (Lothian) (Lab): I add my thanks to all those who work in our NHS and care workers for their incredible work through the pandemic. The challenge is that their work is still pressured. They are still having to work long hours and we are still dealing with the after-effect of the pandemic as our health system and care sector recover.

I was prompted to speak in the debate by the emails from constituents that I have been receiving regularly. They are getting in touch because they need help in accessing care for either themselves or their relatives, and they cite deeply troubling and frustrating experiences. For

example, I have been contacted by relatives of people with dementia, who are very worried about the length of time that it is taking them to get access to care. That means that the person with dementia can be stuck in hospital or be at home without the support that they need, which worries their relatives.

There are people who have been stuck in hospital for a variety of reasons, the key one of which is that there is not care available for them at home, or their home needs to be made physically accessible for them but delays are preventing that from happening. Again, that creates stress not just for the person but for their family. That is not good for people's health and it has a definite negative impact on our NHS.

If we look at the delayed discharge numbers in NHS Lothian, we still see more than 200 beds per day taken up by people who are ready to leave hospital. That does not mean that they are entirely healthy and well, but they are at the point at which they no longer need hospital care and now need care at home or step-down care.

It is really important that we get an approach that looks at all those things. The problem that I have with the SNP motion is that it does not begin to acknowledge the scale of the crisis faced by the people who are currently getting in touch with us.

Kevin Stewart: I am happy to meet Ms Boyack to discuss the kind of cases that she has. I agree that the waits here in Edinburgh are unacceptable. In terms of comparing and contrasting, as Gillian Martin pointed out, there are currently only 19 delayed discharges in Aberdeen. What we need here is replication of what is going on in Aberdeen. Front-line staff need to be given the autonomy that has been given in Aberdeen, to make sure that we get it right for people in this city as well.

Sarah Boyack: The challenge is that the city has an ageing population. People are living much longer, so there is an infrastructure issue in respect of the accessibility of people's homes in the city and the care that is being provided. That is not just from the pandemic; the delayed discharge statistics go way back.

I am worried that the minister does not acknowledge the scale of the crisis in the city. Nobody should fear growing old, getting ill or becoming vulnerable and not living a full life with dignity and respect, and people's families should not have to worry about that. I will take up the minister's offer of a meeting, because people have raised particular issues that the Government could act on now.

A key issue that is raised with us regularly by nurses and carers whom we meet is that, although they have enjoyed the clapping for support through the pandemic, there are real issues to do

with finance and salaries. Delivering national terms and conditions and creating career opportunities are absolutely vital if we are to retain people in the care sector and recruit them, and if we are to make such jobs an attractive choice for people. We are in a cost of living crisis, so pay is critical to success. That is why our amendment refers to not just an immediate rise to £12 an hour but the need to go up to £15 an hour. As Paul O'Kane said, an extra 48p an hour does not cut it. The cost of private rent in Edinburgh is £1,000 a month. That is a lot of money for people who are on low incomes. Many contracts are insecure or temporary, and 15 per cent of staff have to work unpaid overtime. That means that people will not see opportunities in the care sector as reliable, long-term career opportunities, and that is one reason why we are experiencing shortages in recruitment.

I have received feedback from families who are deeply unhappy about not being able to earn an income while caring for a relative. It is simply not sustainable for many families to look after a relative full time without limit without an income. Tomorrow, we will have a debate on community wealth building. I ask the minister to reflect, in summing up, that there is a direct read-across to that debate. We could support community and co-operatively owned not-for-profit care companies. That would give people decent employment, let them shape care in their communities, and enable people to work as carers for relatives and reinvest in our communities. Distraught constituents have got in touch with me directly about that.

For too long, we have relied on unpaid carers without giving them proper support and acknowledging the sacrifices that many people make. In a cost of living crisis, the pressure will be ramped up massively if people have to give up work to care for a relative. We have to rethink how we support families.

In his opening comments, Paul O'Kane made points about addressing the funding gap that was identified in the Feeley report, giving people access to social care where they need it, reopening the independent living fund, and looking for funding for respite care to support unpaid carers, as they need to be able to keep caring, as well. We also need to look at reversing the narrowing of eligibility for care packages.

There is a lot that could be done now. It is really worrying that, in a recent survey, 43 per cent of carers said that they did not feel supported to continue caring.

There is the issue of care at home.

The Deputy Presiding Officer (Annabelle Ewing): Please bring your remarks to a close, Ms Boyack. Thank you.

Sarah Boyack: We need to ensure that we fund people. We also need care homes. We will potentially lose five council care homes in Edinburgh. I hope that our new councillors will look at that alongside care at home.

The Deputy Presiding Officer: I call Christine Grahame. I advise that we have no time in hand. Speeches should be a maximum of six minutes, and interventions must be absorbed within the allocated time.

16:03

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP): Point duly taken, Presiding Officer.

I will start with what we all agree on: the consideration and dedication of our care workforce. I think that we also agree that we want people who need care to receive that care at home or as close to home as is practicable. The practicality will depend on the level of care and, of course, the level of funding available.

I will confine my contribution to care of the elderly, and I will start with the positive. Free personal care was introduced in 2002. It is by no means perfect, but it was introduced under the Labour-Liberal Executive and supported by the SNP. It is a recognition that helping someone to dress or to open a can of beans and heat it, for instance, should not incur a charge, as that would not be charged for in a hospital setting. According to the most recent information that I could find, in 2017-18 it cost nearly £500 million, and of course, that cost is rising. In 2019, the Scottish Government introduced legislation to provide such care to the under-65s, at a cost of £2.2 million.

Secondly, there was the integration of the funding of health and social care. In 2016, the Scottish Government legislated to bring together health and social care in a single, integrated system. That was not easy. It was intended to stop the competition between NHS budgets and social care budgets, by giving the money to the health boards in the first instance. That was an important step forward. It has had its successes, but it has also had its difficulties.

Both of these examples recognised the reform that was needed as the ageing population grows. Being a septuagenarian, I am, regrettably, part of that ageing population, so I appreciate the physical difficulties that arise as age interferes with your lifestyle—notwithstanding all that you try to do.

Covid has exacerbated the need for radical reform and the extent of the demand. Therefore, I welcome the intention to create a national care service, which sets out—this is for Dr Gulhane, in

particular—inter alia, to provide for consistency and improvement to be led at the national level, but ensuring that service provision is locally accountable and responsive to the needs of communities and that services are designed at a local level, with the input of those with lived experience.

Let us see how that develops. I do not read a power grab into that. I read consistency in the level of the services, but with the delivery and design at local level—the best of both worlds.

Sandesh Gulhane: Why has it failed so miserably with the GP contract?

Christine Grahame: I am tackling the national care service. Dr Gulhane's point was that it would interfere with local design and delivery. That is not what is in the proposals, which can be challenged at a later date.

All the proposals take money. Where does that money come from? That takes us back to everything that we debate in the Scottish Parliament.

Currently, the biggest chunk of the Scottish Government budget goes to the NHS. Over 80 per cent of that is allocated to fixed costs—for hospitals and for all the staff, laundry, transport, ambulance services, medicines, GP services and so on. If we want to do more, then money must be raised, but we have very limited tax-raising powers. We have some powers over income tax levels, but none on VAT, companies' tax or fuel duties. Given that, the list of demands in the Opposition amendments—although I think them perfectly reasonable—fall at the first fence: funding.

We know that £770 million has already been taken from our budgets to mitigate Tory cuts that affect the very vulnerable in Scotland. In real terms, 5.2 per cent has been cut from our resource budget and 9.7 per cent from our capital budget—those are not Scottish Government figures, but come from the independent Scottish Fiscal Commission.

To look for nations that have the highest ranking for care of the elderly at home, we should cast our eyes over the North Sea to Finland, Norway, Sweden and Denmark. Those countries are internationally recognised as topping the charts; they are small independent nations with taxation powers to ensure that their care services meet demand with compassion—and can be funded.

Sue Webber (Lothian) (Con): Will the member take an intervention?

Christine Grahame: I am in the final minute of my speech.

How can those nations do it, yet Scotland cannot? We have similar populations and we have some similar communities. The difference is that they have control not only over the social policies—I agree with the Labour members on those—but over their economies. They are independent countries. They tax justly; they tax the right people to deliver the services that we all want to see.

Opposition members come back here and collectively ask for more and more. In the summing-up speeches, I would like to hear how those things will be paid for and which budgets the money will come from. The Opposition should not mislead people into thinking that such things can be done when our hands are tied financially.

16:09

Gillian Mackay (Central Scotland) (Green): I echo the comments of those who have spoken before me about the dedication of our health and social care staff.

The NHS is currently set up as a national sick service. Too much care is still provided in hospitals, and treatment services are prioritised over prevention. Meanwhile, demographic changes, as we have heard from Sarah Boyack and Christine Grahame, have placed increasing pressure on services, which have struggled to keep pace with demand and have faced significant challenges due to the pandemic. The Christie commission made the case for shifting care into the community 11 years ago, but we have not seen the progress that we might have wanted since then.

I therefore welcome the clear acknowledgment from the Government that we need to increase our focus on prevention and early intervention to support people to live healthier lives, and that begins in the community. Supporting and building community services and the community workforce will not only improve health outcomes, but will also enable hospitals to focus on acute and specialised healthcare.

To effectively shift care into the community, we need to take a holistic whole-system approach that acknowledges the need to build community provision while reducing pressure on hospitals. Building capacity in social care will help to reduce delayed discharges, which will alleviate pressure on hospitals and ensure that no one is stuck in a hospital bed when they do not need to be.

Not everyone needs to be in hospital, and not everyone needs acute care. There is ample evidence that health outcomes can worsen if people are in hospital when they do not need to be there. I have heard from stakeholders about the impact that a stay in hospital can have on people

with certain health conditions. Disruption in routine and removal from familiar surroundings can contribute to a deterioration in conditions.

Gillian Martin raised many important points of good practice from her constituency, which centred on an important point that has been a running theme at the Health, Social Care and Sport Committee, which is how we ensure the sharing of best practice without adding a burden to clinical staff. I do not think that we have the correct answer to that yet, but it would help many services, not just in terms of how we deliver good care locally.

We need to expand services such as hospital at home, which provides treatment and support while allowing people to be cared for in their own home. That is particularly important for older people with frailty, who are at particular risk of being affected by institutionalisation and delirium. According to Healthcare Improvement Scotland, 30 to 56 per cent of older people experience a reduction in their functional ability between admission to hospital and discharge. Reducing hospital admissions, where appropriate, can lower the risk of deterioration and support people to live more independently at home.

For many people, being discharged from hospital is just the beginning of a difficult journey, and people living with long-term conditions are at higher risk of readmission if they are not supported to self-manage their conditions.

The third sector plays a vital role in supporting people in the community, and great work is being done to assist people after discharge. Chest Heart & Stroke Scotland's hospital to home service supports people who are returning home after a stroke or have been discharged from hospital with a chest or heart condition. It works with the NHS to build a personalised flexible package of support, which can include setting recovery goals, emotional support and help in maintaining physical activity and exercise. That is a great example of how third sector services can work alongside the NHS to make sure that people can get the care that they need in the community, without having to go into hospital.

Primary care will also continue to play an essential role in supporting people to live healthy lives in the community. Ninety per cent of patient contacts are through primary care, and GP practices are often the first point of contact for patients. We need to expand the multidisciplinary team and increase the range of services that people can access at their local practice. During the Health, Social Care and Sport Committee's inquiry into alternative pathways to primary care, we heard much about the important role that community link workers play in general practice

and connecting patients with resources in their community.

GPs often have only 10-minute appointments with patients, which can limit the issues that they can cover, but link workers can spend more time speaking about complex social issues such as housing, benefits and employment and engage patients with social prescribing, which was described by one witness as

“the bridge between the community and the NHS.”—
[*Official Report, Health, Social Care and Sport Committee*,
22 March 2022; c 6.]

The Royal College of General Practitioners Scotland has been calling for the roll-out of community link workers to all practices in Scotland. I am therefore pleased that as part of the Bute house agreement, the Greens and the Scottish Government have committed to expanding community provision of mental health services linked to GP practices. Enabling people to access mental health support in the community without having to go on a waiting list will mean that more people can get the help that they need when they need it, while also reducing pressure on acute and specialist services.

The Scottish Greens also support the embedding of welfare rights advisers in GP practices, so that people can be connected to services that can support them with money advice and benefits, and I welcome the Government’s commitment to place money advisers in up to 150 GP practices in deprived areas. We know the impact that stress and pressure on income can have on those with long-term health conditions, and it is essential to ensure that people can afford to keep themselves well.

Alongside providing services in GP practices, it is important that we empower people to access community support themselves. During health committee sessions, we heard about the role of a local information system for Scotland—ALISS—which aims to allow people living with long-term conditions, disabled people and unpaid carers to access the information that they need to help them live well.

Having one point of contact for people who are looking for resources on support within the community is valuable, as it allows people to find out for themselves what is available, without having to search through multiple sources. However, although ALISS was felt by some committee witnesses to be a useful resource, others described it as difficult to use, as it was not updated regularly. I would be grateful to hear from the minister what plans are under way to improve ALISS, as it seems to be an invaluable resource that we should be making the most of.

In conclusion, Presiding Officer—

The Deputy Presiding Officer: Yes, please bring your remarks to a close, thank you.

Gillian Mackay: Sorry.

I am pleased that, in this session of Parliament, there is a renewed focus on prevention, early intervention and community care, but that must be followed up by real action. We must act now to keep care close to home. I look forward to working with members across the chamber to realise that ambition.

16:16

Jackie Dunbar (Aberdeen Donside) (SNP): I am pleased to be able to participate in today’s debate and add my support for the Scottish Government’s motion.

I would like to add my own personal thanks to Scotland’s NHS and care staff after the incredibly difficult period that we have all gone through. We really have to appreciate their efforts on the front line of the pandemic. It was one of the most challenging periods for our NHS, and that must be recognised.

Our NHS and social care staff played an immensely important role on the front line of the pandemic, providing healthcare and/or social care for those who required it, and we should never forget the selfless work that they put in throughout the pandemic. We must make clear our thanks at every single opportunity.

As we look to recover from the Covid-19 pandemic, we must use this opportunity to learn from the past two years and to build back better, investing in our healthcare system after the pressure that it has been under and using the lessons learned to build a more resilient healthcare system that is fit for the needs of the population and for the future.

It is key that we invest in our NHS and social care staff, who have given so much during the pandemic, and ensure that they feel valued and are able to react to the changing needs of our healthcare system.

I am well aware of the public sector’s commitment—my sister-in-law is a nurse in the intensive care unit at Raigmore hospital and was there at the very heart of the pandemic. It was not just her who was affected; it was also her family. I remember FaceTiming my nephew, who was barely 12 years old at the time. He said to me, “Auntie Jake, I am so proud of my mam—I worry about her every day going to work, but I know that she is doing her best to try and help as many people as possible.”

The pandemic has seen our NHS come under immense levels of pressure, and the recovery will

not be easy, with waiting times for non-urgent procedures much higher than we all would like. However, our Scottish Government has my full confidence to get us through this, with a record £18 billion committed in the Scottish budget to help both healthcare and social care deal with the challenges around moving out of the pandemic and into the post-pandemic era.

Within that spend, £1.6 billion has been committed for social care integration, which will lay the groundwork for our new national care service. Although Opposition members may like to view that as centralisation, I welcome the Scottish Government's commitment to ensuring that services are designed at a local level while engaging with folk who have lived experience to achieve a person-centred approach, with strong local accountability.

People need to be at the heart of the decision making around all this to ensure that we get it absolutely right—not just for patients, but for our health and social care staff. That is why I am pleased that the Scottish Government is investing in the wellbeing of our health and social care staff as well as in the mental health of patients. I am sure that everyone agrees that such jobs are incredibly difficult mentally and physically. It is crucial for our staff to be able to seek assistance when it is required, which allows them to perform at their best.

We will continue to have a healthcare system that works for patients only if we continue to invest and innovate. The investment that the Scottish Government has committed is absolutely key to the future of our healthcare system. Investment is also needed in our staff to ensure that we have facilities that are fit for the needs of the population and for the future.

We need staff who are paid well and who can cope with the mental and physical pressures that their jobs may create. In its amendment, Labour says that it would like the workers' pay to rise to £15. Across the chamber, most of us would love to do that, if it was possible, but I understand that we get no consequentials for pay rises, so we must absorb pay rises into the budget. We have not seen a budget alternative from Opposition parties.

Paul O'Kane: Will the member take an intervention?

The Deputy Presiding Officer: I hope that Jackie Dunbar is coming to her last minute.

Jackie Dunbar: I ask Labour to say in summing up where it would take that amount of money from.

I said that some members in the chamber would like to give a pay rise, but the Conservatives suggested that public sector workers should take a

pay cut of 20 per cent at the height of the furlough scheme.

The commitment that the Scottish Government has shown to investing in our health service by committing to increasing investment in front-line health services by 20 per cent over the parliamentary session and to investing £10 billion over the next decade to upgrade our health infrastructure will ensure that we have an NHS that is fit for the future and which will provide an environment where patients continue to access high-quality care and world-class facilities. That is why I support the motion and the establishment of the new national care service.

16:22

Jeremy Balfour (Lothian) (Con): I would like to declare an interest. It will not have escaped the notice of people in the Parliament that I have a disability and that, as such, I rely on carers to help me in my life. Without them, my life would be more difficult. They work hard every day to ensure not only that my life is easier but that the lives of a number of people are easier.

The Deputy Presiding Officer: Excuse me, Mr Balfour—could you please resume your seat? Could I please ask members to show courtesy to Mr Balfour and not turn their back on the chair? Thank you very much.

Jeremy Balfour: For the reason that I have given, I say from the outset that I understand that the debates that we have on this topic are about real people who do real good in the lives of some of the most vulnerable in our society. We should never forget that fact.

The United Kingdom is unique among nations in how we provide care through our NHS for those who are in need. We saw clear evidence of that throughout the pandemic, when doctors, nurses, porters and others stepped up to care for all of us in unbelievably tough and stressful conditions. That stands as an example of how the people of this country look after those who are in need. There is no discrimination on the basis of the nature or timing of need.

We in this country care for those who are in need. It is of the utmost importance to preserve that national instinct for care and ensure that those who need care get it. The only way to achieve that is by properly supporting our carers in their jobs.

There are more than 700,000 unpaid carers in Scotland, none of whom is properly supported in the essential work that they do. We have to ensure that, regardless of circumstance, all the people who provide care are appropriately compensated, so that they are not forced to look for two jobs but can see care as a viable career option.

Today's debate encompasses many elements and issues. I turn to the proposed national care service—a proposal that I fear represents another instance of the SNP conflating doing something with doing something helpful.

Gillian Martin: Will the member take an intervention?

Jeremy Balfour: I am sorry—I do not have time.

Lots of arguments can be made in favour of a local approach to care as opposed to the centralised national service that the Government is proposing. The most compelling argument to a sceptic such as me is that every time that this Government has attempted to absorb power locally and centralise it in Holyrood, it has gone poorly and badly wrong, to say the least.

One would think that a Government that has been in power for 15 years would have learned some lessons from its experience. However, every time that the Scottish Government has attempted to centralise the power of an institution, it has found itself presiding over a decline in efficiency and in good service for the people it is trying to serve.

I am not the first, nor will I be the last, to bring up the issue of Police Scotland. Let us look at what happened with the centralisation of the police forces. Since the formation of Police Scotland in 2013, more than 900 police officers have been cut from local divisions, and 140 police stations have closed, which has affected rural communities in particular. Far from benefiting communities, the merger has had the opposite effect.

This Government has the opposite of the Midas touch. Every time that it takes it on itself to hoard power in a central bureaucracy, communities and individuals suffer. I fear that that is the road that we are heading down with the national care service. The Government will expect a central power to deal with the unique needs of Scotland's communities and, as has happened so many times before, the people who rely on that care will suffer the most.

I will briefly make reference to the issue of food as it relates to care. In Parliament recently, a presentation was made to the cross-party group on older people, age and ageing on the importance of food in social care. Although that presentation was specifically about older people's needs, food is important for everyone because of its impact on health and wellbeing. It is particularly important if we are to take action that will help social care. I hope that the Government will consider that in everything that it talks about.

We need to protect the most vulnerable; centralisation will simply not do that.

16:27

Alex Rowley (Mid Scotland and Fife) (Lab): Many of today's speakers have—rightly—thanked NHS and social care staff for the work that they have done, and the work that they are doing, under immense pressure. Indeed, the Government's motion says:

“That the Parliament thanks Scotland's NHS and social care staff for going above and beyond during the ... pandemic”.

However, I think that many of those staff would say that, although it is great to get a thank you, they want the Government to listen to their concerns and to what needs to happen.

Interestingly, before I came into the chamber today, I received a letter from the Unison Fife health branch, which states:

“The health and care system is under pressure to ensure services are delivered in a safe and timely manner, and the COVID-19 pandemic has intensified existing pressures on staffing and resources in all health and care settings.”

The minister has acknowledged that.

The letter continues:

“The NHS has been tested to its limits, and so have many of our members. Staff in NHS Fife are reporting serious concerns to their union all underpinned by safe staffing concerns, issues include:

Dangerous staffing levels for both patients and staff.

Staff not receiving proper rest breaks.

Staff not being given opportunities to report serious incidents on Datix, the NHS electronic incident reporting system.

Serious breaches of health and safety regulations.

In June 2019 the Health and Care (Staffing) (Scotland) Act became law, the first legislation in the UK to set out requirements for safe staffing across both health and social care services. The political announcement and assent of the Act have been rightly celebrated as a significant step towards a safer environment for patients and staff.

Whilst UNISON accepts that COVID19 has delayed much of the developmental agenda it is concerning that the implementation of the Act, which is fundamentally concerned with safe staffing and patient safety, seems to have been forgotten.”

Perhaps the minister and the Government can pick up on that point. I note that the health secretary, whom I assume is busy, was unable to stay for the debate, but I will write to him as soon as it finishes with the very serious concerns that trade unions in Fife are raising about health and safety issues for staff and patients. As Gillian Mackay highlighted earlier, the NHS is a holistic service, and if different bits are not working, that will affect every part of it. We need to address that.

I visited Culross last Friday and was quite shocked to hear the concerns of the west Fife villages community councils. They say that

patients are struggling to access health services at the Valleyfield health centre, as the health centre is the busiest GP surgery in west Fife and yet it has only one doctor for 4,094 registered patients. They talk about the difficulty in trying to access those services and get appointments, and the failure of NHS Fife to engage with the community. Again, that is not acceptable. People are raising concerns and being ignored by the NHS. We can imagine the knock-on effect that that situation has on other vital services.

I finish by returning to social care—an issue that I have raised with the minister on many occasions. This morning, I looked at the Fair Work Convention's report, "Fair Work in Scotland's Social Care Sector 2019", which is very clear. It says:

"Our overarching finding is that fair work is not being consistently delivered in the social care sector. Despite some good practice and efforts by individual employers, the wider funding and commissioning system makes it almost impossible for providers to offer fair work. We found that this mainly female workforce has limited ... collective voice. Effective voice is highlighted in the Fair Work Framework as vital to delivering fair work, providing the mechanism for workers to pursue other dimensions of fair work, such as security, fulfilment and respect."

I reiterate that point to the minister. Another member mentioned the number of debates that we have had on social care in the chamber. We keep coming to the chamber and debating the subject, and the Fair Work Convention's report sets out clearly what is fundamentally wrong in social care at present, yet we are doing nothing to address that.

The minister can take that point away. He will remind me that the Government has increased pay; I acknowledge that, although—as Labour's amendment alludes to—it does not go far enough. Nevertheless, he completely fails to recognise the significant impact that the current terms and conditions are having. People can go elsewhere and get jobs that are less pressured, stressful and demanding, and get paid for the hours that they actually work. In social care, workers are being treated appallingly. Unless the Government addresses that, all the talk in this place amounts to mere rhetoric. We must treat social care workers with fairness and decency.

16:33

Karen Adam (Banffshire and Buchan Coast) (SNP): I am pleased to have the opportunity to speak on the motion, with the caveat that everything that I will highlight has hard-working staff behind it; I acknowledge them and everything that they have done throughout the Covid pandemic.

Since forming a Government, the SNP has built a strong record of delivering high standards of care across the country. That is driven by our ethos of compassion, dignity and respect, which is at the centre of everything that we do on health and social care.

That was firmly outlined when Shona Robison brought forward the new health and social care standards for Scotland in 2017. Traditionally, health and social care has involved those who require support being taken out of their homes and placed in unfamiliar settings. However, as we have moved forward with the integration of health and social care, we have ensured that person-centred care and support is at the heart of everything that we do. That has led to more people being able to receive support in the comfort of their own homes. By doing that, we are continuing to improve outcomes for people who require care while utilising the best technology that we have access to.

By scaling up our services through the £1 billion NHS recovery plan, we can tackle the pressures on our NHS. We are providing general practices and their patients with support from a range of healthcare professionals in the community, and we will recruit 1,500 more staff over the next five years for our national treatment centres, alongside 1,000 community mental health staff. We are increasing primary care investment by more than 25 per cent to support GPs, dentists and pharmacists, and we are investing more than £400 million to create a network of 10 national treatment centres across Scotland.

I was really pleased to see record investment from the Scottish Government across our health and social care sector, with £18 billion going to fund health and social care. That will go a long way in supporting people to access the support that they need while ensuring that carers who work in the sector are paid more, which is a key aspect that underpins the service.

Investment in our services and our population is key to Scotland's recovery from the pandemic. More than ever, we realise the fragility of our mental health as well as our physical health. In part of my constituency, the Aberdeenshire health and social care partnership has moved progressively to develop a hospital at home policy. The health and social care partnership recognised that it had an ageing population and that, in order to have a system that supported the delivery of a long-term, sustainable service, a fundamental shift in thinking—progressive thinking—was required.

The opportunity to develop a hospital at home service presented itself when NHS Grampian undertook a whole-system redesign, which included the transfer of resource from acute to community services. That change meant that

acute geriatricians could be aligned to manage patients within the community. Alongside the redesign was the acknowledgment that our population is better served when we receive care, whenever possible, in our communities. That has been at the forefront of the Government's record in health and social care.

Before the introduction of the hospital at home service, various community models were already in place in Aberdeenshire. Those included community hospitals, virtual community wards and a multidisciplinary approach, so the concept of managing patients within the community was already well established in the health and social care partnership. The hospital at home service was the next logical step.

In the context of our response to Covid-19, we have benefited from strong relationships with local authorities and the NHS. That enabled us to take a swift and cohesive approach that ensured that our residents and staff had the protections and support that they needed to stay safe.

Operation home 1st, as it is known, became the next phase in the health and social care response to Covid-19 across NHS Grampian. The partnership involved all three health and social care partnerships and the acute sector, and it harnessed the strong collaborative working and the whole-system approach that were adopted across all sectors during the response phase. That innovative and person-first principle, in which place-based care is of paramount importance, embodies a framework in which we can create the right environment for keeping people at home safely, reduce hospital admissions when an alternative intervention is possible and ensure that people who need care in hospital do not need to stay there for longer.

A key focus is directing support towards prevention, and there is an increased community focus to improve outcomes for all, not least elderly people. That prioritises the goal of home first for all care, which will ensure that the system remains flexible and agile enough to respond to any surges in demand and that the whole person—their circumstances and support—is considered. That model of best practice can be reflected across Scotland in a national service.

I am sure that I am not the only carer in the chamber or the only person to have experienced a loved one receive care. In that respect, choice is an absolute necessity. The option to stay at home must be a right. For many people, there is no place like home, and I am glad that that sentiment is embedded in policy for a progressive approach to healthcare for all.

The Deputy Presiding Officer: We move to the closing speeches.

16:39

Carol Mochan (South Scotland) (Lab): I am pleased to close the debate for Scottish Labour and, once again, to give my and my party's thanks to all health and social care staff and unpaid carers. We agree that the importance of having care at the centre of our communities, close to people and easily accessible, cannot be overstated. However, its usefulness is diluted considerably when waiting times are too long, services are overstretched and workers feel undervalued because they are overworked and underpaid.

Our constituents tell us that they are waiting too long to see their GP and have trouble accessing alternative clinical pathways. The Scottish Government knows that, and SNP and Green back benchers know it. It is time that they listened and spoke up for their communities and hard-working, dedicated staff. We need some honesty to fix the problem.

The Government's motion is rather self-congratulatory, but, in reality, as we have heard, for many on the front line and many who use services, the picture that the Scottish Government has painted of investment and progress is not representative of their true experience. Indeed, for some in our communities, it could not be further from reality. That is evidenced, unfortunately, by the recently published 2021-22 health and care experience survey, which, as my colleague Paul O'Kane said, exposed plummeting satisfaction with health and care services in Scotland.

It is important to note that, under the Government's handling of health services in recent years, we have witnessed health inequalities in Scotland becoming increasingly divisive. We live in a country where women from areas with higher levels of deprivation are less likely to attend cancer screening appointments.

Gillian Martin: Does Carol Mochan agree with some of our witnesses at today's meeting of the Health, Social Care and Sport Committee that the mitigation that the Scottish Government does is very difficult when an awful lot of money is being taken out of people's pockets by things such as universal credit issues and social security at a UK level? That was very strong evidence.

Carol Mochan: The member knows that I strongly object to some of the policies of the current Government at Westminster, and I recognise how difficult the situation is for people, but we must do all that we can here, in Scotland. We, on the Labour benches, want to do the things that we can do now. That is where we differ in our approach—we want to talk about what we can do and actually get it done.

Christine Grahame: Will the member take an intervention on that point?

Carol Mochan: I will take a short intervention.

Christine Grahame: It is short. I hope that the member, in her summing up, will give the costings for the demands that her party makes at the end of its amendment about ending non-residential charges, reversing the narrowing of eligibility for care packages, reopening the independent living fund and paying care workers £15 an hour. Those are all laudable aims, but I would like to know the costs, please.

Carol Mochan: The member will recognise that we need to spend longer discussing all the ins and outs. If the member believes that the SNP is doing everything that it can, I say to her that it is not. There are alternatives, and it is about political priorities. That is what being a politician is about.

As my colleagues have highlighted, Scottish Labour supports the focus on building and enhancing virtual capacity to support a sustainable future, but the pressures on primary care services and the aforementioned impacts of such pressures cannot and must not be ignored, as was recognised. It is not too late to bring care closer to our communities. Nor is it too late to invest adequately in the services that we know will reduce reliance on hospitals, such as local government family-based services and link workers. Those will improve health outcomes across Scotland, but we are running out of time, so we call on the Scottish Government to act radically and with purpose.

On a number of occasions during the debate, we have heard about the pressures that our social care workforce faces. Like our primary care workforce, our social care workers are the very best of our country, they have exceeded all expectations during the pandemic and they have protected the most vulnerable in our communities at a most serious time. It is a disgrace that so many of them have been made to feel so overworked, underpaid and undervalued. That is the reality, and we need to hear more honesty about it. Sarah Boyack described well how that situation is presenting in Edinburgh.

I believe that the reforms that a national care service could bring should be welcomed and could address significant failings that we currently see because there is too much involvement of and reliance on the private sector. However, reforms cannot wait for the national care service; we need them to happen now. Therefore, I echo the calls of my colleagues, and those highlighted in the Labour amendment, in saying that non-residential care fees must be removed immediately, the recent narrowing of eligibility for care packages must be reversed and the independent living fund

must be reopened. Moreover, to ensure that social care is both available and accessible in our communities, we must seek to improve pay in the sector.

The self-congratulatory nature of the Scottish Government's motion does not sit well with Scottish Labour. We cannot accept that people cannot access GPs, that care packages are not available for people who need them or that carers feel unsupported. We can—we must—do more. That is the point—

The Deputy Presiding Officer: Ms Mochan, could you bring your remarks to a close, please?

Carol Mochan: Scottish Labour's amendment sets out what we can do. I urge members to support it.

16:46

Sue Webber (Lothian) (Con): I welcome the chance to close the debate on behalf of the Scottish Conservatives. I, too, pass on my thanks to everyone who delivers health and social care in our country right now and to those who will do so for the foreseeable future.

As we have heard from my colleagues during the debate, the SNP urgently needs to address the social care crisis that has occurred on its watch. Now is not the time to centralise care services, as it is planning to do. Instead of pressing ahead with a bureaucratic overhaul of services, the SNP must engage with carers and those who need support to ensure that the highest level of care is delivered.

Gillian Martin: Ms Webber has been at all the recent meetings of the Health, Social Care and Sport Committee, at which she will have heard repeatedly that, in some areas, social care is doing really well and there is good practice. Would having a national care service not see such standards rolled out across the country, to places that are not doing so well?

Sue Webber: We have heard a lot about the inequity of services across the country. However, it does not need a national care service to deliver much more equal provision, as will be brought out in the point that I am about to make.

We have good policies in Scotland, and we cannot argue that the will is not there. However, we are consistently referring people into services ineffectively. We have people ricocheting around our services because nothing quite fits or meets their needs. There is no use in having good intentions, policy document after policy document and paper after paper if they are not being put into action. Our approach is fragmented and therefore causes distress to people who are in the most dire need. Having access to services is, indeed, key but, as Jeremy Balfour stated, we often lose sight

of the person who so desperately needs our assistance and support. We need equitable services, working across all the sectors.

As I have just stated, though, we currently have inequity in service provision, which only widens the inequalities that we face. Social care is patchy and broken. Right now, and in recent history, integration authorities have had only one priority: they have been focused on budgets, not people. All the resource and focus has been on reducing the burden of care, reducing the amount of care that is provided and delivered, and delivering efficiencies and cost-saving plans. People have come second.

Reform is needed, but a national care service is not the answer. That is why the Scottish Conservatives have proposed a local care service, which would ensure that support was delivered as close as possible to those who needed it—especially those in rural and island communities.

COSLA said that the plans for the national care service are “an attack on localism”, and it added:

“Councils know their communities and all the evidence suggests that local democratic decision making works.”

Audit Scotland has shared its concerns about the extent of the SNP Government’s plans for reform and the time that it will take to implement them. It is not clear what the costs of the national care service might be. The Fraser of Allander Institute has stated that, until we know the final shape of the national care service, we cannot say much about the funding settlement that will be required.

If we are truly determined to tackle health inequalities, we must surely recognise and celebrate the fact that every community has different needs. We need community services. We hear, time and time again, about person-centred care, but all the evidence that I hear, time and time again, is that people have to adapt to and accept what is available from the service and not the other way around.

One of my constituents was a carer for her husband, but then she suffered a stroke. Both were assessed as requiring a home care package, but limited availability meant that a package was put in place for the wife that allowed only for assistance with dressing and meals; it did not provide enough for a daily shower or for assistance for her husband. After an intervention, her care package was extended to allow for a daily shower, and a package was added to allow time to assist her husband. However, it took an heroic effort by my staff to achieve that.

Another constituent of mine has suffered the consequences of not keeping care close to home. For her over-70s breast screening, Margaret had to travel to Newcastle, where, following the test

and follow-up appointments in the Royal Victoria infirmary, she was diagnosed with breast cancer. How many women over 70 have undiagnosed breast cancer? Margaret would have been one of them if she had not travelled to Newcastle. The SNP Scottish Government’s approach does little to suggest that it is really doing all that it can right now to improve outcomes.

We are not short of examples of the SNP failing to keep care close to home. The SNP has had to be brought kicking and screaming to the realisation that eye care in the Lothian region should be local; the SNP wanted patients to travel to Glasgow. Although the commitment to the new eye pavilion was a welcome U-turn, no real progress has been made since the SNP’s pre-election pledge in 2021, and NHS Lothian is facing a huge and crippling bill to maintain the existing building.

The SNP urgently needs to address the social care crisis that has developed on its watch. Heroic staff continue to be overwhelmed, having gone above and beyond during and after the pandemic. They have not been given the leadership that they need from the SNP Government.

I will speak about some of what we have heard from members during the debate. Dr Gulhane referred to the toxic cocktail of delays and delayed discharge that is contributing to the hampering of a recovery of services. Ms Boyack mentioned that the SNP motion does not acknowledge the scale of delayed discharges that is faced in Edinburgh and the Lothian region. Those issues all existed before the pandemic. I know that, because I was a member of the Edinburgh integration joint board.

I support the motion that was lodged by my colleague Sandesh Gulhane.

16:53

Kevin Stewart: I thank many folks for their valuable contributions in what has been an extremely important debate.

I was hoping to say that it is encouraging to know that we are united across the chamber on the importance of transforming and improving health and social care, but I am not sure whether we are united. We heard from many Tory speakers—including Alexander Stewart and Sue Webber—that now is not the time for any change or reform. Folks out there who are working in health and social care would disagree vehemently and say that now is the time to ensure that we get transformation and improvement in our health and social care system.

We are all clear that health and social care services are a lifeline to many. Our current system is under extreme pressure, especially as a result

of the pandemic. In her speech, Carol Mochan talked about honesty, and we have to be honest about all this, because there is greater demand on the system than ever before, there are people with higher levels of need for acute and community offers than ever before, and recruitment and retention has been challenging over the past couple of years. Let us be honest about all that.

The Government will work hard to address the issues, matching reform and recovery with investment, so let us look at some of the suggestions that have been made about investment and recovery.

Some have rightly referred to the pay rise that the Government has put in place for social care workers. That is a 12.9 per cent pay rise in one year. The Labour Party feels that that does not go far enough. I would like to go further, but to increase care workers' pay to £12 an hour, I would have to find £620 million, and to increase it to £15 an hour, I would have to find £1.75 billion. Even then, I would not have the ability to ensure that the money would get into people's pockets and purses, because of our disparate employment situation. In her speech, Christine Grahame was honest about the fact that we must cost any proposals that we make here and say how we will pay for them.

Mr Rowley and I have had a number of conversations. I always appreciate Mr Rowley's contributions, although they are sometimes hard-hitting and ask the Government for more. I say to Mr Rowley and others who have talked about conditions that the Government and I, in co-operation with COSLA, want to go further on conditions. I will be honest: I will take any help that I can get from any member who persuades our colleagues in COSLA to walk that mile with us and improve conditions for the social care workforce. I know that Mr Rowley will be part of that journey, but my door is open to all.

The same goes for the persuasion to remove charges for non-residential care. The Government wants to do that, but we must do so in partnership with COSLA. I will gladly take any help that members can provide on that front.

Paul O'Kane: On that point, and given his commitment to doing so, when does the minister intend to remove charges for non-residential care? Does he accept that Labour's plans have been costed and presented? They are based on £2.6 billion in Barnett consequential between now and 2024-25. We have outlined that plan several times in this chamber.

Kevin Stewart: Mr O'Kane is spending money that has already been spent, as Labour normally does. There must be a degree of honesty about that from Labour members. If Mr O'Kane wants to

have a conversation with me about funding, I will happily do that, but the first thing I would have to do is to show him that his figures do not add up.

As I said, it is not within my gift to remove charges for non-residential care. I must have the co-operation of other partners and we will continue seeking that. *[Interruption.]*

No, I must make some progress because many other members made valuable contributions to the debate.

There has been a lot of talk about digital today. Dr Gulhane says that we are doing well here in Scotland. I agree that we are, but we are still on a journey to improve and increase digital services.

Gillian Martin talked about how we could provide greater information to patients to let them know about and monitor their progress on waiting lists. I say to Ms Martin and others that NHS 24 is currently developing a website that will be available this summer and will give folks a greater idea of waiting times and their journeys. We have some way to go, but we are at the start of a journey that will be beneficial to patients across the country.

Gillian Mackay mentioned the ALISS website, which is run by the Health and Social Care Alliance Scotland. We will get in touch with the alliance about plans to update that. I understand that there have also been discussions with it about social prescribing, and I can maybe update Ms Mackay on that front as we move on.

I think that we have done well on digital. In some cases, we are at the very beginning of the journey, but the Government takes all of that very seriously.

I turn to care homes. As a Government, we have set out one of the biggest changes to public services in a generation with the creation of the national care service. As we recover and rebuild from Covid, we need to act now and improve both outcomes for the people who use the services and the wellbeing of the staff who work across the sector.

In the debate, we heard a lot about the innovative work that is happening. We want to build on that, scale it up and increase the pace of change. As a country, we have been successful in embedding care and support closer to home and ensuring that individuals have choice about their care through self-directed support. However, we cannot forget care homes. They are people's homes, too, and we know that healthcare for residents can sometimes be fragmented, reactive and poorly co-ordinated. That is why I am delighted to say that we will soon publish a healthcare framework for adult care homes, which will be a bold and ambitious document that

provides a series of recommendations that will aim to transform healthcare for people living in care homes.

We must continue to collaborate across services to ensure that we get unscheduled care priorities right. We need to strengthen those partnerships as we move forward. The existing strands of work under the unscheduled care programme that I have mentioned today—discharge without delay, virtual capacity and the redesign of urgent care—are already delivering improvements and they are pivotal to our approach. We are dedicated to getting this right.

In conclusion, we are determined to explore every possible avenue to improve health and social care by investing in our community healthcare pathways. By doing so, I know that we will improve the support and services that are offered to the people of Scotland. I thank folk for their contributions to the debate. I look forward to working with folk across the chamber as we realise our vision for improved health and social care in Scotland.

Business Motion

The Presiding Officer (Alison Johnstone):

The next item of business is consideration of business motion S6M-04607, in the name of George Adam, on behalf of the Parliamentary Bureau, setting out changes to the business programme.

Motion moved,

That the Parliament agrees to the following revisions to the programme of business for Thursday 26 May 2022—

delete

2.30 pm Parliamentary Bureau Motions

2.30 pm Portfolio Questions:
Constitution, External Affairs and Culture

and insert

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
Constitution, External Affairs and Culture

followed by Ministerial Statement: Accountability for Delivering the National Mission to Reduce Drug Deaths and Improve Lives—[George Adam]

The Presiding Officer: I call Stephen Kerr to speak to and move amendment S6M-04607.1.

17:03

Stephen Kerr (Central Scotland) (Con): Last week, I outlined the reasons why we need the Deputy First Minister to face the consequences of his actions by appearing in the chamber to make a statement and answer questions. The reasons that I gave last week have not changed. Indeed, the Minister for Parliamentary Business has still not been able to explain why he is against the Scottish Government being scrutinised in this way in this instance.

My amendment once again seeks to insert a statement from the Deputy First Minister, which would allow him to clear the air—to outline his role in the ferry contract approval process, instead of hiding from parliamentarians and giving selected quotes to the media. The Parliament is the first line of scrutiny of the Government, not the last.

Yesterday, we saw that the level of control that the Scottish National Party whips exercise over their loyal subjects is quite formidable and I understand that the SNP, including Mr Swinney, will be whipped to oppose the amendment. However, I would—

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney): I will oppose it of my own free will.

Stephen Kerr: I am sure that the Deputy First Minister is right: of his own free will, he chooses

not to respect the Parliament by coming here to make a statement and subjecting himself to the scrutiny of parliamentarians who are elected to do that job in this place.

I invite any Scottish Green MSP to intervene right now and explain to members in the chamber why they do not support the Deputy First Minister outlining his role in the ferries disaster to Parliament rather than to the media. What a surprise—no one is willing to defend their voting position. That is shameful.

To be clear, we will support the final motion regardless, because we support the inclusion of a statement on reducing drug deaths. However, I implore all members of the Scottish Parliament who consider themselves to be parliamentarians to support my amendment so that we can finally get some answers from the Deputy First Minister on the growing scandal of the ferry fiasco.

I move amendment S6M-04607.1, after

“and insert—

2.00 pm	Parliamentary Bureau Motions
2.00 pm	Portfolio Questions: Constitution, External Affairs and Culture”

to insert

“followed by Deputy First Minister’s Statement:
Ferries Contract Approval”.

17:06

The Minister for Parliamentary Business (George Adam): We have discussed this matter a number of times recently. On this occasion, I refer Mr Kerr and other members in the chamber to my intervention during the discussion that we had on the matter on 18 May. I ask them to look at the *Official Report* of that meeting, and to see my answers there.

The Presiding Officer: The question is, that amendment S6M-04607.1, in the name of Stephen Kerr, which seeks to amend motion S6M-04607, in the name of George Adam, on behalf of the Parliamentary Bureau, on changes to the business programme, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division. There will be a short suspension to allow members to access the digital voting system.

17:07

Meeting suspended.

17:11

On resuming—

The Presiding Officer: The question is, that amendment S6M-04607.1 be agreed to. Members should cast their votes now.

The vote is now closed.

Keith Brown (Clackmannanshire and Dunblane) (SNP): On a point of order, Presiding Officer. I was unable to access the app. I would have voted no.

The Presiding Officer: Thank you, Mr Brown. We will ensure that that is recorded.

For

Baker, Claire (Mid Scotland and Fife) (Lab)
Balfour, Jeremy (Lothian) (Con)
Boyack, Sarah (Lothian) (Lab)
Briggs, Miles (Lothian) (Con)
Burnett, Alexander (Aberdeenshire West) (Con)
Cameron, Donald (Highlands and Islands) (Con)
Carson, Finlay (Galloway and West Dumfries) (Con)
Choudhury, Foysol (Lothian) (Lab)
Clark, Katy (West Scotland) (Lab)
Cole-Hamilton, Alex (Edinburgh Western) (LD)
Dowey, Sharon (South Scotland) (Con)
Duncan-Glancy, Pam (Glasgow) (Lab)
Findlay, Russell (West Scotland) (Con)
Fraser, Murdo (Mid Scotland and Fife) (Con)
Gallacher, Meghan (Central Scotland) (Con)
Golden, Maurice (North East Scotland) (Con)
Gosal, Pam (West Scotland) (Con)
Grant, Rhoda (Highlands and Islands) (Lab)
Greene, Jamie (West Scotland) (Con)
Griffin, Mark (Central Scotland) (Lab)
Gulhane, Sandesh (Glasgow) (Con)
Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
Hoy, Craig (South Scotland) (Con)
Johnson, Daniel (Edinburgh Southern) (Lab)
Halcro Johnston, Jamie (Highlands and Islands) (Con)
Kerr, Liam (North East Scotland) (Con)
Kerr, Stephen (Central Scotland) (Con)
Lennon, Monica (Central Scotland) (Lab)
Leonard, Richard (Central Scotland) (Lab)
Lockhart, Dean (Mid Scotland and Fife) (Con)
Lumsden, Douglas (North East Scotland) (Con)
Marra, Michael (North East Scotland) (Lab)
McArthur, Liam (Orkney Islands) (LD)
McNeill, Pauline (Glasgow) (Lab)
Mochan, Carol (South Scotland) (Lab)
Mundell, Oliver (Dumfriesshire) (Con)
O’Kane, Paul (West Scotland) (Lab)
Rennie, Willie (North East Fife) (LD)
Ross, Douglas (Highlands and Islands) (Con)
Rowley, Alex (Mid Scotland and Fife) (Lab)
Sarwar, Anas (Glasgow) (Lab)
Simpson, Graham (Central Scotland) (Con)
Smith, Liz (Mid Scotland and Fife) (Con)
Smyth, Colin (South Scotland) (Lab)
Stewart, Alexander (Mid Scotland and Fife) (Con)
Sweeney, Paul (Glasgow) (Lab)
Villalba, Mercedes (North East Scotland) (Lab)
Webber, Sue (Lothian) (Con)

Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

Against

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Greer, Ross (West Scotland) (Green)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 Minto, Jenni (Argyll and Bute) (SNP)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 Regan, Ash (Edinburgh Eastern) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Swinney, John (Perthshire North) (SNP)

Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the division on amendment S6M-04607.1, in the name of Stephen Kerr, is: For 53, Against 68, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that motion S6M-04607, in the name of George Adam, on behalf of the Parliamentary Bureau, on changes to the business programme, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

The vote is now closed.

Sharon Dowe (South Scotland) (Con): On a point of order, Presiding Officer. I would have voted yes.

The Presiding Officer: Thank you, Ms Dowe. We will ensure that that is recorded.

Sue Webber (Lothian) (Con): On a point of order, Presiding Officer. My app was not working. I would have voted yes.

The Presiding Officer: Thank you, Ms Webber. We will ensure that that is recorded.

Daniel Johnson (Edinburgh Southern) (Lab): On a point of order, Presiding Officer. The app did not work. I would have voted no.

The Presiding Officer: Thank you, Mr Johnson. We will ensure that that is recorded.

Keith Brown: On a point of order, Presiding Officer. I would have voted yes on this occasion.

The Presiding Officer: Thank you, Mr Brown. We will ensure that that is recorded.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): On a point of order, Presiding Officer. I would have voted yes.

The Presiding Officer: Thank you, Ms Hamilton. We will ensure that that is recorded.

For

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Balfour, Jeremy (Lothian) (Con)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Briggs, Miles (Lothian) (Con)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)

Burgess, Ariane (Highlands and Islands) (Green)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dowey, Sharon (South Scotland) (Con)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 Findlay, Russell (West Scotland) (Con)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and
 Lauderdale) (SNP)
 Greene, Jamie (West Scotland) (Con)
 Greer, Ross (West Scotland) (Green)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire)
 (Con)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hoy, Craig (South Scotland) (Con)
 Hyslop, Fiona (Linlithgow) (SNP)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse)
 (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 Minto, Jenni (Argyll and Bute) (SNP)
 Nicoll, Audrey (Aberdeen South and North Kincardine)
 (SNP)
 Regan, Ash (Edinburgh Eastern) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Ross, Douglas (Highlands and Islands) (Con)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Simpson, Graham (Central Scotland) (Con)

Slater, Lorna (Lothian) (Green)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whitham, Elena (Carrick, Cumnock and Doon Valley)
 (SNP)
 Whittle, Brian (South Scotland) (Con)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Baker, Claire (Mid Scotland and Fife) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Choudhury, Foyso (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Griffin, Mark (Central Scotland) (Lab)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Marra, Michael (North East Scotland) (Lab)
 McArthur, Liam (Orkney Islands) (LD)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 Mundell, Oliver (Dumfriesshire) (Con)
 O'Kane, Paul (West Scotland) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)
 Wishart, Beatrice (Shetland Islands) (LD)

The Presiding Officer: The result of the division on motion S6M-04607, in the name of George Adam, is: For 96, Against 24, Abstentions 0.

Motion agreed to,

That the Parliament agrees to the following revisions to the programme of business for Thursday 26 May 2022—

delete

2.30 pm Parliamentary Bureau Motions

2.30 pm Portfolio Questions:
 Constitution, External Affairs and Culture

and insert

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
 Constitution, External Affairs and Culture

followed by Ministerial Statement: Accountability for
 Delivering the National Mission to
 Reduce Drug Deaths and Improve Lives

Decision Time

17:17

The Presiding Officer (Alison Johnstone):

There are three questions to be put as a result of today's business. I remind members that, if amendment S6M-04567.2, in the name of Sandesh Gulhane, is agreed to, amendment S6M-04567.1, in the name of Paul O'Kane, will fall.

The first question is, that amendment S6M-04567.2, in the name of Sandesh Gulhane, which seeks to amend motion S6M-04567, in the name of Kevin Stewart, on keeping care close to home and improving outcomes, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Balfour, Jeremy (Lothian) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Dowey, Sharon (South Scotland) (Con)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Hoy, Craig (South Scotland) (Con)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 McArthur, Liam (Orkney Islands) (LD)
 Mundell, Oliver (Dumfriesshire) (Con)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

Against

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Boyack, Sarah (Lothian) (Lab)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)

Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Choudhury, Foyso (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greer, Ross (West Scotland) (Green)
 Griffin, Mark (Central Scotland) (Lab)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Marra, Michael (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Minto, Jenni (Argyll and Bute) (SNP)
 Mochan, Carol (South Scotland) (Lab)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 O'Kane, Paul (West Scotland) (Lab)
 Regan, Ash (Edinburgh Eastern) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Sarwar, Anas (Glasgow) (Lab)
 Slater, Lorna (Lothian) (Green)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sweeney, Paul (Glasgow) (Lab)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)

Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the division on S6M-04567.2, in the name of Sandesh Gulhane, is: For 33, Against 86, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that amendment S6M-04567.1, in the name of Paul O'Kane, which seeks to amend motion S6M-04567, in the name of Kevin Stewart, on keeping care close to home and improving outcomes, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

The vote is now closed.

Keith Brown: On a point of order, Presiding Officer, I could not access my app. I would have voted no.

The Presiding Officer: Thank you, Mr Brown. We will ensure that that is recorded.

Michael Marra (North East Scotland) (Lab): On a point of order, Presiding Officer, I would have voted yes.

The Presiding Officer: Thank you, Mr Marra. We will ensure that that is recorded.

For

Baker, Claire (Mid Scotland and Fife) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Choudhury, Foyso (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Griffin, Mark (Central Scotland) (Lab)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Marra, Michael (North East Scotland) (Lab)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 O'Kane, Paul (West Scotland) (Lab)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)

Against

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Balfour, Jeremy (Lothian) (Con)

Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Briggs, Miles (Lothian) (Con)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Cameron, Donald (Highlands and Islands) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dowey, Sharon (South Scotland) (Con)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 Findlay, Russell (West Scotland) (Con)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Greene, Jamie (West Scotland) (Con)
 Greer, Ross (West Scotland) (Green)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hoy, Craig (South Scotland) (Con)
 Hyslop, Fiona (Linlithgow) (SNP)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 Minto, Jenni (Argyll and Bute) (SNP)
 Mundell, Oliver (Dumfriesshire) (Con)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 Regan, Ash (Edinburgh Eastern) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)

Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Ross, Douglas (Highlands and Islands) (Con)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Simpson, Graham (Central Scotland) (Con)
 Slater, Lorna (Lothian) (Green)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Whittle, Brian (South Scotland) (Con)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Abstentions

Cole-Hamilton, Alex (Edinburgh Western) (LD)
 McArthur, Liam (Orkney Islands) (LD)
 Wishart, Beatrice (Shetland Islands) (LD)

The Presiding Officer: The result of the division on amendment S6M-04567.1, in the name of Paul O'Kane, is: For 21, Against 97, Abstentions 3.

Amendment disagreed to.

The Presiding Officer: The final question is, that motion S6M-04567, in the name of Kevin Stewart, on keeping care close to home and improving outcomes, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

The vote is now closed.

Keith Brown: On a point of order, Presiding Officer. I would have voted yes this time.

The Presiding Officer: Thank you, Mr Brown. We will ensure that that is recorded.

Maggie Chapman (North East Scotland) (Green): On a point of order, Presiding Officer. I would have voted yes.

The Presiding Officer: Thank you, Ms Chapman. We will ensure that that is recorded.

Ruth Maguire (Cunninghame South) (SNP): On a point of order. I would have voted yes.

The Presiding Officer: Thank you, Ms Maguire. We will ensure that that is recorded.

Anas Sarwar (Glasgow) (Lab): On a point of order, Presiding Officer. My app did not refresh. I would have voted no.

The Presiding Officer: Thank you, Mr Sarwar. We will ensure that that is recorded.

For

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Greer, Ross (West Scotland) (Green)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 Minto, Jenni (Argyll and Bute) (SNP)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 Regan, Ash (Edinburgh Eastern) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)

Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley)
 (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Baker, Claire (Mid Scotland and Fife) (Lab)
 Balfour, Jeremy (Lothian) (Con)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Choudhury, Foysol (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Dowey, Sharon (South Scotland) (Con)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Griffin, Mark (Central Scotland) (Lab)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire)
 (Con)
 Hoy, Craig (South Scotland) (Con)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Marra, Michael (North East Scotland) (Lab)
 McArthur, Liam (Orkney Islands) (LD)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 Mundell, Oliver (Dumfriesshire) (Con)
 O’Kane, Paul (West Scotland) (Lab)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

The Presiding Officer: The result of the division on motion S6M-04567, in the name of Kevin Stewart, is: For 68, Against 54, Abstentions 0.

Motion agreed to,

That the Parliament thanks Scotland’s NHS and social care staff for going above and beyond during the COVID-19 pandemic; welcomes the focus on stabilising and

recovering healthcare through investment and reform; notes the efforts to ensure that more patients receive high-quality person-centred care and treatment in the right place, at the right time; supports the focus on building and enhancing virtual capacity to support a sustainable future providing alternatives to hospital and improving patient experience; recognises the recent progress on the roll-out of hospital and home and community respiratory services, for example, and agrees with the commitment to upscale these services in the community, utilising technology and digital opportunities to support improvements.

The Presiding Officer: That concludes decision time.

R B Cunninghame Graham

The Deputy Presiding Officer (Liam McArthur): The final item of business is a members' business debate on motion S6M-04154, in the name of Clare Adamson, on "R. B. Cunninghame Graham and Scotland: Party, Prose and Political Aesthetic". The debate will be concluded without any questions being put. I invite any member who wishes to participate in the debate to press their request-to-speak button now.

Motion debated,

That the Parliament welcomes the launch of a new book examining the life and legacy of R.B. Cunninghame Graham; notes that the book, *R.B. Cunninghame Graham and Scotland: Party, Prose, and Political Aesthetic*, authored by the political scholar and history PhD, Dr Lachlan Munro, and published by Edinburgh University Press, will be launched at The Black Bull Inn, Gartmore, on 6 May 2022; acknowledges that R.B. Cunninghame Graham was one of the most influential Scottish politicians of the late 19th and early 20th centuries, described by Dr Munro as "the most contentious, controversial, and contradictory Scot of his generation"; understands that Cunninghame Graham, born in 1852, was a radical political campaigner, who founded the Scottish Labour Party with Keir Hardie in 1888, and was later instrumental in founding The National Party of Scotland in 1928, a predecessor of the Scottish National Party (SNP), becoming honorary president of the SNP; further understands that Cunninghame Graham, also a writer, journalist and adventurer, was elected as the Liberal MP for North West Lanarkshire but, after witnessing the poverty and destitution among the mining community, rebelled against his own party; notes that he was known as "The Miners' MP" and was an outspoken anti-racist and anti-imperialist who, at the age of 62, volunteered for service in the First World War, and was awarded the title of Colonel; recognises that, following his death in Buenos Aires in 1936, his body lay in state, and his coffin, followed by thousands of people, was put aboard the ship he planned to sail home on, and that he was buried in the ancient priory on Inchmahome where his grave can still be seen; commends Dr Munro's efforts in highlighting Cunninghame Graham's extraordinary and controversial life, and wishes him every success with the book launch.

17:26

Clare Adamson (Motherwell and Wishaw) (SNP): I thank all my colleagues who supported the debate, those who are speaking and those who have stayed to listen this evening.

I welcome, along with the man himself, friends and colleagues of Dr Lachlan Munro, members of the Cunninghame Graham family and members of the Cunninghame Graham Society, of which I am a founding member, as well as our dear former colleague Rob Gibson, who led the last members' debate in tribute to Cunninghame Graham in 2012. This week marks 170 years since Cunninghame Graham's birth.

Dr Munro's fabulous book, with its iconic new painting of Cunninghame Graham on the front,

with the mines of Lanarkshire in the background, is entitled "R.B. Cunninghame Graham and Scotland: Party, Prose and Political Aesthetic". It is a labour of love and I was honoured to attend its launch in the village of Gartmore a few short weeks ago.

Now a duly elected Labour councillor, Gerry McGarvey, is also with us this evening in the gallery. He hosted and launched the event in a packed village hall, livestreaming to viewers in Argentina and Peru. In his review of the book in the *Scottish Left Review*, Gerry McGarvey captures the questions that this book seeks to answer. R B Cunninghame Graham is, after all, an enigma and trying to define his life is like to pin down jelly as many aspects of it were contradictions.

Cunninghame Graham's own memorial at Castlehill in Dumbarton reads:

"Famous Author—Traveller and Horseman—Patriotic Scot and Citizen of the World ... He Was a Master of Life—A King Among Men".

He died in Argentina. Dr Munro describes him as

"the most contentious, controversial and contradictory Scot of his generation."

Of his contemporaries, G K Chesterton proclaimed Cunninghame Graham to be the "Prince of Preface Writers" and fearlessly declared in his autobiography that although Cunninghame Graham would never be allowed to be Prime Minister, he instead

"achieved the adventure of being Cunninghame Graham", which George Bernard Shaw in turn described as

"an achievement so fantastic that it would never be believed in a romance."

Why is he is so little remembered today? Hugh MacDiarmid described Graham as

"potentially the greatest Scotsman of his generation"

and in 1927, the *Sunday Post* remarked:

"There are few men nowadays so well known as Mr R. B. Cunninghame Graham."

I would argue that his influence has a reach that will have touched many Scots even without them realising. Film buffs might have seen the Oscar-winning period drama "The Mission", which tells the true tale of 18th century Jesuit missionaries who died defending Guarani Indians from Portuguese slavery in the South American jungle.

Alasdair Allan (Na h-Eileanan an Iar) (SNP): The member has outlined many of Cunninghame Graham's fine qualities. I am sure that she is coming to this, but will she also acknowledge that he is remembered, rightly, as a great writer in his own right and that he, in his short stories, has

captured many people's imaginations around the world?

Clare Adamson: I thank Dr Allan for that intervention and, yes, indeed I will reflect on his writing in my speech this evening.

The film was inspired by Cunninghame Graham's work and travels in South America. Also, visitors to Kelvingrove art gallery may have seen John Lavery's exceptional portrait of Cunninghame Graham in a typically flamboyant pose or seen the bust of him in Aberdeen art gallery, such was his image, influence and notoriety among the greatest artists and writers of his time. Image was very important to this tall, striking, red-haired figure who I believe it is safe to say had quite a conceit of himself.

Visitors to Buenos Aires may stroll down a street named after him. Indeed, when Cunninghame Graham died, he lay in state in Casa del Teatro and received a country-wide tribute led by the president of the republic before his body was shipped home to be buried beside his beloved wife in the ruined Augustine priory on the island of Inchmahome in the Lake of Menteith. Thousands lined the streets of Buenos Aires to accompany his body on its way to set sail home.

At school, some people might have studied "The Gold Fish" and I am so glad that Dr Allan intervened because I have with me one of my favourite books "The Devil and the Giro", a former school text, which was collated by Carl MacDougall. It was after my time at school but nonetheless, it might have influenced teachers such as my husband John, who is in the gallery, to have taught "The Gold Fish". When examining his bravado, adventure and romance, it is very easy to forget the sheer beauty of his writing. If you will indulge me, Presiding Officer, I am going to read the introductory paragraph of "The Gold Fish":

"Outside the little straw-thatched café in a small courtyard trellised with vines, before a miniature table painted in red and blue, and upon which stood a domeshaped pewter teapot and a painted glass half filled with mint, sat Amarabat, resting and smoking hemp. He was of those whom Allah in his mercy (or because man in the Blad-Allah has made no railways) has ordained to run. Set upon the road, his shoes pulled up, his waistband tightened, in his hand a staff, a palm-leaf wallet at his back, and in it bread, some hemp, a match or two (known to him as el spiritus), and a letter to take anywhere, crossing the plains, fording the streams, struggling along the mountain-paths, sleeping but fitfully, a burning rope steeped in saltpetre fastened to his foot, he trotted day and night—untiring as a camel, faithful as a dog."

It is a fascinating story and I hope people will turn to it and read it after this debate.

Cunninghame Graham was elected as the Liberal member of Parliament for North West Lanarkshire, the old Monklands area of the modern council, and he was the first self-declared

socialist MP. As a key friend and colleague of Keir Hardie over many years, they became the co-founders of the independent Labour Party, which became the modern-day Labour Party. When their founding principle of home rule did not progress quickly enough for him, in 1928 Cunninghame Graham founded the National Party of Scotland and, as it evolved, he became the first Scottish National Party president in 1934.

With all his political and literary fame and influence, why do we not acknowledge him as we do Byron or Shaw or Conrad? That is the enigma, the contradiction. An aristocrat from wealth and privilege, he became "The Miners' MP", championing the eight-hour day and banning child labour. A justice of the peace, he was arrested and jailed for causing a riot in Trafalgar Square protesting against unemployment. An estate and land owner, he championed the cause of crofters and land reform. An adventurer, traveller and rebel, he enrolled in the army in the first world war when he was in his 60s.

Dr Munro's labour of love tells a story of love: the story of Don Roberto's love of horses, which is a thread that ran through his childhood, his many travels and adventures, to his task of securing horses for the war effort; the story of love for his bride Gabriela; and the story of Don Roberto's love for the dignity of the working man and the poor in any society or culture. It is also, of course, about his love for the gauchos who he worked with in Argentina, earning him the moniker Don Roberto. It is about his love of the anti-slavery, anti-imperialist, anti-racist causes he championed vehemently. I have mentioned Guarani Indians, but also championed the causes of the Sioux, the Turks, the Persians and the Moors. He loved humanity and he recognised and embraced the values of cultures that different from western norms. At home, he argued for the abolition of the House of Lords, for universal suffrage, for nationalisation of land, mines and other industries and for free school meals.

Those concepts were perceived to be radical at the time but there is no doubt that he would rage at us because of the lack of progress in some of those areas to this day. His last piece of writing was in praise of a Jewish lady who had campaigned for a war memorial for the horses that were injured and killed in the war.

I often think of his friendship, admiration and curiosity about the culture of others as being much like Hamish Henderson's interest in the travelling communities of Scotland. They both had a humanity that extended across cultural difference, and they both reached out a hand of friendship. He was undoubtedly an enigma and a frequent contradiction, but perhaps he was one of the greatest humanitarians of our recent history.

Hamish Henderson posed a question a few years after his death—“Who remembers Cunninghame Graham?” I urge everyone in the chamber who has followed the debate to remember him by reading about the man in books like the one that Dr Munro has launched recently, by reading Don Roberto’s incredible volumes of collected stories, and listening to the BBC series about him from Billy Kay. Be part of the adventure that is Cunninghame Graham.

The Deputy Presiding Officer: Thank you, Ms Adamson, and congratulations on the legitimate use of a prop during a speech there.

17:37

Jenni Minto (Argyll and Bute) (SNP): I congratulate Clare Adamson on securing this debate on one the most colourful and patriotic of Scots.

I also have my husband to thank for my knowledge about Don Roberto, and I am going to unashamedly plug the programme that he made for BBC Scotland called the “The Adventures of Don Roberto”. If you visited my office here in Parliament, alongside paintings and artwork depicting the beauty of my Argyll and Bute constituency, you would find a Stewart Bremner indy print of Robert Bontine Cunninghame Graham.

Born on the eve of the Crimean war, he died as Europe lurched towards fascism. His 83 years were crammed with enough adventure and endeavour for several lifetimes. For a start he was a traveller. The wild gaucho horsemen of Argentine pampas where he lived when young named him Don Roberto, a name that stuck with him all his life. In Texas, he witnessed the last of the old wild west, surviving encounters with gunslingers and hostile Apaches. Even though he was Harrow educated, Cunninghame Graham was a lifelong radical and outspoken champion of the underdog, whether they were Native American Indians, Scottish miners, women, Zulus or English ironworkers. He was a true Scottish internationalist.

As Clare Adamson has said, he was elected to Westminster as a home rule Liberal—home rule for Ireland that is—but he constantly espoused more radical policies in the House. He was the first MP to declare himself a socialist, and he was the first MP to swear in Parliament. As Clare Adamson said, while an MP he was badly beaten up and then arrested during an unemployment demonstration in Trafalgar Square, spending six weeks in Pentonville Prison. In 1888, he and Keir Hardie formed the Scottish Labour Party, while he continued to argue for Scottish independence.

Cunninghame Graham was handsome and debonair. Walking in Hyde Park one day he met George Bernard Shaw and Shaw’s mother. He and Shaw greeted each other and as they went their separate ways Shaw’s mother asked her son who it was, they had just met. “That was Cunninghame Graham”, Shaw told his mother. “Nonsense”, she replied. “Cunninghame Graham is a socialist. That man was a gentleman”.

After six years as an MP, Cunninghame Graham became disillusioned with Westminster, believing that nothing could be done for Scotland or for the English poor there. He described it as an “asylum for incapables”. In 1894, he refused to stand for the Labour Party in Aberdeen. He criticised the party in these words:

“The same vices, foibles and failings which it has taken the Whigs and Tories many generations to become perfect in, the Labourists and Socialists have brought to perfection, and with apparent ease, in six years.”

Yet his own reforming zeal was undiminished. He wrote more than 30 books and a torrent of passionate and radical journalism, and he had not given up on party politics, as he went on to become the joint president of the SNP when it was created in 1934. He remained a radical and progressive all his life, and wrote:

“Without Nationalism we cannot have any true Internationalism.”

Cunninghame Graham, as we have heard, travelled widely, and thought deeply. He was friends with many of the great figures of his time: the aforementioned Keir Hardie, Bernard Shaw, Joseph Conrad, Oscar Wilde and, my favourite, Buffalo Bill who he met in the Glasgow Art Club.

Robert Bontine Cunninghame Graham lies buried on the island of Inchmahome on the Lake of Menteith. A year after his death, a memorial stone to him was unveiled on land that he had given to the National Trust for Scotland near Dumbarton. It reads:

“Famous Author—Traveller and Horseman—Patriotic Scot and Citizen of the World ... He Was a Master of Life—A King Among Men”.

I want to end by returning to the print of Robert Bontine Cunninghame Graham in my office. It is emblazoned with Cunninghame Graham’s own observation, and one that I live and breathe:

“So long as my strength lasts, I shall continue to advocate for an independent Scotland.”

17:41

Stephen Kerr (Central Scotland) (Con): I congratulate Clare Adamson on bringing the motion to the chamber.

The fact that I—a Scottish Conservative and unionist—have risen today to pay tribute to a man

such as Robert Bontine Cunninghame Graham is perhaps a tad ironic to some. He was a radical Liberal and a founder of the Scottish Labour Party, and he went on to help to found the Scottish National Party. He spoke about

“The wiles of invertebrate tory democracy”

at his selection meeting in Airdrie, and he spoke regularly about his republicanism and his socialism. He spoke about, and gave support to, causes that, frankly, I find quite disagreeable—as many in the chamber do. However, in looking at his writings, we can see that he did so with an eloquence that perhaps all members could learn from and which we would probably be hard pushed to emulate.

Graham is really not a natural fit for someone of my political persuasion or belief. [*Interruption.*] I thank the cabinet secretary for his endorsement of my sentiment. For once, I am understating. However, Graham was also a man very much of his time. His writings—especially laterally—were peppered with words, phrases and views that are very much out of keeping with how we would expect public figures to behave today.

In my view, Graham is to be commended and held up for his role as a defender of freedom of speech. He spoke vigorously of the need for men and women to be able to express their viewpoint without fear of oppression from the state or the excoriation of others. He certainly did that and, at one point—up to the outbreak of the first world war—he was thought of as a man who had delivered more speeches than any other man living. Many members are striving for that accolade.

It is a mark of the character of the man that he spoke vociferously on the issue of peace, how we should avoid war and, indeed, how those who were seeking war were guilty of acting solely with their self-interest and profiteering in mind. However, in December 1914, which was a few months after the outbreak of the first world war, he was despatched enthusiastically to Montevideo to purchase horses for the War Office and the war effort. His relationship with the horse breeders of South America was to be of great use to this country during the great war.

Which of us is willing to put aside our beliefs and convictions when asked to help to defend our country? The difference is that Graham was able to separate the men who ran the country from the country itself and the people of the country. The concept that the personality of a country's leader is different from the country itself might often be too alien to many of us. As in Britannia or Caledonia, we have personified our nations too much in leaders. The idea that one person can be representative of an entire country eliminates the

dissenting view or the nuanced opinion. National leaders have grown up like Tweedledum and Tweedledee, to become bogeymen or national heroes to too many people.

For men such as Cunninghame Graham, it was the debate about the substance of the issue that was important. The people were wrong, venal and invertebrate, but the need for reform was far more important to him than the beating of the other man. He knew that reform could be achieved only by engaging with the substance of issues in an intelligent and capable way.

The new book is to be welcomed. It highlights R B Cunninghame Graham not least for his championing of freedom of speech. The book is worth while, so I unstintingly support the motion.

The Deputy Presiding Officer: I think that our former colleague Stewart Stevenson would have had something to say about Cunninghame Graham's claim to have given the greatest number of speeches.

I call Kenneth Grahame.

17:46

Kenneth Gibson (Cunninghame North) (SNP): Am I going to talk about “The Wind in the Willows”?

The Deputy Presiding Officer: It is the chair's right to rename.

Kenneth Gibson has up to four minutes.

Kenneth Gibson: I do not think that R B Cunninghame Graham will have counted his speeches in quite the way that Stewart Stevenson did.

It gives me great pleasure to speak in this debate on the life of the Scottish politician, orator, writer, patriot and adventurer Robert Bontine Cunninghame Graham. I congratulate my colleague Clare Adamson on securing the debate and on her excellent speech. The two speeches that followed that were also excellent.

Cunninghame Graham's very full life began in London in 1852 and ended in Buenos Aires 84 years later. He was educated at Harrow and in Brussels, and he grew up privileged on his family's estate. Gaucho, gold prospector, friend of Buffalo Bill and fencing instructor in Mexico, he helped to found the Labour Party and, 46 years later, he became the first president of the newly formed SNP in 1934. As we have heard, he was elected as a Liberal in 1886 for North West Lanarkshire. He was the first socialist at Westminster, and he was also the first MP to be suspended from the House of Commons for swearing—albeit mildly, by today's standards. However, the Presiding Officer

may be somewhat shocked by the word that he used, which I shall not repeat.

Cunninghame Graham believed in universal suffrage and that Governments should help to deliver equality of opportunity by providing services such as free school meals. Even in his early years, he argued that Scotland should be able to run its own affairs. He famously quipped in the 1880s that he would prefer Scotland to have its own

“national parliament with the pleasure of knowing that the taxes were wasted in Edinburgh instead of London.”

It is encouraging to see that some Labour colleagues are willing to recognise a man who has effectively been removed from the Labour pantheon for the crime of changing his mind about what is best for Scotland and our place in the world. However, one wonders what would have transpired if Robert Cunninghame Graham had not recruited and encouraged Keir Hardie to help to found and then lead the Labour Party.

Cunninghame Graham was buried at Inchmahome priory. The monument to him, which was built in 1937, includes the epitaph:

“Famous Author—Traveller and Horseman—Patriotic Scot and Citizen of the World—As Betokened by the Stones above. Died in Argentina, interred in Inchmahome—He Was a Master of Life—A King Among Men”.

However, when he was alive, he was convinced that capital should be distributed among classes as evenly as possible, that miners should be able to become MPs, and that that wholly anachronistic and unelected body, the House of Lords, should be abolished. In 1892, Cunninghame Graham stood in Camlachie as an Independent Labour candidate and lost, thus ending his time at Westminster.

I find it fascinating how ubiquitous he was in the political spectrum and on the planet. He seems to have been in so many places, met so many people, and done so much in just one lifetime. Thinking about him begs the question: how much can one person do in one lifespan of 84 years? The political parties that were set in motion by Cunninghame Graham mean that it is impossible to overstate the impact that he has had on Scottish and United Kingdom politics. He was an early vice-president of the Scottish Home Rule Association in 1886, and he was also president of the new Scottish Home Rule Association in 1927.

On his monument, there is portrait of his famous horse Pampa, which was an Argentine mustang that he rescued from pulling trams in Glasgow and rode for some 20 years. It has the inscription:

“To Pampa my black Argentine who I rode for twenty years without a fall. May the earth lie light upon him as lightly as he trod upon its face ... Don Roberto.”

One of Pampa's hooves is buried beneath the monument, which was subsequently moved to the village of Gartmore, where, until 1900, Gartmore house had been the home of the Cunninghame Graham family. The monument is currently in the care of the National Trust for Scotland. It was restored a decade ago in time for the 160th anniversary of Cunninghame Graham's birth.

Not everything that Cunninghame Graham wished for Scotland has played out just yet. However, I will conclude by highlighting something that has.

Cunninghame Graham understood early that the so-called class that a person was born into should not impede their ability to participate in public decision making as an elector or an elected representative. Although that is still a factor—particularly at Westminster—if Robert Bontine Cunninghame Graham were in the gallery today, he would see a Scottish Parliament filled with representatives of every socioeconomic background, a great diversity of skills and character, and the lived experience that enriches our representation. He would also see in our Parliament many women and ethnic minority parliamentarians—there were none in his day. The work is not finished, but I believe that he would be proud to see how far we have come.

17:51

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP): I congratulate my colleague on bringing this motion to the Scottish Parliament and the passion with which she delivered her speech, and I welcome members of the Cunninghame Graham Society and of the family.

Unashamedly—and not just because of the fundamental contribution that he made to the cause of Scottish independence, his colourful and, indeed flamboyant, life, and his brave and reforming zeal—I claim Cunninghame Graham as a distant relative through our shared surname. I forgive the missing E, as I am sure that we all came from the same stock.

What a life—well worthy of the Hollywood touch or, at the very least, a documentary on television. With his exotic family background, his exploits in Argentina, his meeting with Buffalo Bill—I do not know whether there is a picture somewhere, but if there is, I want to see it—his fencing, his horse riding and so on, you would not have anticipated that he was a man who would convert from Scottish Labour, which he founded with Keir Hardie, to the cause of Scottish independence, which has been close to my own heart these past 50 years.

As far back as 1886, Cunninghame Graham helped to establish the Scottish Home Rule Association. On one occasion in the House of Commons, he joked that he wanted a

“national parliament with the pleasure of knowing that the taxes were wasted in Edinburgh instead of London.”

Yes, let us make our own mistakes. I am with him on that. We cannot do worse than the current UK Government—sorry about that, Mr Kerr. Cunninghame Graham’s support for independence for Scotland led to him being the first honorary president of the Scottish National Party in 1934. He was decades ahead of his time, not just in the independence cause but in his determination and commitment to social justice.

His main concerns in the House of Commons were the plight of the unemployed and the preservation of civil liberties. He did more than just talk—he walked the walk. He attended the protest demonstration in Trafalgar Square on 13 November 1887 that was broken up by the police and became known as bloody Sunday. He was badly beaten during his arrest and taken to Bow Street police station. He was found guilty for his involvement in the demonstration, sentenced to six weeks’ imprisonment and sent to Pentonville prison. What a man.

After his release, he continued his campaign to improve the rights of working people and to curb their economic exploitation. He was suspended from the House of Commons—I am beginning to like this man more and more—in December 1880 for protesting about the working conditions of chain makers. His response to the Speaker of the House was rebuked for his use of the word “damn” and his saying, “I never withdraw”, and it was later used by George Bernard Shaw in “Arms and the Man”. This man was too radical even for the French, and that is saying something. After making a speech at Calais, he was actually shut out of going back to France ever again.

He was anti-imperialist and he despised British jingoism. I share so many values with him: the abolition of the House of the Lords—every box ticked—universal suffrage; the nationalisation of land, mines and other industries; free school meals; and republicanism. There we go. I think that he is great. What a man. I am so glad that he lived well into his active 80s. If one were to ask me who I would like to meet from the past, well, he is right at the top.

As others have done, we must ask ourselves: where does he feature in standard Scottish history books? How many of our schoolchildren, or, indeed, Scottish people, know of this extraordinary, difficult and extremely exciting man? If they do not, why not? I commend Dr

Munro for his biography. Let us hope that it is on some people’s reading lists.

Again, I congratulate the member and Dr Munro. It has been a pleasure to take part in the debate and I have enjoyed every minute.

17:55

Richard Leonard (Central Scotland) (Lab): I thank Clare Adamson for securing this debate to coincide with the 170th anniversary of the birth of Robert Bontine Cunninghame Graham. As we mark the life of R B Cunninghame Graham, we do so not to look wistfully backwards but to find hope and inspiration for today and for the future. Here was a campaigner who championed the gauchos of South America, the Native Indians of North America, the crofters of the Highlands and Islands and the miners of the central lowlands in their battles for justice.

I am pleased that we are joined in the public gallery by my very old comrade and very new Labour councillor, Gerry McGarvey; Lachie Munro; family descendants; and others appreciative of Cunninghame Graham’s political, literary and historical contribution. As Lachie Munro writes in his important new book, “R. B. Cunninghame Graham and Scotland: Party, Prose and Political Aesthetic”,

“Although a renowned speechmaker and literary polemicist, he was fundamentally a man of action.”

As an MP, Cunninghame Graham eschewed Parliament as being, in his words, “the national gasworks”. He travelled around the country addressing miners in struggle, agitating for the cause of socialism at factory gates and railing against injustice at public meetings in town and village halls. On 13 November 1887, by which point he was the member of Parliament for North West Lanarkshire, he was beaten up by the police before being arrested at an unemployment demonstration in Trafalgar Square. In what became known as “bloody Sunday”, along with the radical trade unionist John Burns, he was charged with unlawful assembly and sentenced to six weeks hard labour in Pentonville.

By then, Cunninghame Graham had joined forces with William Morris—who E P Thompson later declared to be “England’s greatest Communist intellectual”—along with his fellow Socialist Leaguers Eleanor Marx, Edward Aveling and Peter Kropotkin, as Morris preached his gospel that it was the business of socialists to make socialists.

With James Keir Hardie as secretary, Cunninghame Graham became the honorary president of the Scottish Labour Party in 1888. As the Labour candidate for Camlachie at the 1892 general election, he abandoned his own campaign

in the final week to help secure Keir Hardie's historic election as the first ever Labour MP. He observed poignantly of the impoverished working-class constituency of West Ham South, which Hardie won, that there was

"On one side, lines of endless docks and on the other, lines of endless misery".

Many years later, Hardie's son-in-law, Emrys Hughes, told of an unruly public meeting in Camlachie at which Cunninghame Graham produced a dummy six-shooter pistol that he had found lying backstage, which he brandished to quieten a riotous audience baying for Irish home rule. It worked.

Exactly 40 years on from establishing the Scottish Labour Party, and with a huge body of literature and essays behind him, Cunninghame Graham helped found the National Party of Scotland and, two years before his death, he became the president of the new Scottish National Party, but he was no narrow nationalist. As the monument in the village of Gartmore spells out, he truly was a citizen of the world; a real cosmopolitan—born in London, died in Buenos Aires. Like many of those pioneers, he made the case and fought for transformational change, knowing full well that he would almost certainly not live to see it but believing that it was right. Lachie Munro describes this rare spirit as

"an eloquent, disquieted, principled, fervid moralist and contrarian".

Here was an aristocrat who wanted a social revolution. Here was a man who took part in anti-war meetings with Keir Hardie but then joined up. Here was a member of the landed classes who stood on a platform of land nationalisation. It is right that this Scottish Parliament honours him and that we remember him, his place in our history, his place in our culture, and the enduring relevance of his life, ideas, and causes to this Parliament and to all of us who are privileged to be elected to it.

The Deputy Presiding Officer: Thank you very much indeed, Mr Leonard. I am sorry to hear that Councillor McGarvey's dreams of achieving elected office in Orkney appear to have been extinguished, but I congratulate him nonetheless.

18:00

Paul McLennan (East Lothian) (SNP): I, too, thank Clare Adamson for bringing forward the motion. It is a privilege to speak in the debate.

As we have heard, Robert Bontine Cunninghame Graham was born 170 years ago today, on 24 May 1852, and he died in March 1936. We have also heard that he was a Liberal Party member of Parliament, the first ever socialist member of the Parliament of the UK, a founder

and the first president of the Scottish Labour Party, a founder of the National Party of Scotland and, of course, the first president of the Scottish National Party in 1934.

Cunninghame Graham's background is incredible. He came from a family with a strong military background. His father, Major William Bontine, was of the Renfrew militia and his mother was the daughter of an admiral and a Spanish noblewoman. He was well educated at Harrow public school in England and finished his education in Brussels in Belgium. He moved to Argentina, as we have heard, to make his fortune cattle ranching and he loved adventure, travelling to Morocco, Spain, Texas and Mexico City, among other places.

In 1883, he returned to the UK and became interested in politics and converted to socialism. As we have heard, he attended socialist meetings, which is where he heard and met Keir Hardie. He began to speak at public meetings. Although a socialist, in the 1886 general election he stood as a Liberal Party candidate for North West Lanarkshire. His election programme was extremely radical and called for policies such as the abolition of the House of Lords, free school meals, Scottish home rule and the establishment of an eight-hour working day.

He was the first MP ever to be suspended from the House of Commons for swearing, and I am not going to mention the word. His main concerns in the House of Commons were the plight of the unemployed and the preservation of civil liberties. He complained about attempts in 1886 and 1887 by the police to prevent public meetings and free speech. As we have heard, he was found guilty of involvement in a demonstration and sentenced to six weeks' imprisonment.

As we heard, he was a strong supporter of Scottish independence. In 1886, he helped establish the Scottish Home Rule Association. In 1888, he attended the SHRA conference at Anderton's hotel in Fleet Street, which passed a motion saying:

"That in the opinion of this Conference the interests of Scotland demand the establishment of a Scotch national Parliament and an Executive Government having control over exclusively Scotch affairs."

What a visionary the man was even in 1888.

While in the House of Commons, he became increasingly radical and went on to found the Scottish Labour Party with Keir Hardie. He left the Liberal Party in 1892 to contest the general election in a new constituency as a Labour candidate. As we have heard, he played an active part in the establishment of the National Party of Scotland and was elected the honorary president of the new Scottish National Party in 1934.

Between 1888 and 1892, Graham was a prolific contributor to small-circulation socialist journals. There is a seat dedicated to Cunninghame Graham in the Scottish Storytelling Centre in Edinburgh with the inscription:

“R B ‘Don Roberto’ Cunninghame Graham of Gartmore and Ardoch, 1852–1936, A great storyteller.”

It is great to see Gerry McGarvey here today. I have read his review of the book that is mentioned in the motion. The review begins:

“R B Cunninghame Graham ... was, and remains, the great enigma of Scottish politics.”

Gerry McGarvey goes on to say—and it is an incredible story when you listen to it—that

“Graham was a quarter-Spanish cowboy in South America; a large Scottish landowner who was the first declared socialist MP in Westminster; and a Justice of the Peace who was badly beaten by the police and jailed while leading a riot in Trafalgar Square on behalf of the unemployed. Graham was also an aristocratic élitist and ‘The Miners’ MP’, who was expelled from parliament on three occasions; an anti-racist and anti-imperialist, who at the age of 62 volunteered for military service and was appointed a ‘colonel’ during WWI; and a friend of the rich and famous, who supported Irish and Scottish Home Rule.

The greatest enigma, however, was how quickly he disappeared from the public consciousness. In 1926, Hugh MacDiarmid described Graham as ‘potentially the greatest Scotsman of his generation’.”

He says that Cunninghame Graham was

“the most contentious, controversial, and contradictory Scot of his generation ... this thoroughly researched book is the first attempt to untangle the Graham legend, both as a rabble-rousing politician and as a prolific author.”

I will close with Cunninghame Graham’s most famous quote, which I know will divide opinion:

“The enemies of Scottish nationalism are not the English for they were ever a great and generous folk, quick to respond when justice calls. Our real enemies are among us, born without imagination.”

18:05

The Cabinet Secretary for the Constitution, External Affairs and Culture (Angus Robertson): I am extremely grateful to Clare Adamson for bringing forward this motion and securing the debate today. It is right that we celebrate the life and legacy of Robert Bontine Cunninghame Graham and mark the recent publication of research by Dr Lachlan Munro that confirms this extraordinary man’s place in Scotland’s history for modern readers.

I would like to thank the various speakers for their passionate and interesting contributions right across the chamber: Jenni Minto, Stephen Kerr, Kenneth Gibson, Christine Grahame, Richard Leonard and Paul McLennan. It is a rare thing indeed that there is such unanimity in any Parliament and particularly about a man with so

many facets to see that there has been such unanimity in respect of the mark of his lifetime.

It is important that the Parliament remembers how the significant achievements of R B Cunninghame Graham in campaigning for social and political change in the late 19th and early 20th centuries have influenced and shaped Scotland and still do today. This is the second time that R B Cunninghame Graham has been the focus of debate in this Parliament. We recorded our appreciation of his devotion to justice and Scotland on 20 June 2012 on the occasion of the publication of a then new collection of his writings by Alan MacGillivray and John C McIntyre.

Dr Munro’s thorough analysis of R B Cunninghame Graham’s contribution to Scotland’s political and cultural history is a hugely welcome addition to research available on this most interesting man. Describing R B Cunninghame Graham as

“the most contentious, controversial, and contradictory Scot of his generation”,

Dr Munro seeks to understand him as both an outstanding politician and a keen writer. For the first time, this research examines his political influences, which included William Morris, Engels and Marx. It examines contemporary newspaper reports, Cunninghame Graham’s speeches, his socialist journalism, as well as the memoirs of those who knew him, including his early socialist, and later nationalist, colleagues.

The book reveals Cunninghame Graham’s close relationship with Keir Hardie and argues that it was Cunninghame Graham, inspired by William Morris, who first saw the need for a party for working people. Cunninghame Graham and Hardie’s support for Scottish home rule is explored, as are Cunninghame Graham’s evocative Scottish writings, which Dr Munro contends were also deeply political.

The book also explores the early labour movement in Scotland, which turned into the National Party and then the Scottish National Party. Cunninghame Graham felt that the establishment of a Scottish Parliament with full control over all Scottish affairs was essential—a firm belief, the chamber will not be surprised to hear, that I whole-heartedly share.

I am delighted that Dr Munro’s analysis includes Cunninghame Graham’s nearly 30 books, including 200 short stories and sketches, history and travel books, which draw on his many travels and adventures in Scotland and in his beloved South America as inspiration.

Cunninghame Graham has long been Scotland’s forgotten personality, politician and writer. Dr Munro explores the complex reasons for

his eclipse from public attention despite Cunninghame Graham being one of the most famous and controversial Scots of his generation, whose career in the public eye spanned over 50 years and saw him move from aristocratic beginnings to being a radical part of the British political establishment and a figure loved by people from every class in society.

In this fresh appraisal, Dr Munro challenges previous accounts of Cunninghame Graham as a romantic idealist, an aesthete and an adventurer. Acknowledging the apparent contradictions in his life, Dr Munro shows that Cunninghame Graham's political activities, as well as his writing, were fuelled by his deeply felt moral outrage. As Dr Munro says, Cunninghame Graham was seen

“not solely as a politician, nor an author, but as an eloquent, disquieted, principled, fervid moralist and contrarian.”

As we have heard in the debate, R B Cunninghame Graham lived a fascinating life. Born in London with Spanish heritage, educated at Harrow, an adventurer in Morocco, a cowboy and long rider in the Americas. Throughout all of that, he was a Scot and his influence on modern Scottish political life should not be underestimated. As we heard, he entered the House of Commons in 1886 as a Liberal MP for North West Lanarkshire and left in 1892 as that Parliament's first sitting socialist member. Radical at the time, but familiar now, his electoral platform included universal suffrage, free school meals, free education, an eight-hour working day, home rule for Scotland and the abolition of the House of Lords.

As the motion states, R B Cunninghame Graham was also known as “The Miners’ MP”, fighting to end the poverty and hardship faced by mining communities in Lanarkshire. He would be pleased, I am sure, by the action that is being taken right now by the Scottish Government to ease the wounds of division and bitterness inflicted on Scotland's mining communities during the miners' strike of 1984-85. I am speaking, of course, about the Miners' Strike (Pardons) (Scotland) Bill that is currently making its way through Parliament.

The bill seeks to secure a pardon for miners and their households for certain offences that were committed during that strike, which was the most bitter and divisive industrial dispute in living memory. The pardon will help to restore dignity to miners and mining communities by removing the stigma of a criminal conviction. By offering a pardon, the Scottish Government is doing what it can within its powers to bring some comfort to miners and others convicted for the strike. I am confident that R B Cunninghame Graham would have approved.

Today's debate will help to set the record straight. It celebrates the achievements of this reformer who fought so hard for the people of Scotland and their home rule. It is important that he is remembered as one of modern Scotland's founding fathers.

I want to add my warm congratulations to Dr Munro on the fruits of his work over a number of years, which has led to the publication by Edinburgh University Press of this assessment of R B Cunninghame Graham in one volume. This fitting testimony to Cunninghame Graham's literary and political achievements will give modern readers the opportunity to assess and enjoy the remarkable range of his work. It also goes some way to explain why Cunninghame Graham has received so little serious attention in the 86 years since his death. Cunninghame Graham's commitment to social justice for all, to Scotland and to literature has left a remarkable legacy for us today.

I congratulate everyone who took part in the debate this afternoon and commend this new book to everyone with an interest in our political history that continues to shape us to this day.

The Deputy Presiding Officer: That concludes the debate and I close this meeting of Parliament.

Meeting closed at 18:12.

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

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