



OFFICIAL REPORT
AITHISG OIFIGEIL

Health, Social Care and Sport Committee

Tuesday 4 October 2022

Session 6



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CONTENTS

	Col.
DECISION ON TAKING BUSINESS IN PRIVATE	1
EUROPEAN UNION (WITHDRAWAL) ACT 2018	2
Food and Feed (Miscellaneous Amendments) Regulations 2022 [Draft].....	2
RACISM IN SCOTTISH CRICKET (INDEPENDENT REVIEW)	4
HEALTH AND SOCIAL CARE INTEGRATION	24

HEALTH, SOCIAL CARE AND SPORT COMMITTEE

28th Meeting 2022, Session 6

CONVENER

*Gillian Martin (Aberdeenshire East) (SNP)

DEPUTY CONVENER

*Paul O’Kane (West Scotland) (Lab)

COMMITTEE MEMBERS

*Stephanie Callaghan (Uddingston and Bellshill) (SNP)

*Sandesh Gulhane (Glasgow) (Con)

*Emma Harper (South Scotland) (SNP)

*Gillian Mackay (Central Scotland) (Green)

*Carol Mochan (South Scotland) (Lab)

*David Torrance (Kirkcaldy) (SNP)

*Evelyn Tweed (Stirling) (SNP)

*Tess White (North East Scotland) (Con)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Gordon Arthur (Cricket Scotland)

Stephen Brown (Orkney Health and Social Care Partnership)

Forbes Dunlop (sportscotland)

Vicky Irons (Dundee Integration Joint Board)

Judith Proctor (Edinburgh Integration Joint Board and Health and Social Care Scotland)

Allen Stevenson (Inverclyde Health and Social Care Partnership)

CLERK TO THE COMMITTEE

Alex Bruce

LOCATION

The Sir Alexander Fleming Room (CR3)

Scottish Parliament
Health, Social Care and Sport
Committee

Tuesday 4 October 2022

[The Convener opened the meeting at 08:52]

Decision on Taking Business in
Private

The Convener (Gillian Martin): Welcome to the 28th meeting in 2022 of the Health, Social Care and Sport Committee. I have received no apologies for today's meeting.

The first item on our agenda is to decide whether to take in private items 5 and 6, as well as certain items as required at our next meeting on 25 October. Do members agree to take those items in private?

Members indicated agreement.

European Union (Withdrawal) Act
2018

Food and Feed (Miscellaneous
Amendments) Regulations 2022 [Draft]

08:52

The Convener: The next item on our agenda is consideration of a notification from the Scottish ministers for consent to a statutory instrument. The notification concerns provisions made to amend retained direct European Union law in various areas of food and feed law, including legislation on novel foods, food additives, enzymes and flavourings, genetically modified food and feed, feed additives, food contact materials and the hygiene of foodstuffs.

Under the protocol between the Scottish Parliament and the Scottish Government, the consent notification has been categorised as type 1, which means that the Scottish Parliament's agreement is sought before the Scottish Government gives consent to the United Kingdom Government making secondary legislation in an area of devolved competence.

Before I ask members for their views on the instrument, I want to point out how little time—indeed, it is no time—we have been given for scrutiny of it. The instrument was laid very late for the Scottish Government, which has written to us to recommend that we consent and to say that it has no issues with it. However, there are still outstanding issues.

Our consent is asked for, as a Parliament and a committee. However, we have not had any notice or been allowed any time for scrutiny—we might have had a minister in front of us today but we are not able to do that. Also, we have flagged up that there is an outstanding consultation on the issue that is not due to report until today, so there may be recommendations from or issues thrown up by that consultation of which we do not have sight.

We do not want to hold up anything that will fix some of the issues in the area that the instrument covers, but I put on record my severe dissatisfaction with the situation in which we find ourselves.

Do colleagues have any comments?

Evelyn Tweed (Stirling) (SNP): I agree entirely that we have not had sufficient time to scrutinise. The information about the consultation that is outstanding makes the matter even worse. The Minister for Public Health, Women's Health and Sport says in her letter to the committee that she cannot share the draft statutory instrument, because it is not yet in the public domain. The

process all seems very rushed, and the committee is being put in a difficult position.

Emma Harper (South Scotland) (SNP): I agree with the convener and Evelyn Tweed. Paragraph 4 in the notification says that the instrument fixes

“issues of deficiency, inoperability and inconsistency.”

In reading through the notification, I labelled so many points. There are policy issues and technical issues. I understand that consent is being sought, but there are issues with the point about the “Do Not Eat” pictograph and how that will work going forward. There are issues with the labelling of products that have not been resolved. I am concerned that we have not had enough time to scrutinise the statutory instrument.

The Convener: I will ask members for their views on whether we consent but, regardless of that, and given the pressing nature of what we have in front of us, I suggest that the committee writes a letter to the UK Government department that has issued the instrument. Maybe part of the reason is the death of the Queen, but I believe that the timescale was down to the wire even before that. The point has to be made that we exist for a reason, and that is to scrutinise what we are agreeing to. If we do not have time to do that, it is just a tick-box exercise, and I do not think that we should be in that position. We will write to the Scottish Government about our decision today and also make that point to it.

Gillian Mackay (Central Scotland) (Green): In the letter, could we also ask for an update on the consultation that is still outstanding? Your point that we probably should have seen the SI earlier is even more concerning, given the closing date of the consultation that we have been advised of. There could have been several weeks where a consultation was still live but we were being asked to consider the instrument.

The Convener: Okay—we will do that. Is the committee content that the provisions that are set out in the notification should be included in the proposed UK SI?

Members indicated agreement.

The Convener: We are in agreement, notwithstanding the comments that have been made.

Finally, is the committee content to delegate authority to me to sign off on the letters that we have mentioned to the Scottish Government, informing it of our decision today, and an additional letter to the UK Government about the timescale and lack of scrutiny opportunity?

Members indicated agreement.

Racism in Scottish Cricket (Independent Review)

08:58

The Convener: Our first substantive item on today’s agenda is the independent review into racism in Scottish cricket. I welcome Gordon Arthur, the interim chief executive of Cricket Scotland, and Forbes Dunlop, the chief operating officer of sportscotland.

We have an hour for questions, and we have a lot of questions on the issues highlighted in the report “Changing The Boundaries—The Plan4Sport Independent Review into Racism in Scottish Cricket”, as well as issues that have been highlighted by the very brave individuals who have come forward. I am sure that anyone watching this will have seen that.

My question is for Gordon Arthur. When such things come into the public domain and hit the headlines, it is often the case that a number of people feel that they want to come forward. There was a great deal of work in engaging with people who had issues as part of the report but, since the report has been published, have more people come forward? What do you say to anybody who is involved in cricket in Scotland now if they have not come forward yet but want to raise issues to give them the courage to do so? How can they be confident that their concerns will be taken seriously and that they will not be subjected to some of the terrible things that we have heard that the people who came forward before were subjected to?

09:00

Gordon Arthur (Cricket Scotland): Sportscotland has kept the Plan4Sport helpline open since the report was published on 25 July, and I believe that further referrals have come forward in that time, although I cannot tell you how many. We have been concentrating on the 68 referrals that were passed over at that point, but I believe that more have come forward since then.

As I said on the day, the publication of the report was a very dark day for cricket in Scotland. The report laid bare an appalling picture. We cannot try to justify the scale of the issue or brush it off as a reflection of things that go on in society more generally, but we are looking at a societal problem through the lens of cricket. We cannot solve it on our own, but we are determined that we will solve it and make cricket a welcoming place for everybody in the sport. If there are people out there who still have evidence that they want to give and who feel that they have been treated badly in the past, I urge them to come forward.

The more we understand the scale and depth of the problem, the better placed we will be to deal with it.

The Convener: The action plan was meant to be produced on 30 September. One of the strongest and most upsetting aspects of what was reported was that when people came forward previously, many years ago, they were either ignored or there were no structures in place to support them. Will you outline what the action plan will do to ensure that when people are brave enough to come forward they are dealt with in a way that is supportive and investigates their claims and does not lead to any kind of adverse effects on those individuals?

Gordon Arthur: Over the summer, we ensured that all the referrals that came in prior to the publication of the report and those that have come in since then will be dealt with through an independent process. We have partnered with Sporting Equals to help run that process for us to ensure that it is very thorough and that everybody feels confident in it.

The action plan has a small number of main strands to it. One of those is to put in place an anti-racism and equalities, diversity and inclusion strategy. That strategy has to deal with a range of issues, of which this is one. We need to put in place a method of collecting data so that we are clear about the people playing cricket in Scotland, what their backgrounds are, where they are from and a range of other data pieces that will enable us to track how our work is going in the years ahead.

We need to put in place a survey to update that annually, as well as education and training for the workforce in cricket in Scotland to make sure that everybody understands what needs to be done. We need to build a long-term and robust process to do exactly what you are asking for. That is, to ensure that the process that we have in place at the moment to deal with the issue temporarily is built into a long-term process so that people feel that they can come forward. Then, when people do so, we need to ensure that they can trust the process, that they will be listened to thoroughly and that their complaints will be dealt with appropriately.

The Convener: I have a question for Mr Dunlop about the wider implications for sport in Scotland. As I said, the report has come off the back of whistleblowers and many complaints over many years that have not been dealt with appropriately. Things should not have had to come to a head as a result of the bravery of individuals.

What are your reflections on potential actions for other sports in Scotland? Cricket Scotland is in the spotlight, and rightly so, but there might be similar

issues across sport in Scotland. What is sportscotland doing about that?

Forbes Dunlop (sportscotland): We have taken a number of steps. Prior to the cricket review and the publication of the report, we did a piece of work a couple of years ago with the other home countries' sports councils and UK Sport that looked at race, racism and inequalities. An action plan was developed on the back of that work.

We now have the cricket report and the experiences that that has highlighted, and we will learn from that. We immediately met people from all other funded sports to talk to them about the report, and they have had time to read, understand, digest and reflect on it. We are working with them individually to understand where they are as a sport; what diversity looks like in their sport; and how their complaints and appeals processes are placed and the level of independence and scrutiny that is applied to them. Importantly, we are also considering the culture in the sport and, when something happens, how that is managed and dealt with.

We have a range of actions. As I said, some were put in place before the cricket report, but we have now built on and added to those. They all culminate under our EDI strategy, which we developed a couple of years ago. We have been doing a host of work over a long time, but, in the past two years, there has been a specific focus on race and ethnicity through the EDI action plan.

Tess White (North East Scotland) (Con): I have a question for Mr Dunlop. Earlier this year, sportscotland was proactive in commissioning the independent review into racism in cricket, but that was after allegations had emerged in public. What oversight and involvement did sportscotland have before that?

Forbes Dunlop: We have a range of tools and interventions for all the funded bodies that we are involved with. That includes independent audits of those organisations. We clearly did not know the depth of what was happening in cricket or the failings in the sport, but we had been working with Cricket Scotland on an EDI action plan. We were using some expert resource to work with Cricket Scotland, and plans had been developing and evolving. Quite rightly, those were shelved once we started to realise the size and scale of the issue at hand. We have had to reflect on our processes and audits so that we can get underneath those types of issues much earlier than we did with cricket. There is a period of reflection during which we will consider what we do and how we do it, and we will be making changes.

Tess White: You knew about the issue, but not the size and scale of it.

Forbes Dunlop: We knew that there were some challenges, but we did not know that those were anywhere near the size and scale that were outlined in the published report over that period of time.

Emma Harper: Good morning. I have a question for Gordon Arthur about the “Changing the Boundaries” review, which, as the convener mentioned, recommended producing an action plan by 30 September. I understand that the action plan has not been published yet and that it has been delayed because there has not been adequate anti-racism expertise—perhaps there has been none—to scrutinise the plan prior to publication. I am interested in your comments about the delay. What action is being taken to embed anti-racism expertise in the plan? When will the action plan be published?

Gordon Arthur: The action plan is now out for consultation with Running Out Racism. It was first developed in the middle of August and has been in development since then. We have been reporting progress on the plan to Running Out Racism, but I do not believe that it had seen the plan itself until the end of last week.

The recommendations from the “Changing the Boundaries” report have been included in the plan. We have not changed those recommendations at all. They are exactly the same recommendations as were set out in relation to the things that Cricket Scotland and, indeed, sportscotland needed to address. Those recommendations have been put into the document.

The work falls into three main areas. First, we need to put in place a review process for referrals. That process started about two weeks ago. Secondly, we need to hold a governance review, for which we have agreed the terms and costings. That review is about to kick off and will be finished by the end of the year. Thirdly, we need to put in place an EDI anti-racism advisory group to run all of that work, and we have been recruiting people to that. A member of the Running Out Racism campaign will be part of that advisory group.

All the work that is done on the EDI strategy and everything that falls out of that will be done with the involvement of Running Out Racism and a number of other people from universities and other sectors who have a huge amount of EDI knowledge and experience. We hope that people with lived experience and people with other relevant experience from various organisations will be fully involved in all of that work in order to drive it forward.

Emma Harper: The report was published in July 2022 and the action plan was meant to be published by the end of September. Has it just grown arms and legs and got bigger as you have

uncovered issues that need to be dealt with? Have you therefore had to not exactly prolong the publishing process but take a more in-depth approach to tackling racism in Scottish cricket?

Gordon Arthur: The tasks that need to be done are the same tasks that were in the original report. Since the report was published, we have spent most of the past two months putting in the groundwork and building the foundations for the real work to start. That has involved recruiting people to the new board, recruiting people to the advisory group that will run all the EDI work and getting agreement on how the governance review will be done. The past two months have been all about putting in the building blocks for the work that now needs to happen.

We did not see the report before it was published so, since publication, we have needed to understand what is involved. During that time, we have been working as hard and as fast as we can, and engaging as best we can, to get us to a point where everybody is happy, we are aligned and we have shared goals with the same long-term vision. That is where we want to be. Going through that process takes a lot of time, but I hope that the action plan will be published this week.

The Convener: I go back to my earlier question about referrals. People obviously came forward during the writing of the report and since then. Is it fair to say that their cases have not been investigated yet and that that process is not under way? That seems to be what I am getting from you. You have talked about all the important actions that need to take place structurally, at a high level—the policies and governance that need to be put in place. Where are we with the actual nuts and bolts of investigating all the allegations that people have made? What communication has there been with the people who have come forward to let them know about the process that they will be involved in?

09:15

Gordon Arthur: Over the summer, putting in place the independent process to review referrals took us through to 13 September. On that day, we announced what the process would be, gave more information about it and said that the first individual investigations had begun that week.

Two things are happening. At the front end, there is a triaging process to see which of the 68 referrals are the most important, the most urgent and the most serious, so that we can prioritise that work. Once that triaging process is finished, which should be in a week or two, we will have a complete plan in relation to the order in which we will look at things. Investigation of the first two or three cases has already started.

The Convener: How is that being communicated to everybody who has come forward? Have they all been communicated with individually to let them know that their reports have been received and what process to expect?

Gordon Arthur: I think that a letter went out to all of them on 13 September or the day before. I will need to check that, but I am pretty sure that that happened.

The Convener: I will bring in Sandesh Gulhane, who joins us online.

Sandesh Gulhane (Glasgow) (Con): I have been listening with interest, and I am really quite angry and upset. The publication of the report is not a dark day for Scotland; what happened was a dark day for Scotland. The idea of trying to hide behind societal issues is not good enough. I have a feeling that the issue is not being taken seriously enough and that things are not going forward at the pace that we want them to.

My first question is for Gordon Arthur. Where is the human resources officer? Why has a human resources officer not been appointed?

Gordon Arthur: The “Changing the Boundaries” report recommended that we appoint four roles. One of those was an HR manager, which is a role that we are not sure that the organisation would ideally have in the long run. Our organisation is very small. If you take out the contracted cricket players, the development team and the team that runs international fixtures, you are left with a staff of about half a dozen people in Cricket Scotland, including me, the head of finance and an administrative assistant. Employing a full-time HR manager in an organisation the size of Cricket Scotland does not necessarily look to be the right way to go forward.

We have other ways of accessing HR support. We get a lot of support on HR-related matters from sportscotland. Its EDI officer helps us with all our documentation. All our job advertisements and job descriptions are supported by sportscotland, and the recruitment processes that we have run over the past few months have all been helped by it, using the same HR resources and EDI specialist resources that it has.

Internally, we are reviewing our entire staffing structure to try to make sure that the organisation, which is several members of staff short of where it needs to be to be a properly functioning organisation, has the resources in place to be a first-class governing body for sport. When I arrived in July, it clearly was not that.

We have not started the process for recruiting an HR manager at this stage because we are getting very good support from sportscotland in all the HR-related matters that we need support in.

We will review all four posts as we go forward and, depending on what comes out of the governance review and the EDI strategy, we will be able to develop a job description that reflects the work that will be done for recruiting things such as our own EDI resource full time later on.

Sandesh Gulhane: You have said that you do not need a full-time HR manager because there are only six of you, and you have talked about a full-scale review of all the people and all the things that you need to do. That does not seem to balance. What work is going into place now to ensure that there is greater diversity not just within Cricket Scotland but in your volunteers and in the encouragement to get players to play at the top level to make Scotland successful?

Gordon Arthur: All of that work will come out of the EDI strategy. We have put in place the advisory group to help us with a lot of external expertise, and we are already working very closely with sportscotland. All our job adverts are put out through networks to try to make sure that people in the south Asian communities, for example, are aware of the opportunities. We would love to have more women involved in the administration of the sport. We have put out job adverts to various organisations to try to promote better diversity in our staffing across cricket in Scotland.

We have had a huge amount of success at the club level in Scotland in attracting people from very diverse communities. There are many examples throughout the country of clubs in which in excess of 75 per cent of their members are from south Asian communities. In some of the junior clubs, the numbers are way up into the 90s. Huge numbers of young people from very diverse backgrounds are playing the sport at the club level.

People ask why that is not reflected all the way through the age group levels and in the national teams. We will be doing work on that in the coming months. We hope that Paul Reddish from Running Out Racism will do a piece of work with us to look at equality throughout the entire journey, from people coming into the sport right the way up to the international level, and all the barriers that might exist in that journey, and to try to make sure that we have a process and a pathway that allow youngsters to go all the way through right up to the national team, with an opportunity that is equal to that of others.

A lot of work will be done to address those points. None of those bits of work is a quick fix—they all require a substantial change to the way that the sport has been organised in the past. However, I believe that they will make a huge difference to the sport in the years ahead.

Paul O’Kane (West Scotland) (Lab): Good morning. I want to pick up from where we left the previous question—at the grass-roots issue and the fact that young players from a south-east Asian background in particular do not progress to the national level.

There is a real feeling from the survey respondents about the challenges that exist. Fifty-four per cent of people from non-white backgrounds who responded to the survey said that they did not agree that there is a level playing field or a fair opportunity of access to the national level.

I appreciate what you said about the on-going review. However, I represent a community in which there are many young people from a south-east Asian background who play cricket, are passionate and enthusiastic about it, and are well supported by their families, and they do not seem to think that there is a prospect that they will be able to progress. What is your assessment of why that is?

Gordon Arthur: I have been in Cricket Scotland since 18 July, so I have not been personally involved enough to have a long perspective on that. I have been told many of the facts that you are quoting to me, and I have heard a lot of anecdotal stories from people who feel that they have not been given a fair opportunity at the juncture from age 17 to 19 or from 19 to the full squad. There is a perception that people are not being given a fair opportunity to progress, and I see it as my job to get behind that perception, to test it out, to find out the reasons why people are not coming through the process, and to try to create a process that ensures that everybody who wants to gets a fair opportunity to get all the way through up to the international team.

I cannot imagine why anybody would want our international team not to turn out its 11 best players every time that it plays. The idea of excluding people because of their skin colour or because they live in a more remote part of the country and cannot compete, as they cannot get to big clubs that play in the top leagues, needs to be explored. Any reasons why people would be excluded need to be explored. As I have said, we need to build a process that gives people as much opportunity as possible.

Paul O’Kane: You referred to people’s perception. I am not sure that it is a perception. I think that there is a real demonstrable challenge for people in being able to access the sport.

I represent and come from East Renfrewshire, which is a community with a large south-east Asian community and in which people are well supported. There are a number of clubs and school opportunities, for example. I would like to

hear a commitment from you that you will go to those communities, speak to people—particularly young people who have had challenging experiences—and get a sense from them not of what the situation is perceived to be but of what the reality of the situation is. Will you give that undertaking? I appreciate what you have said about commissioning work to be done, but I think that you in your role and whoever continues the leadership of the organisation should go to those communities.

Gordon Arthur: We need to talk to as many people as possible and make sure that we have a broad understanding of the grass-roots sport. Talking to members in different communities and different clubs is one of the best ways in which we can do that. I am happy to say that, when that work is on-going, we will be out there talking to everybody in the sport to try to understand.

I, too, have talked to people from south-east Asian communities, who have described to me why they stopped playing the game at the age of 19. They had a very good experience through the ages of 15 to 17 to 19. They were under huge amounts of pressure from their families to get professional qualifications—to go to university and become a doctor or lawyer, for example—and they stopped playing the sport. At that stage in their lives, the focus shifted away from trying to be an international sportsperson to becoming a professional person with a career and continuing to play sport at the club level.

There will be many reasons why people do not progress from the junior ranks into the senior ranks, regardless of their skin colour, and we need to understand what all those different reasons are. I have said this twice, and I will say it a third time: we need to have a thorough look at the whole journey and make sure that, if there are barriers, they are removed so that everybody gets a fair opportunity to progress through the system.

Paul O’Kane: It is clear that we need to drill down. My point about speaking to those communities is absolutely vital.

I will move the discussion on slightly, because I am conscious of the time.

Is there a challenge for many people in respect of professional players setting an example and the players whom they play alongside not understanding some of the systemic issues, the deep-rooted nature of racism and the challenges around that, and very often not being aware of the challenges that other people face? To what extent has there been training for other professional players on racism and how they conduct themselves on social media and in various other spaces? Does that training currently exist?

Gordon Arthur: Yes, it does. The men's international team and, I believe, the women's international team have had EDI training. That needs to be an on-going part of how we support the squads to make sure that they fully appreciate all the issues and that the understanding of those issues is as thorough as it can be.

09:30

Tess White: I will go back to something before I ask my question. Earlier you said that you want to involve more women in administration. Could you clarify what that means, please?

Gordon Arthur: I mean in the running of the sport. The Cricket Scotland board did not have women representatives on it until fairly recently. The volunteer base who run the sport at a practical level day to day are largely white middle-aged males. The women's game is growing, so it would be great if we had more representatives from women's cricket involved in running all of cricket.

Tess White: Thank you. "Governance" is what you meant by administration.

My question is on the work that you are undertaking to improve transparency in player selection. Could you share that, please?

Gordon Arthur: It became obvious to me fairly early on that Cricket Scotland, as an organisation, has not been particularly transparent about many things. It has just got on and done things; it has not explained to people how those things have been done and it has not published processes so that people can see how decisions are made. When decisions are unpopular with people and they cannot go back and see who was involved, why were they involved and what the process was, that feeds discontent.

Questions were asked earlier about international selection, which is a very clear case in point. Historically, selection meetings have taken place, teams have been picked and squads have been announced but there has been no information behind that. The men's world cup squad are in Australia now preparing for the twenty20 world cup. We put a lot of work into trying to put together, describe, write down and publish a very clear process of how the squad was picked, who was involved in picking it and why they were involved in picking it. We talked to people about who would chair the selection committee. We have a new chair of the selection committee and we had a number of people advising, but not voting, on the selections, so we had different and much broader and more diverse inputs into the meeting than has happened in the past. That is a step towards having a permanent published selection process for the international teams.

My view is that we need to take that process down to the under-19s, the under-17s and the under-15s, where things are probably even less clear than they are at the top international team level. For the top international squads there has always been a chair of selectors, with the head coach, two assistant coaches and whoever else making the decisions. Further down the age groups it tends to be the case that the coach of the squad makes the decisions on their own. My view is that that is not transparent enough; we should not be relying on one person to do that. We are unlikely to improve diversity unless we have particularly focused individuals who are trying to make sure that diversity comes all the way through the various age-group teams.

There is a huge amount of work to be done on transparency in the organisation that I am now running; we need to bring a huge amount of transparency into all of our work. I am completely committed to making sure that that happens. In respect of the process for selection of the men's international team it has been appreciated that we have done what we have done, which is an important stepping stone to better transparency in all that we do in the coming years.

Evelyn Tweed: Good morning to you both. What is sportscotland doing to support Cricket Scotland generally and in its record keeping, reporting procedures and complaints processes?

Forbes Dunlop: Since publication of the report, we have been working very closely with Gordon Arthur, in particular, and his small team. He has outlined some of the practical expertise that we can provide to cricket. Over the past two months we have been, essentially, helping Gordon Arthur to run Cricket Scotland daily. We are trying to be clear about jurisdiction, so that we do not make procedural mistakes in the changes that we are making, because it is important that cricket is reviewed then set up and structured in a way that is robust and transparent for the future. We are working closely with Cricket Scotland to put the changes in place, to provide the expertise and support that cricket does not have in this first phase and, importantly, to hold Cricket Scotland to account for the changes that need to happen.

We meet with a group that includes Cricket Scotland, sportscotland and representatives from Running Out Racism. We have established a monthly meeting so that there is checking and challenge by sportscotland and an opportunity for Running Out Racism to raise its concerns or questions about progress and the steps that have been taken. Monitoring is done through the group's meetings.

Gordon Arthur has touched a number of times on the fact that we felt that it was very important to get the big building blocks in place first. It was

important to make sure that the terms for the governance review were set and established properly and that the referrals are rightly prioritised, given the nature of those referrals and the individuals involved. It was also important that the board was recruited and appointed so that Cricket Scotland is in a place to make changes to its governance, to make decisions and to move forward as an organisation.

We have been working with Cricket Scotland daily to make sure that it has the expertise and we prioritise the right things in the right order, so that we get the big building blocks in place and can then address lots of the points that the committee has made this morning.

Evelyn Tweed: In sportscotland's statement of 30 September it was noted that

"robust actions and genuine cultural change"

are needed within the sport. Can you offer us assurances today that that is what we will get? Given the progress to date, we do not see that now. Can you give us assurances that there will be real cultural change within Scottish cricket?

Forbes Dunlop: Yes, absolutely. When I talk about the foundations that we are putting in place, one of the most fundamental things is that the leadership, through the board of Cricket Scotland, understands the need for cultural change. That is embedded in the recruitment process for the chair and board members. Of course, it is our absolute commitment that cultural change will happen and needs to happen in a structured way. We believe that that happens through the board, the governance review and the EDI working group that Gordon Arthur is setting up. It happens by putting in place the types of people who are being invited on to that group, with their backgrounds and the expertise that they bring, which will deliver the cultural change that we all need to see.

Tess White: It is clear that wholesale change is needed at Cricket Scotland. What funding is in place to support that change?

Forbes Dunlop: Sportscotland has invested in Cricket Scotland for a time. As we work through the steps and come to understand what the organisation needs to look like, there will be opportunities to invest in and support the organisation directly or indirectly, as we are doing now, through either our own expertise in sportscotland or expert research that we can contract in on behalf of Cricket Scotland. There are resources available to support Cricket Scotland.

In the first instance, the best way to do that is indirectly in the short term, because we still are not clear what the structure of the organisation needs to look like. It is right to give the new board time to

come in and fully understand what is happening and for its members to have a say in that. In the longer term, there are resources that we can use if we feel that that is the right thing to do and that it would benefit the game of cricket in Scotland.

Tess White: So, nothing has been ring fenced and nothing has been set aside yet.

Forbes Dunlop: No.

Gillian Mackay: Has Cricket Scotland established a formalised method of communication for sharing updates and examples of good practice among regional associations, clubs and itself?

Gordon Arthur: At this point, we have not done that. I do not think that the relationships between Cricket Scotland and the regions, the regions and the clubs, and the clubs and Cricket Scotland are particularly fit for purpose as they are at the moment. That is bound up in the history of the way the sport has been governed, but I hope and expect that the governance review will dramatically change that, so that we have better processes and more resources in place to manage certain big and important things more centrally.

One of those things is conduct and discipline, which has obviously been a big focus of the report. The processes and application of the processes that we have had in place have not always been consistent. In many areas, including safeguarding and child safety, and health and safety, we need a more consistent approach across the whole sport. That will require a resetting of the relationship between Cricket Scotland and the regions.

We have set the very challenging task of completing the governance review by the end of the year because I would like to be able to implement the outcomes of the governance review before the start of the next cricket season. That will quite possibly require changes in the articles of association of Cricket Scotland and maybe of those of the regions, which are all structured quite differently. Implementation of the recommendations, whatever they are, that come out of the review could take a little bit of time, but we are giving ourselves only three months for that, which I think will be a stretch. The things that we cannot do by the start of next season will probably end up having to wait until the start of the following season, which does not make me happy: anything that is important must be done and be put in place before the start of the 2023 cricket season.

We need to reset the relationship in some areas quite significantly. From my early conversations with people in the regions, I think that that will be welcomed. I am meeting with the new chair of Western District Cricket Union on Friday. You might be aware that the entire western district committee resigned and there were elections in

early September. The relationship between Cricket Scotland and western district will be crucial, bearing in mind the volume of issues that came out of the “Changing the Boundaries” report that related to that district, which was singled out as being an area that needs a lot of attention. An important and significant cultural reset between Cricket Scotland and the regions and clubs needs to happen this winter.

Gillian Mackay: Given how important it is to communicate a lot of the work that is going on at national level to the clubs and the regional associations, what time frame do you expect that you need to formalise a new way of communicating with the regions and the clubs?

Gordon Arthur: I would love to have that in place already. We do not have a communications person in our very small staff in Cricket Scotland. I believe that we have not had a proper communications person since the early part of this year, when the person doing that left but was not replaced. We have just been through a recruitment process to try to bring in a new head of communications and we had one very good candidate come out of that process. Sadly, they have been persuaded by their employer to stay where they are, so we need to restart that recruitment.

09:45

My background is largely in communication, so I completely understand the need for us to overcommunicate now. The reality is that since I came into this job I have been working six or seven days a week doing 10, 12 and 14-hour days. There is only so much that we can do in the very short term. We need to get more staff into the organisation: that comes back to the points about sportscotland helping us and the need to identify the structure and roles and get those roles in place.

We are working in a recruitment environment in which prospective candidates are now worried about coming to work in Cricket Scotland because of everything that they have read and seen. I have spent days of my time talking to potential candidates about what we are doing and what our ambitions and commitments are, to try to ensure that they understand that the sport is going to change for the better and that it is going to change in a very significant way. That is to give them confidence that they would be coming into an environment that they want to be part of. It is not easy, but we have to keep pressing as hard as we can.

Formalising of communications with the regions, clubs and all participants in the sport is very important. I hope that we will make progress on

that in the coming weeks, and I would love to have a new head of communications in place to drive all that work. Sadly, we are not quite at that point.

Gillian Mackay: Do I have time for one more question, convener?

The Convener: Yes.

Gillian Mackay: This question is more for Mr Dunlop, I think.

In the debate on this issue that Kaukab Stewart brought to the chamber earlier in the parliamentary session, it was widely recognised that the issues raised with regard to cricket might not be unique to cricket. Obviously it is important that we take this opportunity to look towards the future and help ensure that such situations do not happen again anywhere in sport and that we provide an opportunity for good-practice sharing.

Given that, would sportscotland consider forming, at an appropriate time, a representative working group to look at the findings of the independent report and to prioritise actions that can be taken to help all governing bodies of sport be fully inclusive? Such a working group could include governing bodies themselves and a representative body in the form of the Scottish Sports Association to ensure that sports are involved in all discussions and that resulting actions and developments are done with sports, not just to them.

Forbes Dunlop: We would absolutely consider doing that—indeed, those types of conversations are very live now. Even before the cricket report came out, a lot of work was being done on getting the right level of support and expertise to help sports, with the sports themselves, and on how we balance that with interventions when things do not go right, people do not make good decisions and cultures go wrong. As I have said, those conversations are live, and we are working with a range of partners, including governing body representatives, to ensure that we take all the learning from the report and the work we were doing before it, bring them together and strike the right balance of having a package of support and help for sports and intervening when they do not get things right.

The Convener: I call Paul O’Kane, who has a specific question about regional associations.

Paul O’Kane: As someone who represents the West Scotland region—and going back to my previous remarks about my own community—I am keen to understand what the particular issue is in west district. We have heard about the resignation of the board and its replacement, but it seems to me that there is a particular challenge in that part of the country. Gordon, do you want to elaborate on that?

Gordon Arthur: I am not sure that I can elaborate any more on the issue than what has been reported in “Changing the Boundaries”. West district was one of the referrals; indeed, it was singled out in the process. We need to understand through the governance review where the discipline process has not been working effectively, and we need to ensure that the processes that are put in place work effectively everywhere, but I am not sure that I can add an awful lot more to what is in “Changing the Boundaries” about the proportion of issues that came out of west district.

Do you have anything else to add, Forbes?

Forbes Dunlop: No, that is essentially it. A number of the referrals relate to west district’s handling of discipline at district level. The Plan4Sport team said that that issue needs to be looked at and that piece of work is on-going.

The Convener: Am I right in saying that a new board has been appointed in the west?

Forbes Dunlop: In west district, yes.

The Convener: Are you confident that it looks set to undertake a complete culture change?

Forbes Dunlop: Gordon Arthur mentioned that he is meeting the new chair on Friday, but I have not met the new west district committee yet. It is certainly more diverse than it previously was, and I know that the special general meeting that it held attracted a much wider group of member clubs, which have taken great interest in the running of cricket in their district. It is still very early days, but that sort of culture change is what we are hoping for.

Gordon Arthur: I was at the special general meeting, which was held via videolink, and saw a lot of new people coming forward. The next day, I asked one or two people about their feelings about the new committee, and Running Out Racism and others felt positive about the changes in personnel involved in WDCU. That, to me, is an encouraging start.

The Convener: I will go back to Sandesh Gulhane, and then bring in Stephanie Callaghan.

Sandesh Gulhane: Having listened to what has been said, am I right in saying that, essentially, no changes have been made? You say that you are looking to do things or are thinking of doing things, that this is sort of where you want to go and that you have a governance review, an EDI strategy and so on. However, the evidence that I have heard suggests that, right now, the processes and structures have not really been put in place.

Gordon Arthur: Which processes and structures do you mean?

Sandesh Gulhane: Gillian Mackay has asked about timescales, and Paul O’Kane has talked about going in and speaking to communities. We are looking at structures and processes for increasing diversity, for new appointments and so on. Despite all the issues that have arisen, I am not getting the sense that you have done these things or that all of this has happened already. Instead, I am getting the sense that you are just looking to do them.

Gordon Arthur: Thank you for that clarity.

I can say that with the recruitment that has been done over the past two months, for example, the process has changed. We have had input from an EDI perspective on job descriptions and advertisements; we have sent them out to community groups that have not received these opportunities before to encourage people in those communities to apply and to broaden the diversity of the population of people who come forward; and we have had a complete reset of the selection process and have communicated those changes. Things have been going on and we have been making changes, but the really big changes to the long-term culture in this sport will come out of the pieces of work that will be done over the next two or three months. However, where there are things we have been able to do in the short term, we have been taking those opportunities in order to improve transparency and opportunities.

The Convener: I call Stephanie Callaghan.

Stephanie Callaghan (Uddingston and Bellshill) (SNP): I thank the witnesses for coming along this morning.

These are extremely challenging times—and not just for cricket. Gordon Arthur has a lot on his plate, too. I also noted Forbes Dunlop’s comments about having the right level of support and expertise, and I do not know whether any additional support could be brought in to help with that.

With regard to developing communication strategies, are there specific examples of good practice from other sports that could be adapted and applied to cricket? That question is for Forbes Dunlop.

Forbes Dunlop: We certainly do have good practice, and not just within Scotland; as we mentioned in last week’s update, over the past six months we have been developing a new partnership with a UK-based organisation called Sporting Equals, which has done a lot of work with English and UK governing bodies. One of the reasons for developing that partnership, which happened before the cricket report came out, was to bring in a range of expertise that Sporting Equals had and which we felt that we did not have in sportscotland. With the combination of that

expertise and the many communications experts that we have, there is certainly some good practice that we can learn from and we are working with Gordon Arthur and his team to make sure that that is in place.

Stephanie Callaghan: Not having different sports reinvent the wheel is certainly a good idea.

Lots of local clubs and regions have strong links with their communities, and there is some good work going on there. Are you thinking about ways in which you can tap into that and involve some of those people more? That is probably a question for Gordon Arthur.

Gordon Arthur: I have already engaged with a number of clubs that have programmes that have been incredibly successful in bringing in youngsters from all communities. A good example of that is Drummond Trinity Cricket Club in Edinburgh. Having met the chair of the club, I know that about 93 per cent of its cricketers are from a south-east Asian background. A few years ago, it was struggling to put out two cricket teams at the weekend; now it is putting out five, and its membership is fantastically diverse. A lot of great work is going on in lots of cricket clubs across the country, and in the process of developing the right culture for the sport, we must learn as much as we can from the pockets of success that are out there already.

Stephanie Callaghan: So—

The Convener: Two more members want to come in, Stephanie, so please make your question a short one.

Stephanie Callaghan: Are you looking to create opportunities or positions for such people who can really influence the ethos of and culture in sport?

Gordon Arthur: Yes. A big part of what will come out of this governance review is how we structure ourselves going forward. Historically, the Cricket Scotland board has run the sport and the Cricket Scotland council has nominally been the body that governs the day-to-day running of the sport. That board and council structure has not worked as a governance methodology for the past however many years it has been in place—I am not sure exactly how many, but it is perhaps eight or 10. In the council, you had representatives of clubs and regions, while the board tended to be made up of non-executive directors with a commercial or governance background or what have you.

As part of the process of organising things from the top of the board right down to ensure representation and opportunities for people to have an input, I would love it if the sport held a conference at which everybody—players,

coaches, umpires and other officials, clubs and regions—could get together once a year and talk about the big issues facing the sport and how we take things forward. I have a completely open mind on the different ways in which we can do that, but we need to ensure that we have really good information flows right from the clubs through to the board of directors who run the sport.

The Convener: We are rapidly running out of time, but I will take very short questions from two other members.

Tess White: I should say first of all that I was an HR professional for more than 30 years.

I just want to consider the optics of your remark about being deeply disappointed at not being able to hire a communications professional. I note that you do not see not hiring an HR professional, even part time, as a serious or major issue, but the fact is that most organisations that want to bring in serious organisational change put HR at the forefront. When I was preparing for the meeting, I was appalled at and saddened by some of the examples. Why are you making comms a higher priority than HR?

10:00

Gordon Arthur: That is primarily because we can get good-quality support on the HR front in the short term. The fact is that we need to overcommunicate with our audiences at this point in time and to be in control of that communications environment. We can get a lot of HR support from different places, and that will give us time to assess whether we need a full-time or part-time resource, what the important skills in the HR mix might be and what skills we can get from other places on a long-term basis. If we go and recruit people now, they will be permanent employees of the organisation, and if we find in a year's time that we have recruited somebody on a full-time basis who was only needed part time, we will not be able to change that.

Tess White: I would challenge that. I think that you should reconsider and put in place even part-time or specialist HR resource.

The Convener: We are running out of time. I call Evelyn Tweed. Please make it short, Evelyn, because we must end this session.

Evelyn Tweed: Okay. You have talked about a reset but when that happens, who will be responsible for making sure that we do not get into this situation again? Where does the buck stop?

Forbes Dunlop: The buck stops with Cricket Scotland, which needs to carry out its governance review and appoint a board and a council—whatever the dynamic might be—that have scrutiny and leadership of the sport. The role of

sportscotland will be to monitor that, make sure that the changes are in place and look at our own interventions so that we can confidently say that the changes that we all wanted to happen have happened. It is important that, ultimately, Cricket Scotland and the board of directors are responsible for the sport and the organisation.

The Convener: With that in mind, we might bring you back before the start of the next season just to see how far you have come. I thank both witnesses for their time this morning.

We will have a short suspension before we move on to our next panel.

10:02

Meeting suspended.

10:11

On resuming—

Health and Social Care Integration

The Convener: The fourth item on our agenda is an evidence session with witnesses from integration joint boards on their experiences of health and social care integration, all joining us remotely. I welcome: Stephen Brown, chief officer, Orkney integration joint board; Vicky Irons, chief officer, Dundee integration joint board; Judith Proctor, chief officer, Edinburgh integration joint board and chair, chief officer group; and Allen Stevenson, head of health and community care, chief social work officer of Inverclyde integration joint board. Good morning to you all. We will move straight to questions, led by Paul O'Kane.

Paul O'Kane: Good morning. The committee is keen to understand the process of integration, looking ahead to our scrutiny of the National Care Service (Scotland) Bill and looking retrospectively at how the arrangements are currently operating.

Do you feel that, at the time of integration, planning and guidance for the implementation of integration was suitably clear, detailed and timely? What was the experience of the planning for that integration process?

Vicky Irons (Dundee Integration Joint Board): Judith Proctor and I have been engaged in the evolution of the IJBs from the outset, during the passage of the Public Bodies (Joint Working) (Scotland) Act 2014 but also during the shadow years. I am currently the chief officer of Dundee IJB but I was originally the chief officer for Angus IJB through the shadow year and then through the establishment phase from 2015 onwards.

I feel that the process and the guidance were thorough. We worked closely with the civil servants who were based in the Scottish Government at the time to develop that collaboratively, so that we could implement arrangements across the system.

Most systems had a good year of working in shadow form, and that year enabled the systems to put in place many of the local agreements that had to be discussed and developed, particularly around the deployment of corporate services, as many of those were not delegated into the new integration authorities but were retained by the relevant national health service boards and the local authorities that made up the partnership.

Having said that, I think that there was still a degree of interpretation present across a number of IJBs in Scotland as to exactly what the governance and organisational arrangements

should look like. In many cases, we worked through those issues as we developed the integration schemes. As they were processed through Parliament, many of us were in a position where the original integration schemes required further amendment before they were formally approved. I feel that, at the outset, there was quite a degree of guidance, and that enabled us to put in place quite robust arrangements.

Judith Proctor might like to comment further from her perspective.

10:15

Judith Proctor (Edinburgh Integration Joint Board and Health and Social Care Scotland): I was involved in integration from the outset. Prior to being the chief officer in Edinburgh IJB, I was the chief officer in Aberdeen City IJB and was involved in the development of the integration scheme and that integration joint board.

I agree with Vicky Irons that the process felt very thorough. We had the bill and then the 2014 act. There was development work with chief officers that enabled us to work together across the country to share good practice and understand what we were each implementing and what issues were arising as we did that. Other things that were important to us ultimately included the work that we were able to do with our shadow integration joint boards on establishing the vision, values, principles and the way that they wanted to work, as well as, in particular, that element of added value—what would be different and how we would be able to implement that. We were able to set out the strategic vision that then became the strategic plan and I think set the culture and vision for the integration organisation.

That time in the shadow year also felt necessary for developing the relationships between the partners. Integration, as it was delivered and conceived in that bill, was disruptive—it was doing something very different and we needed to re-establish the relationships between councils, health boards and this new organisation. I certainly feel that the time that we had to do that prior to the go-live date was necessary time, and I think that we had a good amount of support, guidance and time to work together to work through that complexity.

Paul O’Kane: That is helpful in terms of understanding the process towards integration. If we could park the pandemic—I am sorry for that unfortunate phrase, and I know it is not easy to do—I would like to get a sense of whether people feel that integration was well established. Is it absolutely there, or does it still feel very much like a work in progress? Stephen Brown or Allen

Stevenson might want to give their observations on that.

Stephen Brown (Orkney Health and Social Care Partnership): I think that there was a lot of progress made at the time. As Judith Proctor and Vicky Irons described, in the early days, there was a degree of excitement around what was possible with regard to bringing community-based health and care services together. Significant strides were made but, clearly, there are also significant barriers. We talk about information systems getting in the road. We have loads of information systems across both health and care, which makes it difficult to share information. We also have different terms and conditions across health and care. There are a number of things that would lead me to describe the situation as a work in progress.

The Convener: We are not able to bring in Allen Stevenson yet as we are having issues with his connection. Paul O’Kane, perhaps you could move on.

Paul O’Kane: I will pull this opening segment together. I am keen to understand the learning from this process as we move towards another process. What do you know now that you wish you had known at the start of that integration process and can be used as we scrutinise the forthcoming bill?

The Convener: I can see Vicky Irons nodding along with you, so we will go to her first. Lesson learned, Vicky Irons: if you nod along, I will come to you first.

Vicky Irons: From my perspective—this might give away the length of time I have been working in these types of roles—this is probably the third set of reforms that I have lived through in similar jobs across health and social care. There is certainly a cycle to the learning. I was involved in the predecessor organisations that came before IJBs including the local healthcare co-operatives and the community health partnerships. With each of those changes, as my colleagues have outlined, we have seen significant gains regarding the operational integration of our health and social care services and some quite phenomenal work in the way that our teams have operated closely together. However, each system has struggled with each reorganisation to fully understand how governance works, to fully embrace the integration of health and social care and to enable us to develop further.

For me, there is a need to understand which components of the current health and social care integration legislation have thrived and which other aspects have just been inherited from the surrounding infrastructure and environment that supports that organisationally. It is in those areas

that we need to do quite a lot of work to ensure that we do not necessarily pass those on through the next series of reforms.

We also need to understand that we seem to be very good at reviewing organisations such as the IJBs to see whether they are working and succeeding and then replacing them with a new style of organisation, but we fail to really understand and review the organisational arrangements and the characteristics of the other aspects of the public sector to see if there is any change required there. It is clear from the report that was done years ago under the ministerial group around health and social care integration and then from the subsequent Derek Feeley review that health and social care integration has worked phenomenally well in areas where there has been a will to make it work. However, it has not necessarily thrived in other areas where there has not been that level of support and development. We need to concentrate our efforts on those things rather than expecting another significant organisational change to fix them. I think that the issues are much more about the culture and the will to make things succeed rather than about significant organisational change.

Judith Proctor: I agree with a lot of what Vicky Irons has said. This is a huge cultural change and one of the lessons that I would take into any consideration about where we go next is the test of whether it truly integrates the operational delivery and receipt of health and social care where people and communities need to experience it. I think that, too often, we think about structural change at a high level without really testing through what it will mean for real transformation and change at the front line, where people are working at that interface with people's lives. It is important to think about that.

As Stephen Brown said earlier, many of the things that we were not able to implement over these seven or eight years could not be implemented because we remained part of two separate organisations with two separate systems around everything, and that mitigated against that joint and integrated working at the front line. The fact that many areas were able to establish that as well as they have done was despite the arrangements rather than because of them. I think that there is definitely a need to ensure that whatever we put in place next preserves and strengthens that operational integration and goes further than we have been able to do until now.

The Convener: I think that we have Allen Stevenson back. I am not entirely sure whether we will be able to see you, Allen, but you probably want to come in on Paul O'Kane's earlier question, to which Stephen Brown responded.

Allen Stevenson (Inverclyde Health and Social Care Partnership): Good morning, and thank you for giving me the opportunity to speak to the committee. Could Paul O'Kane repeat the question?

Paul O'Kane: Sure. Putting the pandemic to one side, do you get the sense that integration is well embedded, or is it still very much a work in progress in terms of the wider picture?

Allen Stevenson: I think that it is a work in progress. I have been fortunate to work in a number of areas in Scotland, and I see a huge desire to improve outcomes for people. A lot of the old professional barriers have gone because we know that, no matter which service user or family we are working with, we will get those outcomes only if we are as joined up as possible. However, there is still work to do.

A number of the partnerships were working in an integrated way even before the shadow year, and it is important to understand that there are organisations that have been pushing the boundaries to work closer together. However, it will always be a work in progress, as I think that my colleagues have said.

The issue for me is that we spend a lot of time talking about structures and that we will continue to spend an awful lot of our time discussing them. People within the service realise that, if there is to be a focus on outcomes, we really need have that focus when we think about how we will spend our time. We spend a lot of time on the old barriers—HR, policies and procedures and how things are set up—rather than really concentrating on getting better at delivering services that achieve outcomes.

I do not think that any partnership in Scotland will say that they are there, but a number of partnerships have been working over many years to push the boundaries. People accept that there is no single agency that has all the answers when it comes to providing assistance and support. We need all the agencies to work together.

I hope that that answers the question.

Paul O'Kane: That was very helpful.

Tess White: I have a question for Vicky Irons that builds on something that she said.

In 1999, there were 79 local health co-operatives, which were replaced by the community health partnerships in 2004. The CHPs were then abolished in 2014, which led to the creation of the 31 integration authorities. You talked about the will to make that work. Were any lessons learned from the previous failed attempts? If so, which lessons were learned and which issues are still proving to be problematic?

Vicky Irons: Each series of the reforms that you have just articulated tried to build on the previous series and understand which things got in the way. With each series of reforms, I think that we have definitely progressed with what we have been capable of doing in the integration space—I want to say that from the outset.

In establishing the IJBs, it is clear that the scrutiny and governance landscape has become quite cluttered. It is not unusual for chief officers to have a full set of arrangements for governance and reporting to our integration authorities. However, in many cases, we have duplicate arrangements for reporting to both the relevant NHS board and the local authority. That sometimes gets in the way of being able to fulfil our role effectively, because we spend a huge amount of our time offering assurance, reporting and going through performance management systems with three different organisations. For me, the biggest lesson that we could learn would be that there is a change in the way forward that declutters that landscape, makes the governance and accountability arrangements absolutely clear and avoids duplication.

10:30

However, because each of the authorities that make up the partnerships have retained the ultimate responsibility for the services that are delegated to the IJB, how the IJB should function and exactly what delegated authority it has are often misunderstood.

Sometimes, my experience been great, but there have also been changes over time, largely because many of the stakeholders have changed over the period in which the IJBs have been in place. We have been operating for seven years, and as individuals and stakeholders change across the authorities that we work with locally, so does the level of understanding that underpins the legislation and what we are trying to achieve through integration.

If there is one thing that we can learn from this experience, it is that we need to make the infrastructure and the governance and accountability arrangements much clearer.

From a chief officer's point of view, a particular issue is how unusual it feels to be accountable, in line management terms, to the chief executive, the NHS board and the local authority, when we are also, as chief officers, directing those authorities to undertake the IJB's plans. That often feels very odd and is sometimes really quite difficult, particularly at the time of year when we are trying to agree financial settlements and to plan accordingly, because we are part of the NHS board and the local authority, but our primary role

is that of chief officer for the IJB. In many places, we are negotiating with the very body that employs us or to which we are accountable, which can sometimes make life difficult. I have always managed to find a way through that complexity, but I know that it can be quite difficult in other areas where relationships are not as strong as the relationships that I have experienced throughout Tayside.

The Convener: Other members want to come in on structure and governance.

Evelyn Tweed: Good morning. You made some strong points, Vicky, about previous reviews, how things have got better and how you worked through issues. Given your comments, am I right to think that, as we move forward, we should be looking at streamlining governance and accountability and taking out duplication? You mentioned various reporting arrangements and doing things more than once but in different avenues. Can you expand on that? I seek comments from the other witnesses as well.

Vicky Irons: The short answer is that it would make total sense if we were able to make things more streamlined. There is also something in there about reducing conflicts of interest. Trying to participate in NHS board and local authority decision making while also doing the right thing on behalf of the IJB sometimes feels quite conflicted. Those things do not necessarily always align. It would be powerful if the new authority for health and social care—whatever that looks like—was established as a board in its own right and did not report through the other two parts of the public sector structure.

However, I still have some concerns about fit and whether, given Scotland's size, there is enough financial resource to support three public authorities. Exactly how would that work? Although we have a defined series of services that are delegated to the integration authority and outlined in our integration schemes, we still work in partnership with a huge range of other services that are retained by the local authority and the NHS board. We need to make sure that we do not cut across any of those partnerships and that we do not disintegrate the integration that we have already created in health and social care.

Judith Proctor mentioned something that certainly strikes a chord with many of us. There has been a large focus on establishing a national care service and ensuring that the new authorities have direct employment rights in relation to care staff. However, we need to make sure that we can still deploy and integrate all the health and social care teams that currently form part of the IJBs. We worry that, if the new organisation is able to plan for, deploy and employ parts of that workforce but not others, that will lead to new lines being drawn

in the landscape. We need to think long and hard about some of those issues and get them right, because we do not want to unpick any of the progress that we have already made.

I am sorry if I have gone off at a wee bit of a tangent, but my point is aligned to the organisational structure that we need to look at.

The Convener: I will bring in Judith Proctor. If other witnesses want to add anything, I ask them to put an R in the chat box—I will see that, because it is in front of me.

Judith Proctor: I agree with Vicky—not for the first time—that simplification and streamlining would be welcome. We look to achieve agile decision making so that we can effect real change on the ground for people. That focus on developing services that are wrapped around individuals and shaped and co-produced by the very people who need them is welcome. I do not think that our arrangements do that. They are complex and difficult to navigate within.

I would also question the focus on commissioning change. How much of that change can we commission in terms of directing another organisation—one that has its own strategic direction—ultimately to deliver in ways that are different and responsive to the community? We need to ask questions about that.

Stephen Brown has touched on the whole question—we all have—of different terms and conditions, different organisations and different systems. Those differences make life challenging for our teams on the ground and we need to do everything that we can to streamline things for them. We talk about this as a real once-in-a-lifetime opportunity to get integration and our care for people right, and we need to dig into these perennially difficult challenges and find our way through them, even if it takes some time.

My view is that the operational arrangements should sit within a single organisation that has the levers, authority and power to direct and deliver services for the people in that area. Any organisation of that sort would work closely with its community planning partners, maximising the potential and opportunities that were set out in the Christie report. Arrangements that tie in one organisation to direct others to change and deliver take time, are difficult and do not deliver the full potential of integration.

Stephen Brown: I will build on what Vicky and Judith have said. The complexity and the cluttered landscape that both have highlighted are even more evident in Orkney, where we have a population of 22,500, the local NHS and the council, and where we will have a national care service. All those bodies will have their own chief executives, and that is before you bring in the

other community planning partners such as the Scottish Fire and Rescue Service and Police Scotland. As you can imagine, the whole thing feels cluttered and complex to our communities, which are looking for the best-quality outcomes and the best-quality public services they can get.

I come back to Allen Stevenson's point. There is no doubt that we need to focus our efforts and energies on trying to improve the outcomes for people. We can welcome with open arms much of the ethos of the national care service and the move towards introducing a getting it right for everyone approach, in the same way as we introduced a similar approach in children's services many years ago.

Public services across councils, health boards and IJBs have created strict eligibility criteria that provide for people with substantial and critical need, so in many instances we end up telling people to come back when they are worse because we have to ration our services. The ethos of trying to open that up and provide services and support at the earliest stage makes perfect sense in terms of improving outcomes for people, because the earlier we can get in there, the longer we can sustain that and the more successful those outcomes will be.

From an economic standpoint, we have known the stuff around prevention and early intervention since the Christie commission, all the way back in 2011. I am sure our public health colleagues would say the same about the need to intervene and provide support at the earliest stage possible. Some of the ethos that is coming through from the aspirations behind the national care service will help to guide us through the difficult discussions that we will have to have, and the difficult decisions that we will have to make, around the format, the structures and so on.

Evelyn Tweed: I have a follow-up question. The points that you have made help to clarify how we move forward with the work. I am interested in how IJBs dealt with the pandemic. Did the pandemic highlight issues? Did it make people think about things differently? What are our learning outcomes from the pandemic? How can we include those in our future reviews?

Stephen Brown: This is a personal reflection in many ways, but there is no doubt that, at the outset of the pandemic, a few things were different. People were brought together in a way that I had never seen before. We had to forget about organisational boundaries and think about how to work together effectively.

The first factor that was at play was that there was a common goal—or a common enemy, depending on how you want to view the pandemic. Everyone knew that we needed to respond and

that we needed to be prepared, and everyone was involved. No one was in any doubt that the right thing to do was to ensure that we had everything in place to protect our communities, our staff and our services throughout the pandemic.

Secondly, there was no blueprint or established way of doing things. Therefore, people were not taking the view that, as they had always done something in a certain way, that would stand us in good stead. There was genuinely a blank sheet of paper, so people had to think about how we organised and arranged ourselves differently. Nobody could say that they preferred doing things in a certain way, because there was no established way.

Thirdly, and finally, there is no doubt that there was significant governance through the pandemic, but we had to be fleet of foot. Things were stripped right down to ensure that decisions could be taken at the most appropriate level without taking three weeks or, in some cases, two years to prepare a business case for a test of change—by the time such a business case is prepared and work is ready to be actioned, the world has moved on and things look very different. People had to be fleet of foot at that time, which made things very different.

We need to be clear about those three factors. First, we should focus on our ultimate goal—the outcome that we want to achieve—and get everybody on board. Secondly, we should allow people the space to think about, if we had a blank sheet of paper and were creating our public services from scratch, what they should look like to best effect. We find ourselves bolting things on and trying to join bits up, but if we had a blank sheet of paper, that would make a big difference. Thirdly—this relates to Vicky Irons's point about the complexity of governance, which can be really tricky through all of this—if we could streamline some of the governance and bureaucracy, we could free people up to focus on what really matters: improving the outcomes for the people of Scotland.

Vicky Irons: I will build on the points that Stephen Brown made. I would go further and say that, if we had not had the foundation that we had established through our health and social care partnerships, the response to the pandemic would have looked markedly different.

I still vividly recall the first few months of the pandemic response, mainly because I had been in post in Dundee for only three weeks at that point. It was evident that, because we had robust, integrated and self-starting teams that did not necessarily require huge amounts of direction to do the right thing, the resilience response that was mobilised was quite phenomenal. For example, on the first weekend once we realised that there was going to be a problem with Covid, our general

practice out-of-hours service established a treatment and assessment centre. We were also integral to the development of our testing services for all staff and, latterly, for the public as that service was rolled out, and, further down the line, to the development of the vaccination service.

10:45

The key thing that we all need to remember is that, in those early days, we were doing everything within our power to protect the capacity that we had available in our acute hospitals, which meant that the majority of people's care needs needed to be met in the community. For our staff, that was both a frightening time and quite an exhilarating time as they maintained care in people's homes and the care that we were providing in our care homes. They did that very well.

I reiterate the point that Stephen Brown made. When you move into resilience mode, decision making becomes much quicker and easier. We were welcomed into local resilience partnerships with open arms in order to mobilise efforts across our local communities. I feel that it is worth reiterating that.

Allen Stevenson: I will build on the points that Vicky Irons and others have made about the level of flexibility and resilience. When Covid struck, despite the level of fear in our communities, our staff group stepped forward into the breach. That included our district nurses, our care-at-home staff and our colleagues in the third sector. In my 25 years as a social worker, I have never seen the system come together as well as it did in those early days. Despite the level of uncertainty, our staff, including those in the health board, stepped up. Staff from Inverclyde Council asked whether they could get training in order to help with care at home. In addition, our third sector colleagues stepped in to set up a humanitarian helpline so that people could get a response from people. Therefore, through partnership working in the wider system, we could enhance the offer that statutory services were able to provide.

Having come through that experience, I think that how the whole system reacted to the pandemic will always be in my head. People stepped up and thought about how we could keep the most vulnerable people safe through flexibility and agility.

Similar to what Vicky Irons said, within the first few weeks, we had set up a testing centre in Port Glasgow, at the side of the health centre. We then had the Army in to help us. All these things were coming one after the other, but staff across all levels of the organisation—from those in leadership, such as service managers and team leaders, to staff on the ground—stepped forward

and put their own fears to the side. That will be my memory.

We should never forget that whole-system response. In fact, we should celebrate it and think about what that tells us about our capacity as we move forward with this latest iteration and think about what the new national care service might look like. The response needs to be not just from statutory services but from our wider group of colleagues, who have a vast amount of experience. A lot of the answers lie in that wider response to health and social care.

The Convener: Paul O’Kane has a short question.

Paul O’Kane: We have heard about local working at officer level, but I am keen to get a perspective from the boards themselves. How important is that democratic representation, with elected members able to scrutinise the work of health and social care partnerships and chief officers? Those people know their communities and have been elected to represent their communities. I say that as someone who served on an IJB in a previous life. I wonder whether Judith Proctor might want to share her view on that.

Judith Proctor: The make-up of the board and its interest in the work that you do are crucially important. Central to that is the fact that a board has its own personality and is a public body in its own right. Both IJBs that I have worked with have tried hard, with the chair, the vice-chair and all members of the board, to create a culture in which it is not about two different types of appointed people—elected members and non-executives—coming together with those hats on to make decisions through that lens. As members of an integration joint board, they are there to work for the community in their area and to think differently—beyond the boundaries of the organisations that they come from. That is really important.

Non-voting members of the board are also hugely important to us. In Edinburgh, we take the approach that the board includes everyone round the table. Yes, ultimately, if we need to vote, only some members can do so, but we have had a vote on only, I think, one occasion. We make decisions through broad consensus that we are doing the right thing and that we have agreement on our proposals. The voices of lived experience—people who work in our services and our professional representatives—are hugely important in helping the whole board to make decisions.

The role of local democracy is, of course, important. We link through the elected members who sit on the board, but they, of course, are not representing their communities—[Inaudible.]—on

the board. We try hard to work with our local politicians, including those who are not on the board, because the experience and knowledge that they bring from their localities and from their casework are hugely important in helping us to understand how our services impact people on the ground. For example, we hear that, sometimes, we get things wrong, and we can learn how to do things better. Working through local democracy is hugely important, as is working with third sector organisations, community groups and the people who represent those groups.

We have taken seriously planning at the level of the locality in relation to how people work with their communities. Edinburgh is a large and diverse city, so we work with localities to ensure that, as far as we are able to, we shape our services to the needs of those communities. The experience and knowledge of local elected members, including those who sit on the board, are important in that regard.

As a chief officer of an IJB, I think that it is more important that the board recognises that it is a public body in its own right. Vicky Irons talked about tension earlier. As you might have experienced, the decisions of elected members who sit on an IJB can sometimes be counter to the views or directions of a certain group on the council or of the whole council. It is quite a difficult role for elected members and, indeed, for non-executive NHS directors to sit on the board and to hold in their heads the board’s ambitions while driving those forward through strategic planning and through—

The Convener: Thank you. I ask everyone to be mindful of time in relation to the length of both questions and answers, because we have a tremendous number of questions still to ask. If our witnesses want to add anything to what has already been said, please use the chat box to do so.

Gillian Mackay: I just have one question, which I will direct to Vicky Irons. What impact does confusion about lines of accountability have on the planning, quality and delivery of services?

Vicky Irons: The major impact relates to the pace of change, because if there is an expectation that, before any significant decision is taken, the pathway has to involve the health board and the local authority as well as the IJB, that affects the ability to make decisions timeously. That is the major impact.

There could also be an impact depending on whether there is a different sense of priorities across the two public sectors that make up the health and social care partnerships and that form the IJBs. When that is the case, there can be an

impact in being able to align priorities in order to move forward with decision making.

Tess White: The Convention of Scottish Local Authorities responded to the National Care Service (Scotland) Bill consultation. I will give a straight quotation, then I would like Allen Stevenson first, then Stephen Brown, to give quick responses, please. COSLA said:

“Structural change typically fails to address long-standing systemic barriers, with integration being challenged by a lack of resource, infrastructure, and staff. As things stand, we risk repeating the cycle of successive reorganisations that change how services are planned and coordinated—and come with a significant opportunity cost and disruption—but fail to address the fundamental and deep-rooted changes needed to integrate services at the front line.”

Are you concerned that all your hard work over the past few years could be undone?

Allen Stevenson: Thank you for that question. Inverclyde IJB’s response to the committee talked about the fear that we are spending a lot of time going back over things that we should not be spending time on, and that we should instead be learning from successive changes. That worry and fear was not there, initially. When the national care service idea came up again, there was a great deal of enthusiasm and excitement, but with the passage of time there has been more concern that we will spend too much time thinking through things to which we already know the answers. There is a fear that a lot of energy will be spent on structures when we should be looking at outcomes.

It is for us, now, to make sure that we play a full role, as thinking develops with the senior leaders and other parts of the services across Scotland, so that we ensure that we shape services properly. COSLA is merely highlighting the genuine concerns that many colleagues whom I work with have spoken about, and the potential to score an own goal if we do not make the most of this opportunity. It is reasonable that experienced senior leaders who have been through many changes would have that fear: we need to make sure that we shape the national care service.

The Convener: Before I bring in your colleague, will you say whether you are being given the opportunity to be involved in shaping the national care service?

Allen Stevenson: There are ongoing conversations that Judith Proctor and Vicky Irons have been involved in with various bodies that represent us well: for example, we have our chief social work officer group. A lot of weight is attached to all the things that we will be talking about and we have been assured that we will have our opportunity to shape the service. We look forward to being at the centre of the discussion

and are committed to making this work; none of our colleagues would say they are not interested in playing a full part. The challenge is there in front of us now to fully inform how we shape the service.

Stephen Brown: I agree that there is certainly nervousness about needing to spend a lot of time, effort and energy looking at our structures when we need to focus absolutely on the needs of our communities. We recognise that we have, for all the reasons that everyone at the table knows, come through two of the most difficult years, during the pandemic. We know that many of our older people became deconditioned through that period. We know that many routine operations had to be put on hold and we know the impact of that, and we know that there was an impact on people’s mental health. There is emerging need as a result of our coming out of the pandemic, which we need to be extremely focused on.

We have also to add in the financial instability across the world, the cost of living crisis that people face and the impact that that can have on people’s mental and physical wellbeing and health, so we need absolutely to be outward focused in our efforts.

I suppose that there is a question about how much time we spend on huge structural change. Again, it is about striking a balance. There is no doubt that structural change can make a difference. Vicky highlighted quite clearly at the outset the significant impact of the changes that we made for establishment of the IJBs in the first place, and the progress that was made through the early days of that. There is no doubt that structures can help to facilitate the work that we do, but there is a balance to be struck in terms of being outward focused and, at the same time, making sure that we have in place the proper structures that will help us to deliver that.

The Convener: Thank you. I will move on to questions from Stephanie Callaghan.

11:00

Stephanie Callaghan: On leadership and chief officers, Vicky gave a good description of how difficult the role is when it is subordinate to chief executives of other bodies. We had a ministerial strategic group on how to improve collaborative working. How are the chief officers of IJBs currently supported and how do we help them? What changes do we need to make so that they have the power to lead effectively?

The Convener: Judith—that seems like a good question to put to you.

Judith Proctor: Thank you for that question, which recognises the uniquely difficult role that

chief officers have in health and social care integration. All leadership roles at that level could be challenging, but there is certainly a unique aspect to the multiple lines of accountability that chief officers have that make it difficult.

There are a number of things to say in that regard. First, it needs to be recognised that we want leaders to come forward across the public sector in Scotland and that we want to see leaders being developed. We want to see people thrive in those roles and to have opportunity within them. It is important for us, as a system, to think about succession planning and where the opportunities are for the leaders who are coming through. I know that there are new approaches to that. There is a strategic leadership programme that is starting this week. An important part of that is a look across sectors.

In the current cohort of chief officers, we try as a group, in Health and Social Care Scotland, to support one another. We will get back together again in person for development days to develop our role as an organisation and as a group, in terms of being the collective voice of chief officers.

How do we influence the wider system? Sometimes it can be quite difficult in our own systems to influence things because of multiple tensions. It is important: there has to be recognition that when chief officers require support, we need a route into the Scottish Government. Again, we try to work with officials there to cultivate that. However, the crucial thing is that we are able to prepare and support leaders for the future, in our national approach to the service and to their development.

Stephanie Callaghan: Thank you. That was helpful. Is that at the centre of the high turnover in leadership of IJBs? Should we be doing anything in addition to what you have said to try to prevent that?

Judith Proctor: That is a difficult question. There are two interpretations of why there is high turnover among chief officers. One is—we have seen this—that a number of chief officers have gone into what we might think of as promoted posts as chief executives of local authorities and health boards. There is something to celebrate, in that the experience of doing this challenging job develops people as leaders in the public sector in Scotland.

Undoubtedly, some attrition has come about because of difficult multiple reporting. Some of the questions earlier about simplification, streamlining, and ensuring that chief officers can represent the change that they try to deliver, and that they can represent their organisations clearly, will be important in the new arrangements, so that their

voice is not compromised by tensions that are inherent in the current model.

The Convener: Emma Harper has questions on performance.

Emma Harper: Good morning everyone, and thank you for coming today. I have a couple of questions about performance. Integration authorities have been required to report on a core suite of integration indicators within their annual performance reports. The indicators were developed to allow integration authorities to review progress towards health and wellbeing outcomes. The frameworks and the papers seem to be pretty straightforward.

I am interested to know whether appropriate measures and indicators are in place to track progress in integration. If not, could you suggest something that should be added that might be more appropriate?

The Convener: Who would you like to direct that to, initially?

Emma Harper: That is for Vicky or Judith.

Judith Proctor: We use a core suite of indicators. On balance, they are useful for telling us how we are doing in terms of local progress—how well we have performed in Edinburgh since the inception of integration and whether we are going in the right direction. They are helpful for that.

Also, we can see our position relative to the rest of Scotland. Most of us will add to our annual performance reports relevant local parameters and indicators that we think are useful, so you will get that local flavour. We will all have in place a local performance framework that we will develop and which will go beyond the annual performance reports, and will go into other services. Partnerships that go beyond the bare minimum with the integration scheme will include in their performance frameworks delivery of justice services, children's services and so on. Those will need to be reflected.

One of the hardest things to reflect in indicators at that level is the experience of people on the ground. We have talked before in this committee and its predecessor about how to measure the impact of prevention and early intervention. We struggle to articulate good indicators around those. Of course, some of the longer-term changes that we try to put in place to reduce the impact of health inequalities and to narrow the gap are harder to implement.

For us, certainly—Edinburgh will not be alone in this—some of the challenge is about having the resource to deliver that complex level of analysis of the population. There is always room for change and improvement, but the suite that we have has

been useful. It is the one that we have used over the years; we are certainly able to measure progress against some of the challenges. For us, a challenge remains in respect of discharges, but we are seeing progress against the indicators. If we change some, it will be important also to take forward some of the ones that we use now, so that we do not start with a completely fresh page and therefore cannot measure progress from where we are now into the future and—[*Inaudible.*]

Emma Harper: Thanks for that response. You mentioned particular local issues that you measure, which is probably quite important in relation to rural areas versus urban areas. Integration authorities such as those in Dumfries and Galloway and the Scottish Borders are for pretty rural areas. Are you able to give a particular example of what local performance measurements you use and of successes that you feel have been good and need to be reported on, so that we can continue to build on them?

Judith Proctor: We look at variance among our localities. We operate four localities in Edinburgh in order to try to ensure that we plan and deliver at a realistic level. Our four localities are large—they are as large as some partnerships in terms of the population that they cover. At least, that gives us a greater opportunity to respond to the communities in a locality. We look at and report on variance and difference in localities, which helps us to think through the relative amount of resource that we might put into one area as opposed to another. It also helps us to think about where we need to undertake work on quality and where we need to achieve consistency of approach so that we deliver the same outcomes for people in one area as we do in other areas. That is why it is important that we look at our population and structures and report on changes.

We look, for example, at why levels of welfare guardianship in some areas are higher than they are in others, which could impact on our performance and therefore on the resource that we need. I point to that as one area in which it is helpful to think and respond locally to what we find.

Vicky Irons: I will briefly build on that.

I agree with Judith Proctor. The evolution of the annual report and the performance measures within it are useful and are a continuous method through which the IJB can gauge whether we have been making progress.

It is also fair to say that since we established the requirements a lot of service development has evolved that is not necessarily covered. In the local IJB, I have heard a request for information that is more up to date, because the process in

itself can be considerably out of date in terms of data capture—sometimes by a year or 18 months.

Also, I have had a request for us to represent the work that we do. That would be one thing that I would want to be emphasised in moving into new arrangements. Many of the activity performance measures, such as those that look at voids and waiting lists, which we are judged against, essentially identify all the work that we are not doing. There is often such a particular focus on that that it feels, from a chief officer's perspective, as though the only measure that we are ever judged on is our delayed discharge figures. That does not reflect the activity that we do successfully.

I will give you an example of that. Although the delayed discharge figures in my health and social care partnership would look to many external people as though they are quite constant, and would look as though they are not necessarily improving, they mask a 20 per cent increase in demand that we have covered and for which we provide care. We also now have in place a new measure around discharge without delay, which indicates that Dundee's performance on the number of people whom we discharge without any delay at all is between 97 per cent and 99 per cent.

For me, the emphasis needs to be on valuing things that we do well that we can report back on, as well as on performance measures that count what we do not so well but which we continue to try to improve on.

Emma Harper: We heard that, during the pandemic, you had some teams that were self-starting, and there has been good experience of how to support getting people out of the hospitals. There was an issue with that in the early part of the pandemic. I want to hear your thoughts about integration partners and whether they all collaborate effectively. That is about improving performance on the basis of the outcomes and the data indicators. If there are challenges, how do you foresee overcoming them?

Vicky Irons: In my experience, that is one of the areas that have thrived under integration, in that the teams that support pathways of care—from care of the elderly and consultants in the acute sector right through to primary care practitioners and the third sector, which Judith mentioned—are all pulling in the same direction. We have completely integrated teams available across the localities—that is certainly the case in Dundee city, and I know that it is the case in other partnership areas—that work on a cycle of continuous improvement.

The challenge and the demand for our services never stand still. We have all witnessed quite an

increase in the level of complexity of the people we need to support, as well as in the volume of people requiring care through our systems, literally from end to end. We have a completely integrated process in place across the pathways, and our teams are integrated in how they are deployed daily. The level of improvement and collaboration that you are asking about is present, without a shadow of a doubt, and it is present daily. We need to safeguard that and make sure that it forms part of the foundations of whatever arrangements come into place next.

The Convener: Vicky, I would like to pick up on something that you said in your earlier answer to Emma Harper about how the focus on delayed discharge can, in fact, mask quite a lot of the positive things that have been achieved, such as the flow of an increased amount of people out of hospital and into care settings and their getting the support that they need from the IJB and the people you employ.

We often hear that people are not coming into the care sector or are leaving the care sector because they feel demoralised. Is the way in which the good performance and the achievements that are being made when you meet the demand—in, as you say, a challenging situation—are being reported in the public discourse part and parcel of why you have challenges in terms of people's morale?

11:15

Vicky Irons: Yes, without a shadow of a doubt. The reality of being under constant scrutiny but also feeling like you are on the end of a continual stream of criticism can be very demoralising. These are increasingly really tough jobs to fulfil, dealing with lots of people with cognitive impairment and lots of complex care needs and dealing with everything that surrounds that, as well as ensuring that we provide care in the right place and at the right time so that people are not delayed in any part of our system. That has a major impact as well.

My colleague Stephen Brown mentioned what it feels like to provide a role in care, and particularly in care at home, where you can be quite isolated in the job that you do and the service that you provide for others. There is a perception that these are stressful roles that carry quite a level of risk. As Stephen mentioned—and I think that we still have a legacy of this following the pandemic—there were times when our workforce was genuinely frightened that the jobs that they were undertaking were putting them and their families at risk. At the same time, they were under quite a steady stream of criticism for performing those roles. We have to understand that.

We are also seeing signs of trauma across the workforce. We are now trying to develop trauma-informed support services to make sure that people get the respite and support that they need to continue in their roles. However, we have seen a high level of turnover as a result of that trauma.

The Convener: Just to follow up on that, what do you think the likes of us politicians—and anyone from the media and the press, and the people who report on these things—can do to recognise more not just that it is a hard job, but that it is actually a really important and rewarding job? What should we do to be more positive, to encourage people to stay and to thank people who do that hard work?

Vicky Irons: A lot of that comes with true recognition of the roles that people undertake. I am sorry if I have misremembered this, but I think that there was something in the Derek Feeley report about parity of esteem, as well, and about people in caring roles being valued not just by us and you, but by the public as professional and essential roles on the health and social care spectrum. Sometimes, it is felt that clinical and nursing roles, in particular, are held in higher esteem. There is something we can do both to raise the profile of what people do and to value, reward and recognise it.

The Convener: Thank you. I see that Judith Proctor wants to come in. I will come to Judith and then Allen Stevenson.

Judith Proctor: It is a good question and so important. One of the lessons that was learned through the pandemic is the absolute value and importance of these roles in people's lives. There are practical things that we can do. We can think about terms and conditions—that is important; it is a difficult job, and we should value it and the way that people experience doing it—but there is also something about how we create career pathways into care and from care into other roles. I know that most of us, as chief officers in our partnerships and with our health boards and councils, are looking at that.

Also, as a nation, we have to open a conversation about what it means to be a carer. Some of the images that we see are probably not realistic. We see recruitment campaigns where somebody is having a cup of tea with somebody—that does happen, but it is also a highly pressured role. We need to show that and shine a light on the real work and its importance.

I welcome what was said in the Feeley report about that, because Feeley absolutely recognised the need for us to elevate our support for and esteem of these crucially important roles.

The Convener: Thank you. I will bring in Allen Stevenson.

Allen Stevenson: Judith Proctor has covered the point. I suppose that there is more of a focus on the health and wellbeing of our staff now. Each of the health and social care partnerships has put a lot of time and effort into looking at how we can support our staff groups around their health and wellbeing. Undoubtedly, people are tired. They are physically and emotionally tired, having come through the past two years.

Many of the partnerships have active recruitment campaigns. In Inverclyde, we have one for our care-at-home service, which kicked off again last week, to encourage people to think about a career in care. There are far more opportunities to move into care at home, and there will be other things that people can do after that. A big focus on health and wellbeing has to be the way forward.

I was a mental health officer when the Adults with Incapacity (Scotland) Act 2000 came in, and the Scottish Parliament has a role in that it can bring in innovative legislation. I know that there have been issues with AWI, but someone asked about the role of the Scottish Parliament. Yes, there is a big role for it, because legislation can be helpful. There is a huge challenge for us, now, in supporting the staff across the sector. No one becomes a registered social worker in order to be popular—people know what comes with the territory. But we need to protect our staff, whether they are nurses or allied health professionals.

The level of disquiet among some people in the community towards our staff has been an issue for us, and we have had to work hard to do everything we can to promote health and wellbeing. The committee would want to know about the health and wellbeing work that is going on across Scotland to support our staff in whatever role people currently work in across health and social care.

The Convener: Thank you very much. Tess White has questions about strategic planning.

Tess White: Thank you, convener. Allen Stevenson said that people are tired because we have been through a difficult period in the past two years. What work is going on at the moment to integrate service delivery? Has it stalled? Has the National Care Service (Scotland) Bill taken resources away from forward planning in this area? My question is about bandwidth.

The Convener: Will we go to Judith on that?

Judith Proctor: Sorry—your sound cut out for a second. Would you mind briefly repeating the question?

Tess White: My question is about bandwidth. Everybody is tired and fatigued after the past two years. What work is going on at the moment to

integrate service delivery? Has the National Care Service (Scotland) Bill prevented forward planning in this area, because there is only so much that you can do?

Judith Proctor: Thank you for that question and for repeating it for me. There is a real risk that we are focusing on what we need to do to work towards a national care service. It is not exactly that we have taken our eye off the ball of what we are doing now, but it has disrupted our ability to look to the longer term. Ideally, our strategic planning will look beyond the three-year cycle that we have and to what we want to achieve in 10 years.

You could integrate that with the intent around the bill and the Derek Feeley report. We could be working, as we already are, on things like ethical commissioning. That should be a principle of how we commission anyway, so that should not be knocked off course by the work around the national care service. However, as more of the detail around the NCS is made available and comes through the co-production process, there is a real risk that we will begin to feel the tension between the current direction of travel—planning, relationships and allocations of budget—and what we are required to do around the national care service. That is a real issue.

The questions at the start of this session were all focused on the process of how we integrated back in 2015 and 2016. At that point, of course, we had the change fund to support us to increase our capacity and do some double running of that element of our work. Those arrangements and how we are supported to potentially double run as we transition from our current situation to the future will be important. There is a risk.

We are experiencing some of that issue with bandwidth now, because we all have a longer-term direction of travel to create sustainable and transformed health and social care services within the challenging budgets that we have, but we also need to focus significantly on winter planning, which is now a year-round activity—surge planning—as well as future waves of Covid, around which there is uncertainty. We now have an almost permanent focus on the vaccination programme, which is hugely important, and the sheer challenge that we all have in addressing this stage of the pandemic and the consequences of the past two years. The bandwidth issue relates not just to the NCS, but to the sheer pressure, demand and need for change.

The Convener: I will bring in Sandesh Gulhane, who is joining us remotely.

Sandesh Gulhane: I listened to Vicky Irons speaking. As a doctor, I, too, am confused about where IJBs sit. There is confusion about authority,

governance and lines of accountability, so what she said makes real sense to me.

In relation to the National Care Service (Scotland) Bill, Audit Scotland said:

“A clearer line about Care Boards superseding Integration Authorities and the timeline for this would have been beneficial. This would assist current Integration Authorities ... with medium- and longer-term planning.”

Do you agree? Are you concerned that the bill as drafted is undermining such medium and longer-term planning?

Vicky Irons: The point about undermining medium to long-term planning potentially builds on Judith Proctor’s response to the previous questions. There is absolutely a requirement for planning. Our planning cycle is pretty much continuous these days but, particularly after Covid, each IJB has had to go through a refresh of its strategic plans to ensure that we can bank the gains that we have made on integration throughout the resilience response, and that we understand exactly how demand has changed as a result of Covid and can refresh our strategic plans and respond to that. As I mentioned, we have seen a 20 per cent surge in demand for care at home, which cannot be explained by demographic change. Something else has shifted throughout that period.

Earlier, my colleague Stephen Brown referred to the excitement that was there when we were first established. That is perhaps not present at the moment, and that leads to a bit of a risk of interruption of the planning cycle. There was a real desire to do things differently and an excitement about change and integration and what progress could be made. That has been dampened down recently, and that is partly because of the fear of the change that is ahead. People are wondering whether, if we go for significant strategic shifts in care, there might be a point in time in the next couple of years when the rug is pulled from underneath that.

That is a potential risk. That is more about feelings than any particular infrastructure or planning process that we have in place. In essence, it is the role of a chief officer to ensure that motivation is still present and that all our partners are willing to tie into that. That is our challenge in seeing us through this period of change, and we are certainly up for that challenge.

Your other question was about Audit Scotland’s reflections on the streamlining of accountabilities. I agree with that point in general, but I will flag up another area of concern from a chief officer perspective, which is about the possible development of a national care service in parallel with a national health service. We are worried that we will lose the gains of all the work that we have

done on the integration of health and social care. From a personal perspective, I think that we have perhaps missed an opportunity in not building a national health and social care service as opposed to having two parallel national bodies and two parallel boards that will be present in local systems. That is one area where there is potentially a missed opportunity in the proposals that have been set out so far.

The Convener: We will move on to talk about collaboration in the third and private sectors. Paul O’Kane has questions on that.

11:30

Paul O’Kane: I will start by asking for another reflection on integration. To what extent have the legislation and guidance allowed for effective collaboration with the third and private sectors?

Stephen Brown: There is no doubt that they have helped to facilitate relationships across the statutory, third and independent sectors. As was described earlier, the make-up of the joint boards and the input of various bodies and key stakeholders—from service users and carers through to trade unions, staff side and third and independent sector representatives—have all helped to shape the delivery models across the piece.

In Orkney, we do not have an independent sector. We have a thriving and mainly locally based third sector, the work of which is incredibly valuable to the system. It is truly integrated not just in our health and social care landscape but right across the community planning partnership arena, and it is an active partner in that.

For example, the third sector helps to lead on our delivery of distress brief interventions. Age Scotland Orkney works in collaboration with psychiatry, social work and others on the delivery of many of our pathways around dementia diagnosis. All that continues to thrive under the current circumstances.

In my experience, the legislation, the make-up of the integration joint boards and the approach to strategic planning have certainly assisted with some of that collaboration.

The Convener: No one else has asked to come in, so I will go back to Paul O’Kane. If anyone wants to come in, please use the chat box to let me know.

Paul O’Kane: We have already touched on some of the points that I want to raise in talking about the governance and scrutiny in IJBs and having different partners round the table, particularly third sector and trade union colleagues and others. Sometimes, people are present and are asked to leave when a vote happens, or they

are at the table and do not have a vote. To what extent does that fray or fracture relationships and affect people's ability to make a meaningful contribution?

Judith Proctor: I am happy to come in on that, because it is important. Certainly, in my experience, an individual would be asked to leave the meeting room when a decision is being made only if there was a potential conflict of interest through the register of interests. As I said, the chairs and vice-chairs of the IJB have worked hard to have the board act as a whole board and to make decisions by consensus. We have definitely taken that approach in Edinburgh. As I said, we have only ever had one vote, and that related to the day of the week on which we would meet.

From that, our non-voting members articulate a sense of being part of the decision making and having an equal voice on the board. We talk about the issue because, although they feel as if they have an equal voice on the board, under the legislation, they do not, and that has to be explored. However, the challenge for any individual undertaking the role is one of representation and how representative of a community they are.

As a result of having those voices round the table, we have a far richer, better and more reflective conversation about the challenging issues that we consider. The fact that we have already worked through some of those difficult, innovative and challenging matters with the voices in the room then helps us to work with our workforce and communities on implementation of those.

Allen Stevenson: Similarly, in Inverclyde, we have not had to vote, which is remarkable when you think of the complexity of some of the issues that we discuss. That is because we work very much as a team.

It is interesting that, in relation to the new national care service, there is talk about a change and everyone having a vote. During the shadow year, folk were concerned about the vote and how it was split. In my experience, having worked in Argyll and Bute for 13 years and now in Inverclyde for five, the issue has not been as big as some people thought it would be. We have always managed to work in a way that gives all the people round the table the opportunity to contribute, and that shapes our decision making.

An interesting discussion has reared its head about broadening out the voting in the new national care service but, certainly in Inverclyde, we have not had to vote on any of the issues, because we have worked together with the IJB members. We have things such as development sessions outwith the IJB when there are particular

pieces of work that people feel there might be problems with. The IJB will run development sessions so that the chief officer can work through issues in a non-committee setting where folk can ask all their questions and get assurance. Then, when we come together, it is more likely that we will get a joint response from people, because they have had the opportunity to be involved in the discussion.

The Convener: We move on to questions from Carol Mochan on financial integration.

Carol Mochan (South Scotland) (Lab): I think that everyone would recognise that, over the time in which there has been integration, financial integration has been one of the key factors that have been difficult. Will each of the panel members discuss why, with hindsight, they think that that has been the case? Realistically, with the Government saying that financial strains are ahead, how likely is it that better financial integration can be achieved? How can we get the organisations to work together on the budgeting?

Judith Proctor: The financial planning and budgeting in our integration arrangements is complex. As chief officers, we try very hard—I will speak from my own personal experience—to work in parallel with the financial planning arrangements and timelines of both our partner organisations. However, our NHS board and our council work quite differently in their budget setting, of course, and there are different statutory requirements on them.

In my experience, the best way through that is with solid tripartite arrangements and relationships between IJB officers, me and my chief finance officer, and the directors of finance in the council and the NHS board. We have monthly meetings in which we are able to air all our issues, work on the basis of no surprises, and support the robust discussions that we need to have as an IJB and the influence that we must try to bring to bear on our partner organisations in respect of allocations that we think are fair.

Our biggest challenge in Edinburgh is the structural deficit. When the board was set up, there was a £25 million gap, which we have never managed to repair. Therefore, we have significant year-on-year savings to achieve at the same time as we try to develop and sustain services. Some very difficult decisions have to be made. That requires the IJB members to work hard together with us as officers in identifying savings programmes that can be delivered without undermining our ultimate strategic direction and that do not cause us to reduce performance beyond an acceptable level. That is very challenging.

One issue, of course, is that the landscape is very challenging for our councils and our health boards, as well. We are all in the same game. That is why it is really important that we plan together.

On the future position, again it comes down to streamlining, looking at the arrangements that we have in place, and working through things. If we really want to create agility of services close to people to achieve the outcomes that we are trying to achieve, how can we reduce the bureaucracy and the time that is spent on budget setting in the new organisations? Derek Feeley referred to direct budgets to the new organisations as one way of doing that. I expect that that will be being explored in the discussions about the NCS now.

Carol Mochan: Will one of the panel members from one of the other IJBs contribute a wee bit to the discussion?

The Convener: No one has asked to come in, but does anyone want to do that? Maybe we can go to Stephen Brown.

Stephen Brown: I agree entirely with what Judith Proctor has already outlined. It is inevitable that there are always tensions in the lead-up to every financial settlement and into the new financial year. As members can well imagine, those tensions are heightened with the pressures on council budgets and NHS budgets and, as a result, pressures on the IJBs.

In my experience as chief officer of two IJBs and from working in two different areas, I recognise that relationships are the key element of all of that. As Judith Proctor has outlined, we must ensure that we regularly meet finance colleagues across the piece, including the chief finance officer of the IJB and council and NHS colleagues. Where there are tensions and people's priorities are maybe not always aligned, council plans, community planning partnership plans, clinical strategies, IJB strategic plans, all the work that goes into creating those at the local level, and making sure that they are as aligned as they can be help in making decisions around budgets, priorities and so on.

I recognise that I have maybe been fortunate in my own experience, but things can get very tense for colleagues across the country. There is no doubt that one way of sorting that would be through the NCS at the local level being directly funded in a way that would eradicate some of the tensions and discussions that inevitably take place every year, rather than relying on the contributions of the delegated services from the councils and respective NHS boards.

Carol Mochan: Does any particular area cause the most tension, or do things depend on what you are discussing at the time?

Stephen Brown: Various things can do that. As members can imagine, when councils, for example, look across the piece at where their opportunities are for managing within their financial envelope, they make decisions across not only health and social care priorities but across development, infrastructure, economic development, housing and education. All those things are in the mix. The council may well have a view that is different from those of the NHS board or the IJB about where some of the priorities may lie. It is about trying to navigate our way through the challenges relating to what the resultant and expected savings might be in how councils and NHS boards prioritise in the settlements.

For the past couple of years, most of the settlements have been fairly straightforward in relation to—[*Inaudible.*]—are passed through from councils and the NHS when they receive their settlements. There has been clear direction, which has alleviated some of the challenge in the system. However, that is probably not a sustainable approach.

I do not know whether that helps to answer the question in a bit more detail.

The Convener: We have gone over time, but I am conscious of the fact that Allen Stevenson and Vicky Irons would like to come in. I ask them to be brief, please. It has been a very busy morning, and we still have quite a lot on our agenda in private session.

11:45

Allen Stevenson: I will be brief.

Part of the frustration in relation to our response on the national care service is that we in Inverclyde are very fortunate in having NHS Greater Glasgow and Clyde and Inverclyde Council as very supportive partners. The council has continued to invest in services for us for many years, even when things have been tight. We have a new £7.4 million learning disability hub, which was signed off last year. Sometimes it feels as if we are trying to sort something that is not necessarily broken.

We are fortunate in Inverclyde in that we have had two partners that have been very sympathetic, that have worked with us, and that have a history of working with us to invest in services. We appreciate that things may be a bit more challenging in other areas, but there is a sense of frustration because so much good work is going on across the partnership in Inverclyde on finances, which are potentially very difficult.

That gives members the perspective that good things are happening, and there are good conversations between the appropriate officers,

chief officers, chief financial officers and chief social work officers. We should not forget that as we think about how we can move forward and make things better across the piece.

Vicky Irons: I, too, will be brief.

I want to say something that was noted throughout the Derek Feeley report. The original intent that underpinned the integration legislation was that the resources would lose their identity, and we would be able to deploy a completely integrated financial resource in line with our strategic plans. Largely, however, that has not happened throughout the development of the integration authorities. The main reason for that is that the resources that are delegated to us come in the form of our workforce. That makes up the major component of our financial resource because we do not, of course, have delegated responsibility for capital assets or other financial issues.

A lot of restriction comes with that. If there is anything that we need to learn from that to roll into new arrangements, it is that we should try to establish a new authority or a new health and social care board that has the full capacity to distribute the financial resources and to influence the human resources that form part of the organisation in an equal way.

We have a reservation. There is a suggestion that the new boards will have employing rights and controls over one part of the workforce and not another part of it. Quite a lot of restriction will come with that when it comes to managing the financial resource and strategic planning.

The Convener: I thank our four panel members for their time.

In our next meeting, the committee will begin its scrutiny of the National Care Service (Scotland) Bill.

That concludes the public part of our meeting.

11:47

Meeting continued in private until 13:00.

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