



**OFFICIAL REPORT**  
AITHISG OIFIGEIL

# Meeting of the Parliament

**Wednesday 28 May 2025**

**Session 6**



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# Scottish Parliament

Wednesday 28 May 2025

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

## Portfolio Question Time

### Rural Affairs, Land Reform and Islands

**The Deputy Presiding Officer (Liam McArthur):** Good afternoon. The first item of business this afternoon is portfolio question time. The first portfolio is rural affairs, land reform and islands. I advise members that there is a lot of interest in supplementary questions. I will try to get in as many as possible, but questions and responses will need to be brief.

#### Muirburn Licensing

**1. Murdo Fraser (Mid Scotland and Fife) (Con):** To ask the Scottish Government what action it is taking to address the reported concerns of stakeholder organisations within the muirburn code working group regarding the commencement and practicalities of muirburn licensing. (S6O-04704)

**The Minister for Agriculture and Connectivity (Jim Fairlie):** NatureScot has been working closely with stakeholders through the muirburn code working group to ensure that their concerns have been accounted for in the development of the muirburn code and the licensing scheme. On 4 June, I am due to meet stakeholders who represent the muirburn code working group and are concerned about the content of, and conditions in, the code and the associated licensing framework. Although I understand that some stakeholders have concerns, the code and the associated licensing framework have been introduced to ensure that muirburn is undertaken in a safe and environmentally sustainable manner.

**Murdo Fraser:** It is now very clear that NatureScot's approach to muirburn licensing is unworkable and is causing serious concern among stakeholder groups. Eight organisations that represent various opinions on the matter, including Scottish Land & Estates, NFU Scotland, the Scottish Crofting Federation and the Scottish Gamekeepers Association, have written to the minister on two occasions, and have proposed good-faith solutions to help to ease the burden that is associated with surveying land for peat depth. Current survey requirements define peatlands as areas where peat is deeper than 40cm, but no national data exists on that 40cm threshold, thereby rendering the peatland maps

that NatureScot produces completely meaningless. Will the minister urgently consider temporarily amending the definition of peatlands to reflect a peat depth threshold of 50cm, which would considerably assist land managers?

**Jim Fairlie:** Clearly, we are in the early stages of this process. The legislation that was passed on the issue included a threshold of 40cm. A number of tools are being used to gauge the difference between the 40cm and 50cm thresholds. As I said, I will meet members of the muirburn code working group next week, and those issues will be raised and aired then.

**Jackie Dunbar (Aberdeen Donside) (SNP):** What reassurance can the Government provide to land managers on the implementation of this legislation and on seeing that NatureScot works with land managers timeously to ensure that the legislation is workable and that the vital management tool of burning is accessible?

**Jim Fairlie:** NatureScot has been working closely with land managers since September 2023 to ensure that the legislation is workable in practice. It has produced the methodologies for identifying peatland and non-peatland areas. Those methodologies have been made available to land managers to allow them to prepare for the legislation that is coming into force. A simple application process is being developed, and feedback has been sought from stakeholders. Users have tested a prototype, and feedback is being used to ensure that the process is user-friendly.

Furthermore, NatureScot has agreed to allow practitioners to fulfil the legislation's training requirements by completing only the online part of the muirburn training course this season, to provide more time for the practical elements to be completed. NatureScot will remain on hand to assist applicants for muirburn licences. As I mentioned in my answer to the previous question, next week I will meet stakeholders who have expressed concerns.

**Colin Smyth (South Scotland) (Lab):** Will the minister commit to there being no delay in implementing the new regulations, which were due to come into force this April? I am really concerned about his comments on peatlands. Will he categorically rule out changing the threshold from 40cm to 50cm, given that we have not even implemented what the Parliament agreed to?

**Jim Fairlie:** There are no plans to change anything at this stage.

**Beatrice Wishart (Shetland Islands) (LD):** Given the importance of muirburn, its role in managing fuel loads to mitigate wildfire risks, and the timescales that we have heard about, what will the minister do to ensure that licensing

applications are as informed and as accurate as possible?

**Jim Fairlie:** In the interests of brevity, I will very quickly point out to the member that protection from wildfire is a licensable purpose for muirburn.

### **Wildlife Crime (Beaches)**

**2. Roz McCall (Mid Scotland and Fife) (Con):** To ask the Scottish Government whether it will take action to deter wildlife crime on beaches, particularly over the summer months. (S6O-04705)

**The Minister for Agriculture and Connectivity (Jim Fairlie):** The Scottish Government works with a number of partners to raise awareness of wildlife crime, and Scotland is part of operation seabird, a police-led operation that focuses on deterring the disturbance of marine wildlife across coastlines in the United Kingdom. Police Scotland wildlife crime officers will proactively patrol coastlines in the summer months, engaging with and educating the public and recreational tour operators as well as enforcing legislation that has been introduced to protect our sea life.

If a member of the public is concerned that they have seen someone commit a crime, they should contact Police Scotland.

**Roz McCall:** Tentsmuir nature reserve in my region welcomes a huge number of visitors every year. Although many visitors are respectful towards wildlife, some remain unaware that their behaviour or conduct might negatively impact on the animals, and it could result in their committing a wildlife crime. For example, in a recent reported incident, a couple walking their dogs disturbed seals, causing panic and distress for the seals—which sought refuge in the sea—which could potentially cause them harm.

Further to the minister's response, what more can the Scottish Government do to ensure that the public are fully aware of the risk of inadvertently committing wildlife offences? Will it consider holding further public awareness campaigns over the summer months?

**Jim Fairlie:** As I said, operation seabird is a national operation focused on deterring the disturbance of marine wildlife across UK coastlines. Police Scotland will ask its wildlife crime officers to proactively patrol their divisional coastlines in the summer months, engaging with and educating the public and enforcing the legislation that has been introduced to protect our sea life. That proactive engagement will be made with boat and tour operators and with members of the public who engage in seaside recreational activity, to ensure that they are adhering to the relevant legislation.

**Elena Whitham (Carrick, Cumnock and Doon Valley) (SNP):** What more can the Scottish Government do to reinforce the message that people who visit beaches, such as those in my Carrick, Cumnock and Doon Valley constituency, must act responsibly and must not interfere or inappropriately interact with wild animals when they encounter them in and around our seas? Our beaches are very busy. I think that the issue must be tackled early, and in the school setting.

**Jim Fairlie:** Whether folk are visiting beaches, forests, local parks or any other outdoor space, we expect them to act safely and responsibly when they encounter wildlife. The Scottish outdoor access code sets out useful guidance on minimising disturbance to wildlife. We ask everyone to familiarise themselves with the steps that they should take to enjoy the outdoors appropriately. As regards our coastline, the Scottish marine wildlife watching code provides further recommendations and advice on responsible wildlife watching.

### **Fisheries**

**3. Stephen Kerr (Central Scotland) (Con):** To ask the Scottish Government what new action it will take to support fisheries, in light of the European Union-United Kingdom agreement. (S6O-04706)

**The Cabinet Secretary for Rural Affairs, Land Reform and Islands (Mairi Gougeon):** As set out in the programme for government, we will continue to champion and support Scotland's world-leading fishing sector to maximise fishing opportunities and to modernise, by delivering technical and management improvements through the future catching policy and our inshore fisheries management improvement programme.

The EU-UK trade deal agreed by the UK Government disadvantages the Scottish catching sector. The deal merely perpetuates the arrangements that had been agreed by the previous Conservative Government and their failure to protect our fishing communities.

I am therefore calling for a fair share of the fishing and coastal growth fund budget allocation to be devolved and administered in partnership with Scottish stakeholders, reflecting the size and importance of fishing to Scotland.

**Stephen Kerr:** That answer confirms that the Scottish National Party Government does not have a clue whether it actually supports Scottish fishing. On the one hand, John Swinney has said that the UK Government has "surrendered" the Scottish fishing industry. On the other hand, he is campaigning to rejoin the European Union, which would result in a return to the disastrous common fisheries policy and would be even more damaging

for Scottish fishing. What is worse for Scottish fishing—the sell-out by the Labour Government or the hypocrisy of the SNP?

**Mairi Gougeon:** I would say that it is the sell-out by the Tories and the UK Government. The Tories wish to touch on our position once we are an independent country, which I am more than happy to talk about and set out. We have set out our position clearly in a paper that we published as part of the “Building a New Scotland” series, and Mr Kerr might like to take a few moments to read it. In that paper, we discuss our marine industries and the benefits of Scotland being an independent country—independent in its own right, with a seat at the negotiating table in the EU. One thing is for sure: we can negotiate for our interests there when we are independent. Whether it is Labour or Tory, the UK Government cannot be trusted to do it.

**Gordon MacDonald (Edinburgh Pentlands) (SNP):** Following Brexit, the Tories delivered a disastrous deal to our fishermen, and Labour has locked them into the same deal for 12 years. That is something that both parties should apologise for.

Can the cabinet secretary set out how the Scottish Government has supported fishers and fishing and coastal communities over the course of this parliamentary session?

**Mairi Gougeon:** We are committed to supporting our fishing sector in Scotland and we have a strong track record on that. We have set out our overarching policy as part of our future fisheries management strategy. The updated delivery plan, which we published a couple of months ago, set out how we are delivering on that.

Since 2021, we have continued to invest around £9 million each year in our science capabilities, which underpin the important work that our catching sector does. On top of that, the marine fund Scotland has delivered more than £55 million to more than 300 projects since 2021.

Therefore, we have delivered for our Scottish fishing industry and communities and we will continue to do so.

**Rhoda Grant (Highlands and Islands) (Lab):** The distribution of fishing quota remains the responsibility of the Scottish ministers. How will the cabinet secretary ensure that that public asset remains in public hands and is used to ensure that inshore operators and new entrants have better access to the industry in such a way that ensures that cases of modern slavery and human trafficking are consigned to history?

**Mairi Gougeon:** Rhoda Grant raises several important matters that I am more than happy to follow up on specifically. We consulted on some of

those matters recently and we always aim to do so in a fair and equitable way. On some of the substantive matters, I am happy to follow up in writing.

#### **Crown Estate Scotland (Borrowing Powers)**

**4. Ash Regan (Edinburgh Eastern) (Alba):** To ask the Scottish Government, in light of the Crown Estate in England, Wales and Northern Ireland being granted borrowing powers so that it can, for example, invest in energy infrastructure, what its position is on similar powers being granted to Crown Estate Scotland. (S6O-04707)

**The Cabinet Secretary for Rural Affairs, Land Reform and Islands (Mairi Gougeon):** Further detail on the arrangements under the Crown Estate Act 2025 will not be known until later this year. The Cabinet Secretary for Finance and Local Government has written to the Chief Secretary to the Treasury on those matters to stress the importance of parity of treatment for relevant Scottish bodies, including in relation to any borrowing and investment powers that may be afforded to the Crown Estate.

**Ash Regan:** That sounds as if the Scottish ministers are seeking for those powers to be granted. If that is the case, some questions need to be answered.

Before the ScotWind auction was delayed, the maximum cap was set at just £75.6 million, only for it to increase tenfold weeks later, after consultants were hired. That secured Scotland an extra £680.4 million. Global comparisons suggest that even that final figure was substantially undervalued.

Can the minister explain on whose advice Crown Estate Scotland, a wholly publicly owned body, came within days of losing out on that substantial increase in revenue, and to whose potential benefit was the initial undervalue?

**Mairi Gougeon:** The member raises questions that I would have to look into and follow up in more detail. Ms Regan—and other members across the chamber—will be aware of the vital role that Crown Estate Scotland plays in maximising the value of its assets, many of which we continue to benefit from. That includes the moneys that we received from the ScotWind process and the investment that resulted from it. I am happy to follow up with Ash Regan on the specific point that she raises.

#### **Glasgow City Food Plan**

**5. Pam Duncan-Glancy (Glasgow) (Lab):** To ask the Scottish Government what engagement it has had with Glasgow City Council regarding support for the reported development of community food production and short supply

chains, as outlined in the Glasgow city food plan. (S6O-04708)

**The Cabinet Secretary for Rural Affairs, Land Reform and Islands (Mairi Gougeon):** We engaged with partners who are involved in the Glasgow city food plan during the development of our first national good food nation plan, which covers all aspects of the food system, including community food production and short supply chains. We look forward to working with Glasgow City Council as it develops its future good food nation plan, as will be required by the Good Food Nation (Scotland) Act 2022.

**Pam Duncan-Glancy:** In order to tackle food insecurity in Glasgow, the council is looking at new models—such as buying consortia and local supplier co-operatives—that can help to grow food closer to where it is needed. The council is already doing work in that space. Will the Government commit to working with Glasgow City Council and other urban councils to embed those models in future rural and agricultural policy?

**Mairi Gougeon:** Pam Duncan-Glancy raises some important matters, and we really want to see everything that she has outlined. I have talked about the good food nation plan, which we should be introducing to the Scottish Parliament shortly. That is exactly the type of thing that we would like to see and encourage. I am happy to follow up on her question and ensure that my officials are engaged in that work. We will see what else we can do to further support that work and help it to spread across Scotland.

**The Deputy Presiding Officer:** Question 6 has been withdrawn.

#### **European Union-United Kingdom Agreement (Impact on Rural Economy)**

7. **David Torrance (Kirkcaldy) (SNP):** To ask the Scottish Government what assessment it has made of any potential impacts of the EU-UK agreement on Scotland's rural economy. (S6O-04710)

**The Minister for Agriculture and Connectivity (Jim Fairlie):** We very much welcome the UK Government's attempt to rebuild relations with the EU following what can only be described as the disastrous hard Brexit that the people of Scotland never voted for. We have unceasingly called for an improved relationship and although the UK-EU summit has been unnecessarily constrained by the UK Government's self-imposed red lines, it is a step in the right direction. Many of the details of the agreement are still to be negotiated, never mind actually implemented. Meanwhile, the effects of Brexit, including on our rural and island economy and communities in Scotland, continue

to make any sense of congratulation wildly premature.

As a start, if the UK Government was serious about addressing the scale of the damage done by Brexit, it would immediately discard its self-defeating red lines on a single market, a customs union and freedom of movement with our European neighbours. Further, given how much the actual implementation of the agreement will require devolved competencies, the UK Government's first action should be to engage proactively with the devolved Governments, including here in Scotland.

**David Torrance:** Although the agreement, which goes some way to improving some of the harms of Brexit, has to be welcomed, will the minister highlight for members how remaining outside the single market and the customs union, and without freedom of movement, continues to damage the interests of our rural economy?

**Jim Fairlie:** The red tape that increased costs to businesses has hit Scotland's trade with our largest international export market. Scotland's rural economy bore much of the impact of the loss of EU funding, new barriers to trade and reduced access to labour.

The Government's own figures show that the deal will add £9.9 billion to UK national income by 2040, which is just 0.2 per cent of gross domestic product. The loss of GDP caused by Brexit is estimated to be 20 times that, at 4 per cent of GDP, according to the Office for Budget Responsibility. There is no good deal in this for Scotland without being an independent member of the EU, which would give us unfettered access to the markets that we are looking to be part of.

#### **NatureScot (Seagull Control Licensing)**

8. **Douglas Ross (Highlands and Islands) (Con):** To ask the Scottish Government what its position is on whether NatureScot considers and respects the views of local people and businesses when considering applications to control seagulls. (S6O-04711)

**The Minister for Agriculture and Connectivity (Jim Fairlie):** NatureScot considers and respects the views of local people and businesses, which can vary widely, when considering licence applications to control gulls. However, NatureScot can issue a licence only in accordance with the law. I recently met stakeholders to discuss how we can minimise gull impact; the conclusion was that further actions would be taken this year by NatureScot to deal with the immediate problem. I have also agreed to chair a summit of key partners later this year to put measures in place in relation to preventing those issues from arising again next year.



**Douglas Ross:** I am sorry, minister, but NatureScot does not respect the views of local people and businesses. It ignores the views of local people and businesses.

On Monday, I received a response to a freedom of information request asking for the most common reason that licence applications for gull management are refused. NatureScot says that it is because the applicant does not demonstrate that gulls are posing a risk to public health or safety. That is utter rubbish. I know the people who are putting in those applications, and they are at the end of their tether. Those birds are causing significant worry, they are physically damaging individuals, and they are putting people off going into certain businesses because of their behaviour.

Will the minister finally get a grip on NatureScot and tell it to start delivering for those communities by approving those licences, so that we can get some control over gulls in our areas?

**Jim Fairlie:** I absolutely accept that there are areas where gulls are causing a problem in relation to public health and safety. As the member is well aware, NatureScot can issue the licences only on the basis of public health and safety issues, and not nuisance issues.

**Douglas Ross:** It is a public health and safety issue.

**Jim Fairlie:** That is the fundamental point that we are trying to get across—[*Interruption.*]

If members want to listen—

**Members:** Oh!

**Jim Fairlie:** I have told them on a number of occasions that I am prepared to intervene when there is an area that needs to be looked at right away. Then, I will have a summit next year—[*Interruption.*]

**Douglas Ross:** Next year!

**Jim Fairlie:** I will have a summit later this year to discuss with members and the people who are raising those issues how we can control the birds in the way that we need to, without damaging the population.

**The Deputy Presiding Officer:** I will take a supplementary question, but I ask members to listen to the questions and then also the responses.

**Fergus Ewing (Inverness and Nairn) (SNP):** It is not only a public health and safety issue. I have repeatedly warned the Scottish Government, in this chamber, that serious injury or fatality could arise from massive gulls swooping down on elderly people and infants; I have even warned about the consumption of seagull faeces causing

horrific disease. After those warnings, a 74-year-old man in Nairn was injured by a seagull.

When will the Scottish Government get a grip and respond—not to NatureScot, but to what the people say? Will the summit to which the minister referred be open to the public, the press and MSPs? Will there be presentations by business improvement districts and will the summit be co-designed by BIDs? They are the ones that have to sort out the mess.

**Jim Fairlie:** I reiterate that I am well aware that there are issues with gulls swooping down and causing problems for people in the areas that have already been mentioned. That is why I made sure that licences were issued earlier this year. We are holding the summit to ensure—[*Interruption.*—]that measures are taken to protect people as we go forward from this point.

**The Deputy Presiding Officer:** Could I please ask members to resist the temptation to shout out while ministers are seeking to respond?

That concludes portfolio questions on rural affairs, land reform and islands. There will be a brief pause to allow front-bench members to change over.

## Health and Social Care

**The Deputy Presiding Officer:** The next portfolio is health and social care. There is a lot of interest in supplementaries, so brevity in questions and responses would be appreciated.

### Audiology Waiting Times

1. **Pam Gosal (West Scotland) (Con):** To ask the Scottish Government whether it will provide an update on what action it is taking to improve waiting times for audiology appointments. (S6O-04712)

**The Minister for Public Health and Women's Health (Jenni Minto):** Our 2025-26 budget provides record funding of £21 billion for health and social care, and national health service boards are receiving an additional £200 million to reduce waiting lists and to help support reduction of delayed discharge.

With that funding, we will deliver more than 150,000 extra appointments and procedures across a number of specialities in the coming year, which will ensure that people receive the care that they need as quickly as possible. Ear, nose and throat services will be an important part of that work, to which more than £9 million of the funding will be allocated. That will increase the number of new out-patient appointments that are available in 2025-26 and will ensure that patients receive the treatment that they require.

**Pam Gosal:** I have been contacted by one of my constituents, who said that her husband waited 19 months for a hearing assessment. He was then advised that he had moderate hearing loss and that he would benefit from hearing aids. The assessment took place in October 2024, yet he still does not know when he will receive his hearing aids. Meanwhile, my constituent has pointed out that her sister-in-law in Northern Ireland waited only six months for an assessment and was able to have her hearing aids fitted at the same appointment.

A lack of hearing assessments and hearing aids can lead to one's quality of life deteriorating. How can something so simple yet so important take so long?

**Jenni Minto:** Pam Gosal is absolutely right—that is not the right way to support people who are living with hearing loss. They should not have to wait so long. If Ms Gosal would like to write to me directly about the situation, I would be happy to look into it. We remain absolutely committed to our vision of an integrated community-based hearing service in Scotland.

### Preventative Initiatives and Services

**2. Ben Macpherson (Edinburgh Northern and Leith) (SNP):** To ask the Scottish Government what discussions it has had with the Edinburgh integration joint board, NHS Lothian, the City of Edinburgh Council and any other relevant organisations regarding any impact on patients, communities and statutory services of reported reductions to preventative initiatives and services. (S6O-04713)

**The Minister for Social Care, Mental Wellbeing and Sport (Maree Todd):** I, along with ministerial colleagues and Government officials, regularly meet with Edinburgh colleagues. In those meetings with local partners, the Scottish Government continues to stress the paramount importance of putting outcomes for people at the centre of all decision making.

I am aware of the agreed and proposed actions that are contained in the Edinburgh integration joint board's savings plan for 2025-26 and am confident that every effort is being made to ensure that all stakeholders, including service users, are properly consulted and that services continue to provide essential support.

**Ben Macpherson:** As the minister and her colleagues will be aware from First Minister's question time on 8 May and other correspondence before and since then, there is deep concern in our capital city among many charities and third sector organisations, including in my constituency, over the review of contracts and service level agreements by the integration joint board and the

Edinburgh health and social care partnership. The proposed cost savings from the review could lead to a loss of early intervention and prevention services, which we all know are important, particularly given the demographic pressure in the capital.

I would therefore be grateful if the Scottish Government could continue its efforts and use its convening power to help find solutions to ensure that meaningful engagement and partnership take place and that services that are at risk of cancellation are given the reassurance that they require and are able to continue doing their important work.

**Maree Todd:** I absolutely recognise the concern of the sector in Edinburgh, and I thank Ben Macpherson for raising those issues with us in the chamber. However, I must point out that, although the Scottish Government has overall responsibility for health and social care policy in Scotland, it is appropriately for IJBs to ensure that social care support services are in place, and that decisions on how best to deliver services to local communities are ultimately and appropriately for integration authorities and locally elected representatives to make.

The Edinburgh IJB is in the process of updating its strategic plan, in which prevention and early intervention feature prominently. IJB officials have engaged in extensive consultations with third sector representatives, and I understand that further decisions on savings have been delayed to allow for additional engagement.

**Miles Briggs (Lothian) (Con):** On Monday evening, I attended a packed public meeting, organised by Change Mental Health, to discuss the concerns of many service users. Given the well-established link between early mental health intervention and suicide prevention, what is the Scottish Government doing to address the potentially life-threatening consequences of cuts to community mental health services in Edinburgh? As mental health minister, is Maree Todd content that Edinburgh would become one of the only cities in western Europe without community mental health services?

**Maree Todd:** I absolutely recognise the concern expressed by Change Mental Health and its valued stakeholders and partners. I work with and meet the organisation regularly, and I hear those concerns for myself.

As I said in answer to Ben Macpherson, these decisions are appropriately and rightly devolved to locally elected representatives. As I understand it, there has been a series of engagements and a pause in decision making to ensure that appropriate decisions are made.

As for the very serious issue that my colleague has raised, a whole suite of work is going on across Government to tackle suicide prevention. We are focused on that work and are keen to continue the long-term improvements in the statistics.

**Foyso Choudhury (Lothian) (Lab):** The proposed cuts are causing massive concern, particularly for mental health services, which are estimated to save £7 for every pound invested. The EIJB recognises that cuts to Thrive mental health contracts could increase pressure on services and leave users without support. Does the minister agree that that goes against the Scottish Government's target of prevention? Will she meet me and the cross-party group of MSPs to find a solution?

**Maree Todd:** I am certainly content to meet colleagues to try to find a way forward. The member will understand that, as I have said in previous answers, these decisions are appropriate for the IJB and locally elected representatives to make.

However, the Scottish Government is absolutely focused on early intervention and prevention, including for serious and enduring mental health problems. We are investing in community support for children, young people and adults directly through local government funding and third sector voluntary funds, and I will ensure that members are aware of those sources of funding for the areas that they support.

**The Deputy Presiding Officer:** Question 3 has been withdrawn.

### National Health Service Complaints (Backlogs)

4. **Liz Smith (Mid Scotland and Fife) (Con):** To ask the Scottish Government what action it is taking to support regional national health service boards to tackle any backlogs of complaints. (S6O-04715)

**The Cabinet Secretary for Health and Social Care (Neil Gray):** Overall responsibility and accountability for the management of NHS complaints lies with individual boards' chief executives, their executive directors and the appropriate senior management. The boards must ensure that complaints teams are adequately resourced to meet their statutory duties in relation to complaints handling.

The Scottish Government has been clear about the importance of a timely and effective response in order to resolve a complaint. However, we are aware that not all investigations will be able to meet the 20-day target. The regulations make provision for timescales of responses to complaints to be extended where appropriate, provided that complainants are informed of the

reason for the delay and given a revised timescale for a response.

**Liz Smith:** I am currently representing a constituent who lodged a complaint with NHS Forth Valley back in October 2024. Other than three holding replies that were received up to the beginning of January, my constituent is still waiting.

When I approached NHS Forth Valley, I was informed that, because of staff shortages, it was now working only on complaints that were received during August 2024 and that it would be unlikely that my constituent would receive a response until at least October 2025, which is a whole year after the initial complaint was made. Given what the cabinet secretary has just said, I hope that he will agree that that is completely unacceptable and that it is certainly not within the 20 days that it is supposed to be the case for investigation. What action will the cabinet secretary take?

**Neil Gray:** I thank Liz Smith for raising her concerns about her constituent in Forth Valley. I am obviously not aware of the full circumstances, so I cannot comment specifically, but what Liz Smith has narrated to Parliament is deeply concerning. I would appreciate it if she could furnish me with the details of the case so that I can raise it with NHS Forth Valley and get an explanation of what is happening.

In general, as I said in my initial answer, I would expect a timeous response. There can be reasons why that can be delayed, but from what Liz Smith tells me, it has gone beyond that point with that complaint.

**Paul Sweeney (Glasgow) (Lab):** What we have just heard about is not a one-off. Complaints that should be taking 20 working days to handle are now being measured in months, not days. That adds extra distress to patients who have had a poor experience with the NHS, compounding their stress and turmoil and reducing even further their confidence in the health service.

It also leads to greater burnout in the NHS patient complaints team, as lack of adequate staffing levels leads to backlog and overworking. Does the cabinet secretary agree that many NHS boards need to allocate more funding to their complaints teams? If so, will he commit the Scottish Government to making sure that all NHS boards' patient complaint teams have adequate staffing levels to reduce the backlog?

**Neil Gray:** Mr Sweeney will be aware, as I set it out in my initial answer to Liz Smith, that it is the responsibility of individual boards to ensure that their public affairs and complaints teams are adequately resourced.

Overall, the number of complaints has fallen 7 per cent to 33,273 from a position of 35,000 in 2022-23. However, although the overall number of complaints has reduced, I recognise that the complexity of some cases means that, sometimes, it takes longer for them to be investigated and responded to. However, the position that I put to Liz Smith with regard to my expectation of complaints teams handling complaints quickly is paramount.

### Long-term Conditions Framework

5. **Sue Webber (Lothian) (Con):** To ask the Scottish Government what discussions it has had with cardiology patients, clinicians and other relevant stakeholders as part of the development of the recently published long-term conditions framework consultation. (S6O-04716)

**The Minister for Public Health and Women's Health (Jenni Minto):** The Scottish Government carried out engagement and consultation with a wide range of stakeholders during the development of the long-term conditions framework consultation.

That included a heart disease lived experience focus group, a third sector event—attended by heart disease organisations—and a meeting with the heart disease clinical leads. There have also been ministerial meetings with British Heart Foundation Scotland and Chest Heart & Stroke Scotland.

The consultation is now live, and I encourage clinicians, health professionals, those in the third sector and people with lived experience to respond.

**Sue Webber:** Last week, British Heart Foundation Scotland published figures that showed that Scotland has seen the first sustained rise in heart disease deaths in a generation. We must halt that trend. Collaboration between everyone who is involved in tackling heart disease is crucial. The long-term conditions framework could result in a deprioritisation of conditions such as heart disease. Will the minister guarantee that collaboration will take place between those stakeholders and the Scottish Government to ensure that the 730,000 people in Scotland living with heart disease are not forgotten about?

**Jenni Minto:** I agree that it is important that third sector clinicians and people living with heart conditions are properly consulted. The long-term conditions framework will focus on ensuring equitable and sustainable access to the services that all people with long-term conditions need, while still allowing for targeted action on condition-specific care and support where necessary. That is exactly the message that I passed on to British

Heart Foundation Scotland and Chest Heart & Stroke Scotland.

I agree that we need to continue our approach, and that is exactly the way that I will continue working as we gather information from the consultation.

**The Deputy Presiding Officer:** A number of members want to ask supplementary questions. I will try to get everyone in, but they will need to be brief.

**Carol Mochan (South Scotland) (Lab):** Figures that were published last week by British Heart Foundation Scotland showed that incidents of cardiovascular disease in working-age adults aged 20 to 64 in Scotland have risen by 14 per cent. The impact of heart disease on people early in life is increasing, particularly in our most deprived areas, where premature deaths are five times higher than in our least deprived areas. Will the minister commit to addressing that through the creation of a fully resourced plan that is co-produced with clinicians and the third sector?

**Jenni Minto:** We are awaiting the results of the long-term conditions framework consultation, but we must also recognise that we need to go further on the preventative side. That is exactly where the Scottish Government has been increasing its investment in health.

I absolutely recognise the points that Carol Mochan made about inequalities and ensuring that people from all areas of Scotland get the right support. That is why we are increasing the number of general practitioner appointments that are available. We have also been working closely with the Convention of Scottish Local Authorities on a population health framework that is absolutely focused on prevention.

**Elena Whitham (Carrick, Cumnock and Doon Valley) (SNP):** The latest figures, which were published yesterday, show that a record 149 people in my health board area of NHS Ayrshire and Arran have been waiting more than a year to see a cardiologist. Will the minister reassure me and the around 13,000 people who are living with cardiovascular disease in my constituency that CVD will remain a priority for the Scottish Government, with a dedicated resource to support the improvement of cardiology services?

**Jenni Minto:** I agree that we must focus on the prevention of cardiovascular disease. That remains a priority for the Scottish Government, which is why we have designed a service that focuses on proactive case finding of cardiovascular disease issues. Through our £10 million investment in the new CVD enhanced service agreement, we are encouraging innovative ways through which general practices can engage

with individuals who might be at higher risk of cardiovascular disease.

**Jackie Dunbar (Aberdeen Donside) (SNP):** Some 38 per cent of Scotland's population have a long-term health condition. How is the Scottish Government working to ensure that the outcomes of the long-term conditions framework consultation will build a framework that cuts across all conditions but recognises when it is important to be more condition specific?

**Jenni Minto:** As I said earlier, the new long-term conditions framework will focus on ensuring equitable and sustainable access to the services that all people with long-term conditions need, while still allowing for targeted action on condition-specific care and support where appropriate.

Responses to the current framework consultation will be carefully analysed, alongside other available evidence, to establish opportunities for actions that benefit all people with long-term conditions. Where condition-specific work is appropriate, that, too, will be informed by evidence, including that from the consultation, which is currently live.

**Pam Duncan-Glancy (Glasgow) (Lab):** People living with arthritis and musculoskeletal conditions make up a large number of people who have long-term conditions. In Glasgow, some of them have been waiting for trauma and orthopaedic support for more than 52 weeks. What measurable difference will the long-term conditions framework make for people living with arthritis and MSK conditions?

**Jenni Minto:** I have set out the long-term conditions framework in a way that recognises that every condition can benefit from learning from others and that there will be certain golden threads that run through all conditions.

As I said in two previous responses, if there are certain areas of the strategy that require specific strategies—similar to our 10-year cancer strategy, which focuses on certain cancers—that will certainly be considered.

#### **Ambulance Delays (NHS Grampian)**

**6. Liam Kerr (North East Scotland) (Con):** To ask the Scottish Government what its response is to reports that NHS Grampian is ranked the worst of all mainland national health service boards for ambulance delays. (S6O-04717)

**The Cabinet Secretary for Health and Social Care (Neil Gray):** Data on turnaround times for ambulance resources across Scotland by hospital site and by national health service board are shared with the Scottish Government and published weekly, so we are well aware of the challenges that both NHS Grampian and the

Scottish Ambulance Service are facing in that regard. We continue to work closely with both organisations to improve turnaround times in the region.

**Liam Kerr:** The cabinet secretary will be aware, because he visited NHS Grampian in February and—along with his usual apology for the Government's failure—he promised to improve things. Here we are in May, and one in 10 people is waiting four hours or more for an ambulance, with delays steadily rising. That is nearly double the target figure of two and a half hours.

What, precisely, has the cabinet secretary done since February to reduce ambulance wait times in NHS Grampian, and when does he project that those measures will result in NHS Grampian hitting its targets?

**Neil Gray:** I saw for myself the challenges that NHS Grampian is facing, specifically at the Aberdeen Royal infirmary, from my visit there, to which Liam Kerr referred. I understand the challenges there—I have family members living in Grampian, so I understand the specific issues intensely.

We have escalated NHS Grampian on the escalation framework to level 4, both for its performance and delivery and in relation to the financial picture. That escalation provides additional support and scrutiny to ensure that the board is meeting its financial and delivery imperatives. At the top of my list are the unscheduled care pathways in Grampian, so that the board starts to see improvements, because the current position is unacceptable.

#### **“Whole person medical care: The value of the General Practitioner”**

**7. Martin Whitfield (South Scotland) (Lab):** To ask the Scottish Government what its response is to the new report from the Royal College of General Practitioners Scotland, “Whole person medical care: The value of the General Practitioner”. (S6O-04718)

**The Cabinet Secretary for Health and Social Care (Neil Gray):** I thank the Royal College of General Practitioners Scotland for its report, “Whole person medical care: The value of the General Practitioner”, which highlights the value of GPs and the contribution that they make to the nation's healthcare. I look forward to discussing the report further with the RCGP at one of our regular meetings.

We remain committed to increasing the number of GPs working in Scotland. In November last year, I published a plan setting out 20 measures to improve GP recruitment and retention.

**Martin Whitfield:** The report states categorically:

“The Scottish Government’s current target is to increase the number of headcount GPs in Scotland by 800 by 2027.”

It goes on to say:

“It is the view of Audit Scotland and RCGP Scotland that this target will not be met.”

Does the cabinet secretary agree?

**Neil Gray:** I do not think that that is inevitable. I am still committed to meeting that target. We currently have a record number of GPs in training, and I want to work with both the RCGP and the British Medical Association general practice committee on how we see increased resources going into general practice to support greater employment.

We have seen a rise in the head count, but I recognise that the whole-time equivalent position has been more challenging post Covid, as people have—understandably—taken different decisions on work-life balance. I want to see the capacity of, and the provision from, general practice increase. Our vision for the health service has shifted the balance of care into community and primary care and to a more preventative model, and we arrive at that only by having increased services in general practice.

**The Deputy Presiding Officer:** We have a number of supplementaries. I will try to get them all in, but I need brevity.

**Kenneth Gibson (Cunninghame North) (SNP):** A new 80-bed nursing home is about to open in Largs, and concerns have been raised about the impact on the town’s only GP practice, Largs Medical Group. Despite the practice’s proactive efforts, the nursing home has allegedly declined to participate in any local enhanced service agreement that would assist in the delivery of sustainable care to its residents.

Can the cabinet secretary advise what support is available to GPs in managing a new care home population? Will he join me in encouraging all new care home developments to opt into local enhanced service agreements to address specific local healthcare needs?

**Neil Gray:** As Kenneth Gibson will know, the premise of local enhanced service agreements is that they are agreed on a local basis, so it would not be appropriate for me to intervene directly in that case. I welcome the expansion of social care provision in Mr Gibson’s constituency, but we need to ensure that there are good working arrangements between social care and primary care, so I encourage that to continue. If he continues to see that as an issue, I would—while I cannot get involved directly—welcome correspondence from him setting out the issues,

and I will ensure that we look into the matter further.

**Sandesh Gulhane (Glasgow) (Con):** I declare an interest as a practising national health service GP. The RCGP report discloses that

“adding one GP for 10,000 people equates to an estimated reduction”

of more than £82,000.

Eighty to 90 per cent of patient contact is in primary care, but GPs have only 7 per cent of the NHS budget. GPs are the cheapest form of healthcare, yet GP practices are in trouble. They have been neglected by this Scottish National Party Government and are struggling to stay afloat, and Labour’s national insurance rise is killing practices. What is the Scottish Government doing to protect GP practices from going under?

**Neil Gray:** We continue to work with the Royal College of General Practitioners and the BMA’s general practitioners committee. We have invested in general practice through the budget and provided increased support to GP practices for recruitment and retention. However, I recognise that, given some of the challenges that Dr Gulhane has rehearsed, challenges remain when it comes to the recruitment and retention of GPs.

That is why we continue to work with the Royal College of General Practitioners and the BMA in order to ensure that greater resource goes into general practice, so that it can recruit more GPs and wider practice staff and continue to provide the incredible service for our communities that it does.

**Willie Rennie (North East Fife) (LD):** The report says:

“Embedding continuity of care into everyday GP practice in Scotland has been underprioritised ... The GP Voice tracking survey found that under half of GPs (48%) felt they were able to deliver continuity of care which meets their patients’ needs.”

After 17 years in power, why are we in this sorry state?

**Neil Gray:** I absolutely value the role that general practitioners play in providing continuity of care and having the knowledge and understanding to meet a person’s health needs, often over their lifetime. That is absolutely critical, which is why we will continue to work with the BMA and the royal college to ensure that they have the support that they need to continue to provide services and continuity of care to our communities. We need to shift the balance of care from acute hospital-based services to more general practice-based services in the community. That is my vision for the health service, which I intend to deliver on.

### **Premenstrual Dysphoric Disorder**

#### **8. Clare Adamson (Motherwell and Wishaw)**

**(SNP):** To ask the Scottish Government how its policies support people with premenstrual dysphoric disorder. (S6O-04719)

**The Minister for Public Health and Women's Health (Jenni Minto):** The Scottish Government's ambition is for a Scotland where women enjoy the best possible health throughout their lives. Premenstrual dysphoric disorder—or PMDD—and its impact on mental health is recognised in the women's health plan.

Our mental health and wellbeing strategy lays out our vision for improving mental health so that anyone who needs help can get the right help in the right place at the right time. We expect that mental health care and treatment will be delivered in a person-centred manner to meet the needs of each individual, including those who are affected by PMDD.

**Clare Adamson:** PMDD is a severe form of premenstrual syndrome, which is characterised by debilitating psychological systems, and it is heartening that PMDD is included in the Scottish Government's women's health plan. Dr Lynsay Matthews of the University of the West of Scotland and Ms Julie Riddell of the University of Glasgow have led the first significant research in this area, and it indicates that there is a lack of knowledge and understanding among key professionals and services in the United Kingdom.

Will the Scottish Government engage with that important research and consider the priorities that are identified such as awareness raising, training, early diagnosis and holistic psychological support?

**Jenni Minto:** I thank Clare Adamson for raising the topic in the chamber. We know that work is still to be done to address the stigma and lack of understanding that surrounds menstrual health, including PMDD. Through our women's health plan, we have already undertaken steps to raise awareness and support better understanding of PMDD among healthcare professionals, by commissioning NHS education for Scotland to create training on menstrual health, which includes PMDD.

Our NHS Inform women's health platform provides women and girls with access to information on menstrual health and PMDD. I was not able to meet the researchers, but some of the women's health team did. We are considering Dr Matthews' findings as we develop the next phase of the women's health plan.

**The Deputy Presiding Officer:** That concludes portfolio questions for health and social care. There will be a brief pause to allow front-bench

members to change over before we move to the next item of business.

## Teaching Workforce

**The Deputy Presiding Officer (Liam McArthur):** The next item of business is a debate on motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce. I invite members who wish to participate in the debate to press their request-to-speak buttons now or as soon as possible. I advise members that there is very little time in hand.

14:50

**Willie Rennie (North East Fife) (LD):** Presiding Officer,

"I find myself ill with worry of how I will pay my bills. My car is broken but I cannot afford to fix it. My rent is £1000 but I cannot get a mortgage due to uncertainty of work. I lost my mum in the first term of becoming a teacher so have no other way of supporting myself. I cannot even gain money from universal credit as casually working supply ... means I cannot claim anything."

Those are the words of just one of the many teachers who are crying out for this Government to listen to their battle to do the job that they love—to educate young minds. I hear stark reports of 170 applications for one temporary position; of lives being on hold; of teachers being unable to start their family, get a house and settle down; of older teachers having sacrificed careers in industry for nothing; of teachers leaving the country for work; and of thousands leaving the profession. The problem is most acute in primary education.

In her amendment, the Cabinet Secretary for Education and Skills blames local authorities. She says that they are the employers and they are responsible for local workforce planning, but councils are not responsible for the supply of new teachers. That is the job, through universities, of central Government.

Let me take members back to the previous election, when the Scottish National Party promised to cut teacher contact time by 90 minutes per week. It then promised to create 3,500 extra teachers to make that possible, so universities got busy educating them. When the councils could not afford to recruit those extra teachers, there were few jobs for them. The Government failed to reach an agreement to cut teacher contact time, but the newly qualified teachers kept on coming. The Government then worked out that, with falling school rolls, it did not need 3,500 extra teachers to cut the 90 minutes, but it kept the new teachers coming.

Just one in four newly qualified teachers now finds a permanent teaching post. The Government's working group admits that there are now 950 more primary teachers than jobs

available. The result is that 950 teachers—plus many more with short-term jobs, zero-hours jobs or no job at all—are struggling to pay the bills and battling to stay in teaching, with the Government pretending that it has nothing to do with it.

The Government is failing to cut teacher contact time by 90 minutes and failing to deliver jobs for 3,500 extra teachers. It is failing teachers and pupils. Even today, the cabinet secretary points to others rather than accepting that this mess is of the Government's making. When she stands up in a moment, the first words that she should utter are: "I am sorry". She should apologise to all those unemployed and underemployed teachers.

The next tasks are to solve the 90-minute teacher contact time promise and the shambles of the 3,500 extra teachers, and to give clear guidance to the teacher workforce planning advisory group.

Although there are too many teachers in one part of the system, there are not enough in another. An example is secondary schools in Aberdeenshire. The cabinet secretary knows, because she visited Aberdeenshire not so long ago, that it is short of science teachers, maths teachers, technical teachers and home economics teachers. Claire Rennie—no relation—from Fraserburgh academy parent council says:

"While this has been an issue for many years, it is now very much at crisis point."

In the 2022-23 session, Aberdeenshire Council requested 48 newly qualified secondary teachers, but it was allocated only 25. It got worse, as only 16 arrived—a third of what the council asked for. In the following year, 66 were requested, only 18 were allocated and just 12 started—a fifth of what was needed. Almost none arrived where the council has the biggest shortages. The effects of that are subjects being cut out in schools, primary teachers being brought into secondary schools, falling staff morale and declining pupil behaviour.

The problem is nationwide. Compared with when the Scottish National Party came to power, there are 363 fewer maths teachers, 91 fewer physics teachers, 216 fewer computer science teachers and 180 fewer technical education teachers. The number of modern languages teachers has fallen by more than a fifth.

What are the solutions? The cash incentives are clearly not working. The teaching bursary of £20,000 for science, technology, engineering and mathematics and for Gaelic has a poor take-up rate. The preference waiver payment for teachers to move to areas in which it is hard to recruit is not working, either. Those payments must be revamped. We need to look at where new teachers are trained, because they often remain in those areas to teach.



**The Deputy Presiding Officer:** You need to conclude.

**Willie Rennie:** I appreciate that teacher workforce planning is not simple, but the Government has made the situation a whole lot worse.

I move,

That the Parliament acknowledges the work carried out by Scotland's teachers in schools across the country and commends them for all they do; recognises that the subjects that they teach provide important foundations for knowledge and skills in sectors that can be vital for Scotland's economy; notes with concern, however, that there has been a sharp decline in the number of teachers in key subjects, such as maths, physics and modern languages, and that targets to train teachers in STEM subjects have been continuously missed; believes that, should these targets continue to be missed, and the decline in the number of teachers continues, it will add to the strain on the teaching workforce, Scottish education will suffer and Scotland's ability to compete globally in important sectors will be impacted; further believes that a lack of permanent contracts for teachers will further compound issues with recruitment and training; notes that there are also high levels of unemployment and underemployment of primary teachers and teachers for some secondary school subjects; further notes the failure of the Scottish Government to make sufficient progress on its 2021 commitment to recruit 3,500 more teachers, which is set to be missed by the end of the current parliamentary session in 2026, and calls, therefore, on the Scottish Government to develop a new, urgent plan for the teaching workforce, working with stakeholders.

14:56

**The Cabinet Secretary for Education and Skills (Jenny Gilruth):** I thank Mr Rennie for lodging the motion for debate during Liberal Democrat time. I thought that the story that he set out at the start of his speech was deeply emotional, and I ask him to share details of that case with my office. I would be keen to look into the specifics and see what assistance, if any, my officials and I might be able to provide.

I start by recognising and acknowledging the challenges that the motion sets out around teacher recruitment and employment. In concluding, Mr Rennie said that there is not a simple answer, noting the shared responsibilities. It is important that we do not apportion blame but talk about the shared responsibilities that exist in law in relation to how our education system is structured. However, I want to listen today to the challenge from the Opposition and to engage where, collectively, working with local government, we can seek to drive the improvements that are needed in Scotland's schools.

We all know that teacher recruitment is an enabler in driving that improvement, and we know that it is a challenge that is not unique to Scotland. Last week, I was at the Education World Forum in London, where I met fellow education ministers

from all over the world. We talked about the issue in their countries, which exists in a range of different subject areas. We know that, in England, in all but one of the past 10 years, the Department for Education has missed its target for those starting secondary school teacher training. In Wales, the chief inspector has raised similar concerns about the impact that recruitment is having on the curriculum.

We also know that the United Nations has suggested that the Covid pandemic affected public perceptions of teaching. Last year, in its global report on teachers, the UN found that the pandemic had in some ways improved public perceptions of the status of teaching, but, according to the UN, that perceived change was temporary. That global context is important because, in Scotland, our teachers remain the best paid in these islands, with the lowest pupil teacher ratio.

However, teaching also needs to be an attractive vocation and people need to feel valued. I had a modern studies teacher who used to talk about the light-bulb moment when, in teaching a concept, they could almost see a child understand and develop their knowledge. Our teachers make a difference every day. Post-pandemic, we need to make a concerted effort to celebrate the positive importance of teachers in our schools. That is why, later this year, the Government will introduce a new teacher recruitment marketing campaign to encourage more students to take up a career in teaching. I hope that colleagues across the chamber will be able to support that campaign.

We know that, if we are to deliver on reducing class contact time, we need to have more teachers in Scotland's schools.

**Jackie Dunbar (Aberdeen Donside) (SNP):** Does the cabinet secretary agree that there is also a role for other partners in workforce planning—universities, for example—to ensure that we have the right allocation of teachers across the board?

**Jenny Gilruth:** I agree with the sentiments that the member has expressed. Our universities are directly involved in national workforce planning at the current time.

I will briefly touch on the teacher induction scheme—

**Pam Duncan-Glancy (Glasgow) (Lab):** Will the cabinet secretary take an intervention?

**Jenny Gilruth:** I say to Ms Duncan-Glancy that I am conscious of time; I have one minute left.

The teacher induction scheme has served us well for many years, and I have discussed it with colleagues from across the chamber in recent weeks. I confirm today that the Government will review the teacher induction scheme and the

probationer allocation for new teachers to identify strengths and areas for improvement, so that we can support new teachers into the profession.

That speaks to the point that Mr Rennie made in relation to Aberdeenshire Council's probationer allocations. We need to review how the scheme is working. At the current time, probation is fully funded by the Government at an average cost of £40 million a year. It is imperative that the Government, in investing in that scheme and in free tuition, sees buy-back in relation to the permanent post challenge that Mr Rennie alluded to.

Mr Rennie also talked about the role of local government. The Government's deal with local government saw an extra £186.5 million go to our local authorities to help to support extra teachers in Scotland's schools.

**Willie Rennie:** Will the cabinet secretary give way?

**Jenny Gilruth:** I am happy to give way on that point, although I am conscious of time.

**Willie Rennie:** When will the cabinet secretary mention unemployed primary school teachers?

**Jenny Gilruth:** I have five minutes for my speech and less than a minute left. I will come on to talk about that, because part of the issue is specifically about our primary teachers. It is less of an issue in our secondary schools, although the member's motion talks about some issues regarding subject specialisms.

I am keen to work with the General Teaching Council for Scotland on how we can support some of the primary teachers who are unable to gain employment, perhaps by transitioning them into additional support needs posts or into secondary teaching. We need to support the GTCS to that end. I am more than happy to engage with Willie Rennie and members from across the chamber on that point. The budget made available an extra £29 million to be ring fenced for local authorities to employ ASN specialists. There are opportunities for some primary teachers who may not be able to obtain posts to divert into other career options, but I appreciate that that might not be for everyone.

It is important to recognise that, although there are challenges, there are also opportunities for us to work differently, and we have to do that with local government. I do not think that a single amendment to the motion suggests otherwise. My legal responsibilities as Cabinet Secretary for Education and Skills mean that I have to work with local government on improving the availability of permanent posts, which is exactly the point that Mr Rennie made.

That is why, in the budget, I protected and uplifted the value of the funding that goes to our

local authorities. I sincerely hope that every local authority in the country—including Fife Council, where the Liberal Democrats supported the Labour administration's budget—will be able to go back to the 2023 teacher numbers, which is what the budget settlement was predicated on.

I am conscious of time. I am keen to listen to the debate and to respond to members more fully in my closing remarks.

I move amendment S6M-17669.3, to leave out from "further notes" to end and insert:

"recognises that local workforce planning is led by local government and must be undertaken in partnership with it; supports local authorities, as the employers of teachers, to use the significant additional funding made available, including £186.5 million in the 2025-26 Budget, to increase teacher numbers and create more permanent posts, and calls for the Scottish Government to commit to working in partnership with COSLA, through the joint education and assurance board, to develop a joint evidence-led education workforce strategy with stakeholders."

15:02

**Miles Briggs (Lothian) (Con):** I thank Willie Rennie and the Liberal Democrats for using their party business time to hold the debate. It is important that we highlight the pressures that the teaching workforce faces. I am sure that everyone will remember a positive role that a teacher has played in their lives, from giving them a love for, or aspiration to study, a subject to providing the focus that is often needed to achieve their dreams.

We need to accept that the workforce challenge that Willie Rennie has highlighted in the motion is stark. That puts pressure on teachers and the school community, and it leads to an inability to deliver on and meet pledges that ministers have made on non-contact time.

When SNP ministers pledged to recruit 3,500 teachers, they did not make that pledge with the Convention of Scottish Local Authorities; SNP ministers said that they would deliver that recruitment in this parliamentary session. With less than a year to go, it is clear that they have failed. That pledge was made after 14 years of the same party being in office, and it is now likely to be missed by the end of this parliamentary session.

I agree with the call on the Scottish Government to

"develop a new, urgent plan for the teaching workforce, working with stakeholders".

That should have been done at the very start of the SNP's time in office. The Scottish Conservatives support a national co-ordinated education workforce plan, to include the ASN workforce, that would deliver additional support

workers and classroom assistants across our local authorities.

This morning, the Education, Children and Young People Committee heard about the skills gap that must be closed if we are to align the needs of our economy with subject availability and choice in our schools. That was a key part of Willie Rennie's motion.

We have concerns about the sharp decline in the number of teachers in key subjects such as maths, physics and modern languages and about the targets that the Government has set to train and recruit teachers in those subjects. Yesterday, I met the Royal Society of Chemistry to discuss its report "Future Workforce and Educational Pathways". I do not know whether the cabinet secretary has had a chance to meet the RSC, which has made a lot of positive suggestions for growing the number of teaching professionals in such subjects. That is where growth in our economy will come from and where subject choice is critical.

I hope that ministers will take on board from the debate the need to update Parliament on what will happen with STEM. I hope that we will get a commitment from the cabinet secretary or the minister to use Government debating time for that important issue, which should include the recommendations on how STEM targets will be met, as there seems to be very little focus on that—there certainly is not any focus on it in the Government's amendment.

I have spoken with teachers, and the message is clear that they feel overworked and undervalued. They are facing pressures in the classroom that they never expected in their professional lives. Instead of receiving the support and resources that they need, they face rising workloads, growing pupil violence and pressures to plug gaps that are caused by ministers' failure to plan.

With fewer people entering the profession and more feeling that they have to leave, the SNP has made teaching in Scotland increasingly unsustainable. I hope that the debate genuinely presents an opportunity to highlight the pressures that the teaching workforce faces across Scotland. The problems with our education system are piling high on the desks of the cabinet secretary and SNP ministers, but resolving the workforce challenges must be the first step in developing solutions to the issues.

I move amendment S6M-17669.2, to insert at end:

“; continues to be concerned at the levels of violence being reported in schools, including unacceptable physical and verbal attacks and threats being experienced by teachers and the wider school community; notes the

significant concerns over high levels of work-related stress being reported by teachers and the health and wellbeing of the profession; calls on the Scottish Government to bring forward a national coordinated education workforce plan, including data on additional support needs (ASN) and projections on workforce capacity for additional support workers and classroom assistants across local authorities as part of the ASN review; recognises concerns that absence cover is not being consistently applied across schools and local authorities, and supports the better provision of access to resources and training, including the delivery of a new model of support alongside the NHS Education for Scotland trauma informed practice training on neurodivergence and autism.”

15:06

**Pam Duncan-Glancy (Glasgow) (Lab):** I thank Willie Rennie and the Scottish Liberal Democrats for bringing to Parliament this crucial motion, which we will support at decision time. Scottish Labour will also support the amendment in the name of Miles Briggs. However, we cannot support the Government amendment, which would delete crucial aspects of the motion.

We must recognise that the Government's failure to recruit the staff who are needed is a critical part of the issues that we are seeing in schools today. Again, the cabinet secretary has not helped with the perception that the Government does not take responsibility for that by pointing to things being worse elsewhere and by saying that councils should act, that universities should be the workforce planners and that the GTCS should step in. There was nothing about what the Government will do. When will the Government provide the leadership that is so desperately needed?

The Government amendment seeks to delete the call for the Government to provide the leadership that is needed on a workforce plan and instead would replace the commitment with warm words on partnership working. We cannot support a Government amendment that passes the buck to local authorities—the very local authorities that have failed to provide support and resources to do the job. That is not leadership. It is the Scottish Government that sets national priorities. It made the promises, so it must now be held to account.

**Jenny Gilruth:** Will the member take an intervention?

**Pam Duncan-Glancy:** If the cabinet secretary is prepared to explain how she will take responsibility, I will be happy to take the intervention.

**Jenny Gilruth:** I am here, as cabinet secretary, taking responsibility today. I gently say to the member that local authorities, not the Scottish Government, employ our teachers. We have to work in partnership with our councils. Will the member please accept that point, or is she

proposing a separate and new approach to the employment of Scotland's teachers, with them coming out of local government employment? I am keen to understand that.

**Pam Duncan-Glancy:** The cabinet secretary cannot see that we have gaps and that we have teachers without jobs in some areas and in some subjects. Only the Government has the overview and can provide the necessary strategic approach to support local authorities in the shared responsibility for the teaching and schools workforce. The cabinet secretary cannot see that that is crucial, which is exactly why we are in the situation that we are in today and why schools face the problems that they face.

Not accepting the failure to deliver on teacher numbers, for example—a key SNP manifesto commitment—and on the workforce plan, which is overdue by more than a year, shows a disconnect from the reality in schools. The reality is that the teaching profession is in crisis. To avoid having teachers without jobs, subjects without teachers and pupils without stability, we need the Government-led workforce plan. The lack of a strategic overview on having the right staff in the right place drives the crisis that we see and compounds the lack of support for pupils with ASN. As the amendment in Miles Briggs's name highlights, it creates an environment in schools where the mental health and mental wellbeing of staff and pupils is unsupported, which leads to distressed behaviour and, in some cases, violence. Ultimately, as the Educational Institute of Scotland campaign highlights, it undermines quality education in Scotland.

However, none of that is new. Last year, Scottish Labour warned of the growing precarity in the profession and of the damage that short-term contracts and underemployment were doing to teacher morale and retention. The Parliament supported our motion to address those issues then but, a year on, little has changed. That is why we will try again today, through our amendment, to get the Government to recognise the scale of the problem and to act accordingly.

Our amendment calls for a consistent national system of supply in order to reduce the uncertainty of work from week to week and to widen the pool from which schools can access teachers. It calls for pupil equity funding to be made permanent, so that schools can plan ahead. It calls for reform of the teacher census, so that we know where the gaps are and where resources need to go. It calls for alignment of teacher training places with workforce needs, to address the ridiculous situation where qualified and experienced primary teachers cannot access permanent jobs but, at the same time, are burning out. We also have some subjects without teachers. Lastly, in relation to

subject-specific issues, we are calling for clear data on the number of senior phase lessons that are being taught by non-subject specialists. That is the action that is needed to save the teaching workforce in Scotland.

I move amendment S6M-17669.1, to insert at end:

", and further calls on the Scottish Government to develop a consistent national system of supply to support supply teachers across local authorities, make Pupil Equity Funding permanent to empower schools to properly plan, address concerns with the teacher census to ensure that it is known where staff are and where they are needed, ensure places on teacher training are aligned to workforce planning needs, including in science, technology, engineering and mathematics (STEM) subjects, and collect and publish data around the number of senior phase lessons being taught by non-subject specialist teachers."

15:11

**Maggie Chapman (North East Scotland) (Green):** The figure of £145 million—now £186.5 million—should be enough to move every teacher who is on a temporary contract into a permanent role and to recruit hundreds more into permanent teaching posts on top of that. That sum of money was one of the more significant budgetary requests that the Greens made as part of the Bute house agreement. Our intent was clear—it was to grow Scotland's teaching workforce. However, for several years, teacher numbers have not increased as planned.

Several factors have contributed to that outcome, including inflation eroding the value of the budget, and the teacher pay deal, which, despite being absolutely necessary, further constrained spending flexibility. The same amount of cash from three or four years ago does not go as far as it used to, especially in education. The same amount of money will not recruit the same number of teachers as it once would have done.

Something clearly went wrong, given that the original £145 million to increase teacher numbers was there, yet we had fewer teachers at the end of the first financial year. Of course, that is not all down to the Scottish Government. Many councils did not even touch their funding allocation for that purpose. The reasons behind that situation are entirely understandable and boil down to three points: the Government wants teacher numbers to increase, councils want to avoid making cuts in departments other than education and the money to do both just is not there—or it is not there in the volume that is needed. That funding question needs to be resolved in the medium to long term, which is why this issue, as so many do, boils down to finance.

Of course, there are things that the Scottish Government can and should do now. The most

obvious is a council tax revaluation. In principle, that appears to have the Parliament's support, but in practice it does not. Councils having far more autonomy over their finances and the power to raise revenue would enable them to make longer-term decisions that should reduce the reliance on Government top-up to prop them up when it comes to workforce planning.

We come back regularly to workforce planning in the Parliament, as Pam Duncan-Glancy highlighted. In many ways, it is an easy issue to bash the Government over the head with, but that approach has not got us anywhere. Something in the tension between the Government and COSLA has to give. The conflict in education that we constantly battle with is the premise that education is a national issue on which the Government is judged, when local authorities are the ones that are tasked with delivering that education.

There is a clear need for dialogue on funding in schools. There is a need for the Government and COSLA to show good will to each other and to act in good faith. Yes, it is valid for the Government to be frustrated at local authorities for spending hundreds of millions of pounds with no clear outcome. As much as I have sympathy for the Government on this, COSLA is also right to argue that teacher numbers, the national care service and the council tax freeze—to name just a few examples—are things that should be discussed outside the budget process, because they do not involve just budgetary decisions. As has been mentioned, we need the overall strategy and partnership working. Without reforming how councils are funded and how education is planned nationally, we will keep repeating the cycle of failed delivery over and over again.

Teachers and young people are suffering, as Willie Rennie highlighted so clearly in his opening speech. Compromise is possible, however, and we can all see a way forward, but everyone has to be willing to work together in good faith to get to that place, where we have the right teachers in the right place, supporting all our young people as we know they can.

15:15

**Jamie Greene (West Scotland) (LD):** It is hard to believe, after 17 years of the present Government, that we are having this debate. We really should not be, but here we are. Let us not beat about the bush, cabinet secretary: there is a crisis in teaching in Scotland. On one hand, we are short of teachers in key subject areas, such as STEM and modern languages; on the other hand, we have an oversupply of teachers in primary schools. How can we reconcile that? I have not heard a single word of admission of the problem from members on the front benches. That is not a

staffing issue, and it is not a council issue; it is a planning failure, it is a whole-system failure and it is absolutely a Government failure.

Let us look at the facts. In 2024, there were 631 fewer teachers than just one year prior to that. Since 2008, the number of maths teachers has gone down by 12 per cent in Scotland, the number of physics teachers is down by 8 per cent and the number of computing science teachers is down by—wait for it—25 per cent. Every year, STEM recruitment targets are missed, while hundreds and hundreds of fully trained, good primary school teachers are unemployed.

Let us take Glasgow as an example. In 2017, 73 per cent of primary school teachers went straight from probation into a permanent job. By 2023, guess what the number was? It was 10 per cent: just 10 per cent went into a permanent job. Jenny Gilruth says that our teachers in Scotland are the best paid in the United Kingdom. That is all very well and good, but you need a job to be well paid. That is the problem that we are trying to raise this afternoon. The cabinet secretary says that she has sympathy for those primary school teachers. I have sympathy for them, too. However, they do not want sympathy; they just want a permanent job. It is as simple as that.

What effect does all that have on pupils, more importantly? Multilevel teaching has increased dramatically. According to one study in Dundee, 40 per cent of classes had multilevel teaching at one point. That is an absolute disgrace. According to the University of Stirling, there has been a clear

“reduction in the number of subjects”

offered under the present Government.

Enlighten has told us that

“one in eight of all secondary pupils ... attend a secondary school with no qualified computing science teacher. This rises to around 50% in rural areas”.

Every child in Scotland should have access to subjects such as maths, sciences, computing and modern languages.

We have heard of other teachers who have come to Scotland to make it their home but cannot teach due to issues with General Teaching Council qualifications. We have been talking about that for a decade in the Parliament, but we have never been able to resolve the issue.

That is not just bad for schools and for teachers; it is bad for the economy. We need those skills to be taught at the earliest possible age, so that the industries of the future—renewables, fintech, artificial intelligence and life sciences—all start in the classroom. If we have no computing science teachers today, we will have no coders tomorrow. If we have no physics teachers today, we will have no engineers tomorrow. There is a massive skills

gap in Scotland, costing us hundreds of millions of pounds a year.

Here is the answer. We need smaller class sizes, we need more teachers in secondary and we need proper workforce planning in primary education, where supply equals demand and vice versa.

The context of the debate is simple. No teachers means no skills, and no skills means no economic growth. That all starts with the Government accepting some responsibility.

15:19

**Jackie Dunbar (Aberdeen Donside) (SNP):** I want every child in Scotland to get the best possible start in life, and education is an affa big part of that best start. We have great schools and we have excellent teachers. We have a very good education system and we are committed to making it even better.

However, our education system faces challenges. The first of those is mentioned in the motion. We cannot commend our teachers enough for the work that they do day in, day out, but, as we have heard, we have shortages of teachers in key subjects, especially in the STEM subjects of science, technology, engineering and maths. I know from my constituency, in which the energy sector is a major employer, that you can never have too many folk going into those areas and that STEM graduates are highly sought after.

It is from that same pool of graduates that we need to encourage folk to move into teaching. There is a big risk that that becomes a spiral: if fewer STEM teachers means fewer people studying those subjects at school, fewer folk will study them at university and there will be fewer graduates to recruit teachers from.

The biggest risk to education is the immigration policies that are campaigned for by Nigel Farage and delivered by Keir Starmer. However, I am keen to focus my speech on solutions, investment and positivity. In this financial year, our SNP Government is investing more than £4.3 billion in Scotland's education system. I give Willie Rennie and his Lib Dem colleagues their due: unlike some members, they voted for the budget that delivered that funding.

Councils are getting £186.5 million this year to support the recruitment and retention of teachers. There is £29 million of investment from the Scottish Government for additional support needs, which will include support for the recruitment and retention of the ASN workforce. There is more than £100 million to support modern and foundation apprenticeships.

The Scottish Government's teaching bursary scheme provides bursaries of £20,000 for career changers who wish to undertake a one-year professional graduate diploma in education in hard-to-fill STEM subjects, and the preference waiver scheme lets probationer teachers receive up to £8,000 on top of their probationary salary. That could see teachers receiving a salary of more than £40,000 for their first year in teaching. That is on top of support through pupil equity funding and tuition being kept free in Scotland, with no up-front tuition fees and no backdoor tuition fees.

What does that funding, and the funding for years gone by, mean in practice? It means that the number of schoolteachers in post in Scotland has increased by 6 per cent since 2014. The poverty-related gap for young folk leaving school and going on to a positive destination has reduced by 60 per cent since 2009. The number of Scots from the most deprived backgrounds entering university on full-time first degree courses is now up by 37 per cent. Around 400,000 apprenticeship opportunities have been provided to young folk across Scotland since 2008. Scotland's teachers continue to be the best paid in the UK and Scotland has the lowest pupil-to-teacher ratio in these islands. Scotland has the highest school spending per pupil across these islands.

The SNP has invested in Scotland's future. We are ensuring that young folk in Scotland receive a top-quality education and that they can get the best possible start in life. Long may that continue.

15:23

**Douglas Ross (Highlands and Islands) (Con):** I am grateful to the Liberal Democrats for bringing this topic to the chamber, to allow us to have another education debate. I was thinking about the last education debate. There was no motion or amendment from the Government because the SNP agreed with everything that the Conservatives and other parties were saying. This time, there is a Government amendment, so it clearly wants to change something—and I have to wonder which party it has done a deal with to get it through at decision time tonight. I noticed that one party is not represented in the chamber; it will be interesting to see how its members vote this evening.

I had a look to see what the cabinet secretary's amendment will change in the motion. Will she add to it, as the other parties' amendments would do? No—she is cutting bits out of it. What does the cabinet secretary seek to remove? She will remove

“further notes the failure of the Scottish Government to make sufficient progress on its 2021 commitment to recruit 3,500 more teachers”.

Does the cabinet secretary not believe that there has been a failure? Does she actually think that we will recruit 3,500 more teachers over the course of the remainder of this parliamentary session, to meet that target? I do not know—does Jenny Gilruth believe that? I do not think so. She has explained that it is all to do with local authorities and suchlike, but that was not the issue when her immediate-but-one predecessor made that commitment.

The education secretary at that time who made the pledge and had it inserted into the SNP manifesto was one John Swinney. What has he gone on to do? Oh yeah—lead the Government! He cannot even fulfil a commitment that he made as education secretary, in a Government that he now leads.

I do not remember an asterisk in the SNP manifesto saying, “Subject to the agreement of the local authority”. Nor do I remember the SNP saying, when asking people to vote for that commitment—a very appealing commitment to make—and for their local SNP candidate, “Please check with your local councillor whether they endorse this.”

What we are getting now are excuses. At the time, it was a bold commitment. However, once again, it is one that this SNP Government has failed to deliver on. I was reminded that it was just a year ago, when I used to sit on the Conservative front bench and put a number of questions to the First Minister, that I asked him four times whether he would commit to those 3,500 additional teachers over the course of this parliamentary session, and he refused to do so on each of those four occasions. John Swinney, who has more faces than a town clock, now seems to be saying to his Government, “We accept that we will not meet that commitment, but it is not our fault; it is someone else’s issue—and let us blame local government.” That is, sadly, the pattern that we see from this SNP Government.

Earlier in the debate, the cabinet secretary said that she would listen. However, I hope that she does more than just that; I hope that we get some answers. We need a new strategy and the delivery of additional teacher numbers across Scotland, because our current teachers, who do outstanding work, are struggling under the pressure.

I will finish with some comments from a local teacher from the Highlands who has contacted me. I hope that the cabinet secretary will take this away, or reference it in her closing remarks, because it is less partisan. This teacher tells me that she qualified as a primary teacher five years ago, having

“pursued this career with the dream of bringing my skills back to the Highlands where I grew up and hope to raise my own family.”

She chose to be placed anywhere in Scotland in her probationary year, hoping that that would increase her chances of securing a permanent role. She was not placed in Highland, so she did her probationary experience elsewhere. Now, for the past five years, she has been actively seeking permanent teaching roles in Highland, but none has been available to external applicants.

Although I accept that that is a local authority issue, I would be interested in the cabinet secretary’s response to it. Is it right that Highland Council—and, I know, others—are excluding people who want to move to a part of Scotland where we need people to come and live and make their lives, because jobs are for internal applicants only? This is someone who has deep connections to the Highlands and who wants to raise her own family there, yet she is currently being excluded from pursuing her career in teaching in an area that she loves. I hope that the cabinet secretary will take that on board and respond.

15:27

**Alex Rowley (Mid Scotland and Fife) (Lab):**

We will not be able to tackle the workforce challenges in education until we tackle the massive issues in our schools, which this Government has failed to do. Jackie Dunbar said that STEM graduates are highly sought after, which is right. However, given the challenges that teachers are facing, including burnout and behavioural problems in our schools, people weighing up their career after graduation are highly likely to go somewhere other than teaching. It is not always about money; there is also the stress and everything else that goes with being a teacher these days.

The record of this SNP Government is one of broken promises. It was first elected on a promise of cutting class sizes. The cabinet secretary talked about the teacher pupil ratio being lower in Scotland than elsewhere, which, as a generalisation, it might be. However, in 2022, I made a freedom of information request asking what class sizes were in Fife. The response showed that, in local primary schools, there were 412 classes with more than 25 pupils, and 136 classes with more than 30 pupils. I know that, in many of those classes, there is one teacher to 30 pupils, or one teacher to 25 pupils. Teachers have told me that they simply do not have the time to spend with children in order to bring them on.

We have the atrocious situation in which far too many children are going from primary school to secondary school not equipped to take in the lessons there. As a former teacher, the cabinet secretary will know that teachers expect primary school pupils to come through at a certain level and that, if they do not come through at that level,

teachers have to spend a lot of time trying to support them. We doom too many children to failure.

Earlier, the Green MSP Maggie Chapman spoke about budgets. She was right to do so. Around 50 per cent of local authorities' budgets go on education. Local authorities have had to deal with pressures for a good number of years, and education budgets have taken a hit. Councillors who have to put a budget together cannot make cuts without looking at the education service.

We need to address the issue of resources and finances, and we need to look at class sizes so that, as children come through, they have the best opportunity to achieve their full potential. Right now, they are being denied that. The cabinet secretary must take some responsibility for that.

A few weeks ago, I was contacted by a young woman in Fife who told me that, after graduating as a teacher, she got a temporary contract for a year in a primary school, which she loved. She was enjoying that job, but it came to an end, and she is now running around trying to get another job in teaching. As she cannot find a job in teaching, she is having to look elsewhere.

We need more teachers and smaller class sizes, we need to ensure that there are more teaching assistants in our classrooms and we need to look at additional support needs. Those are the issues that come through time and time again, but the Government does not seem to be addressing any of them. That is the problem. I have outlined what needs to happen. The Government needs to accept its responsibility for education—otherwise, what is the point of having an education secretary?

**The Deputy Presiding Officer:** George Adam will be the final speaker in the open debate. You have up to four minutes, Mr Adam.

15:31

**George Adam (Paisley) (SNP):** As I have listened to the debate, what I was planning to say has changed about three or four times, so I apologise if my speech ends up being a bit of a mishmash of everything that has been said so far.

I will start with an obvious point, which I think we all agree on: Scotland's teachers are among the best and most hard working in the world. In places from Paisley to Peterhead, they show up every day for our young people and shape their lives. Those mentors, role models and pillars of our community deserve our heartfelt thanks.

I listened to the points that Willie Rennie made about the motion that he lodged on behalf of the Liberal Democrats, who have been newly promoted to the premier league. He made some

valid observations—it was not all nonsense. The fact that I am saying that what he said was not complete and utter nonsense is an admission that my relationship with him is heading in a positive direction. He made some valid points. None of this is easy: let us not kid ourselves that there is a silver bullet or an easy way to solve the problem.

As someone who has been on the education committee in its many guises throughout his time in Parliament, I know that we need to sit down together and come up with solutions. Initially, I thought that that was what this debate was about. Mr Rennie was perhaps a bit aggressive in his delivery, but who am I to talk about that?

We talk about the geographical challenges that exist for young people who are training to be teachers. I used the phrase “from Paisley to Peterhead”. Someone who lives in Paisley is unlikely to want to go for a job in Peterhead. The cabinet secretary mentioned the possibility of future schemes to tackle that issue. We need to find a way round it. I understand why people will not move to another part of the country, away from where their family and all their support are. If they are starting a new career, they will want to have that support.

Nobody is pretending that the teaching profession does not face challenges—we all know that it does. However, I find it surprising that the Liberal Democrat motion has been framed in such a doom-and-gloom manner, to the extent that it undermines much of the good work that our teachers are doing in our communities.

**Willie Rennie:** In making his reasonable contribution, does the member recognise that the Government has contributed to the surplus, and therefore the unemployment, of primary teachers?

**George Adam:** Our job is to work together on solutions. The cabinet secretary has been open about how she is willing to work with members and others to see how we can go forward.

Much of what has been said ignores lots of good work that the Scottish Government has done, which has involved real investment. As the cabinet secretary mentioned, the number of teachers in permanent posts has remained stable at more than 80 per cent for the past 10 years, and the number of school teachers in post in Scotland has increased by 6 per cent since 2014. Those are good things.

I have seen how the attainment challenge and pupil equity funding have delivered for schools in Renfrewshire. That has involved hiring additional staff and has delivered real improvement in outcomes for kids in our most deprived areas. That is a step in the right direction.



Let us be honest. There is work to do, but we have to acknowledge that there has been much that is good. As I have said, more than 80 per cent of teachers are in permanent posts, and we have the lowest pupil teacher ratio in the UK.

The Scottish Government's amendment is about partnership, evidence and ambition. It is about building a future in which every child in Scotland, whether they are in Paisley, Perth or Portree, has access to brilliant teaching and the opportunity to thrive and be all that they can be in life.

**The Deputy Presiding Officer:** We move to the winding-up speeches.

15:36

**Maggie Chapman:** There has been some discussion of the need for collaboration between national and local government to achieve a sustainable teaching workforce. The Liberal Democrat motion, which the Scottish Greens support, rightly highlights the failure to meet the target of 3,500 new teachers. The Parliament must come to terms with that shortfall.

However, one key omission, which was highlighted by the cabinet secretary and others, is the role of local authorities. It is therefore good that the Government's amendment adds reference to the need for any new plan for the teaching workforce to include local authorities. Such partnership working with our councils is crucial. As I mentioned earlier, I want £186 million to be used to recruit and retain teachers in our schools, but I also respect the fact that local authority elected representatives have as much democratic legitimacy as we have, and they are the employers of those who work in our schools. There is an obvious tension between those two positions.

The Conservative amendment touches on a number of issues that were raised during that party's most recent business debate. Again, it refers specifically to pupil support staff. That goes hand in hand with long-term workforce development. One issue relating to support staff is that, starting in around 2019, Government statisticians could no longer distinguish between ASN staff and classroom or general pupil support assistants; from that point onward, they began to group those two categories together in the school staff census. That is why the Scottish Greens worked with the cabinet secretary to develop policy proposals for a system of accreditation and registration of ASN staff.

However, it is not only about support staff. There has been a significant reduction in ASN teacher numbers relative to the number of pupils. In fact, there has been no increase in the number of ASN teachers in our schools even in absolute terms. We must give teachers the opportunity to

move into ASN specialist teaching as a point of career progression—and the only way that we can encourage more teachers into ASN teaching is by making it a promoted post. That requires additional resourcing, but so does a long-term strategy for teacher workforce recovery.

That is why at the root of the debate is something deeper: how we fund education at its core. Scotland's failure to reform local government finance in 25 years is being felt in our schools. We must give local authorities far more powers to raise revenue, and we should give them the option of using those powers if, and however, they wish.

It is not normal to have a tier of government that raises only about 20 per cent of its funding. The Greens have put forward proposals for a carbon emission land tax, a demolition levy and a stadium levy. We believe that, ultimately, councils should have a power of general competence to raise that money for themselves. However, we accept that that will not happen immediately to resolve the issue that we have discussed today. That important issue cannot be a stand-off between the Parliament and local authorities—between central planning and local delivery. Neither should we reduce it to a waiting game to see who blinks first.

I am glad to see an indication of forward movement from the Government, but we cannot support pupils without supporting teachers. We should not settle for reactive measures, nor can we support teachers without supporting councils, or support councils without reforming how we fund them. That is where the long-term discussions must start.

15:40

**Martin Whitfield (South Scotland) (Lab):** I make reference to my declaration of interests because I was launched into the current session of Parliament having been a primary school teacher and paid by a local authority.

It has been an interesting debate. I thank the Liberal Democrats for taking the opportunity to bring education into the chamber. There has been agreement across the chamber that the education environment is—I will choose the word that is the lowest bar that we have—challenged because of the situation of teachers and their workload.

A lot of members have pointed out that we need to address the quality of teaching as well as the salary to ensure that we can stimulate people to come into teaching, stay in teaching and see teaching as a positive and important career that will bring incredibly rewarding moments throughout their life. The cabinet secretary, among others, acknowledged that.

Another aspect of the debate, which is also reflected in other debates about education, is the Government's demand that everyone recognises that it does not employ teachers. Everyone in the chamber acknowledges that the Government does not employ teachers; that is the responsibility, in the main, of our local authorities. However, it is the Scottish Government's responsibility to create, define and manage the pool from which qualified teachers can be employed. The General Teaching Council for Scotland has responsibility for ensuring that teachers are adequately trained and properly up to the job, and that they are monitored throughout their career to ensure not only that they meet the baseline but, for those who carry additional responsibilities, that that is reflected in their registration.

However, on the actual numbers, the cabinet secretary talked about the responsibility that she suggested universities have. Universities take that responsibility from the audit and, in essence, from instructions from the Scottish Government about forthcoming needs, because it funds university places.

**Stephen Kerr (Central Scotland) (Con):** Will the member take an intervention?

**Martin Whitfield:** I am going to tempt my learning once again and accept a short intervention.

**Stephen Kerr:** I just wanted to share with the member that I have asked the cabinet secretary for numbers on newly qualified teachers, teachers in post and so on, but the Government has no statistics. This Government runs blind—it has no statistics.

**Martin Whitfield:** I am very grateful for that short intervention from Mr Kerr, because it actually allows me to move on to the next part of my speech, which gets to the heart of not only this discussion but other discussions that we have had throughout the session. What is involved in considering the number of teachers that we need in the future?

We have a challenge because of the census running late, and a challenge in knowing the number of children, and their ages, who actually need education. However, that data exists. What has not happened at the Scottish Government level is proper and full consideration not of what the needs were last week, last year and five years ago, but what the needs are going forward.

We have heard that a number of teachers with a primary education qualification cannot get a permanent job. They move from supply contract to supply contract or temporary contract to temporary contract. The cabinet secretary talked about how we can make teachers feel that they are valued. One way is to give them a contract.

Someone who is qualified as a primary school teacher in Scotland and registered with the GTCS can teach the entire broad general education. That means that they can teach at a high school, not as an ASN specialist or as a teacher overseeing certain groups—they can teach secondary 1 or S2. That addresses the comments that we have heard about pupils who go into high school sometimes being challenged by the levels that exist.

Let us remember when the Scottish Government unilaterally lifted expectations around what pupils leave primary school with. That caused chaos in high schools, because they could not make it.

15:44

**Roz McCall (Mid Scotland and Fife) (Con):** First, Presiding Officer, I apologise to you, Mr Rennie and the chamber for the fact that I arrived late to the debate this afternoon.

I am pleased to be the closing speaker for the Conservatives in this debate, and I thank our Liberal Democrat colleagues for bringing the issue to the chamber. We last debated teacher numbers last October, in Conservative Party business time. Disappointingly, seven months on, the figures, percentages and problems that we discussed then are still current.

Despite the Scottish Government's protestations, nothing that it has done has worked. Everything that we discussed and highlighted as an issue in October is still an issue. We ended up with £186.5 million in ring-fenced funding for local authorities, which has not adequately stopped the decline in teacher numbers, and targets for new teachers have not been met. That is an unacceptable situation.

Teacher numbers, including for early learning and childcare staff, have decreased by 1,688, and the numbers of teachers in maths, computing science, technical education and physics are all down. What about those teachers who have graduated and are looking for permanent positions? In 2016-17, more than half the post-probation teachers found full-time employment, but by 2023-24 less than a quarter did. Last year, the numbers of graduates who are enrolled in PGDE secondary teaching courses involving English and biology were about half the numbers required, and the numbers in chemistry, physics, maths and computing are all sitting at about a third of the targets that were set.

What about primary education? A recent Institute for Fiscal Studies report states:

"There are also some worrying signs of the impact of this government and council misalignment on newly-qualified teachers in Scotland."

The share of newly qualified primary school teachers who had permanent contracts in state schools has fallen from 57.6 per cent to 12.8 per cent. That is not a position that we want Scotland to be in.

Maggie Chapman spoke about inflation issues and council tax concerns. Those involve external issues and highlight a financial problem, but it is not just the financial side that we need to consider; the working environment is also important, and, as Mr Whitfield said, there are challenges in that regard.

Jackie Dunbar highlighted the need for more graduates in STEM subjects to become teachers. However, as Alex Rowley stated perfectly well, that decision is not just based on salary but involves a consideration of stress, behaviour in our classrooms and contact hours.

Pam Duncan-Glancy and Miles Briggs highlighted the workforce planning challenges that we face in our classrooms, especially with regard to ASN staffing, and George Adam said that the solution involves working to find solutions—I think that that is the word that he used. I agree that it is about doing that; it is not about stating what the blockages are, where the problems are and the ways in which we are not moving forward. We are better than that.

As I said in my speech in October, teachers go to work hoping to impart the love of their subject to children, but in Scotland most teachers and school staff are witnessing and being subjected to considerable instances of negative behaviour. Our teachers are exposed to increasing levels of violence, and the plans that have been put in place are simply not working fast enough. We need details of the consequences that the perpetrators of that abuse will experience, as that is important with regard to providing our teaching staff with the tools that they need to address those issues. Until that situation is fixed, why would anyone want to work in that environment?

It is a fundamental Conservative belief that education is the key to the ability of every person to go on to achieve their full potential. Education is not only a powerful thing; it is power—power in oneself, power that comes from understanding and belief, and power that comes through the ability to work through problems and to know that one will provide oneself with a secure future.

Quite simply, we have reached a teaching crisis in Scotland. The Scottish Government is so focused on promoting the same old solutions that do not work that it has failed our teachers, our children and Scotland's future.

15:48

**Jenny Gilruth:** I welcome this debate and I share some of the sentiments that have been expressed. I have been listening very keenly to members' contributions and, although I am conscious that I have only four minutes, I will try to respond to as many points as I am able to in that time.

George Adam talked about solutions, and some members made suggestions in that respect, which I want to address. However, more broadly, when we talk about teacher recruitment shortages, we should be mindful that that is not just an issue in relation to STEM-based subjects, although I accept that that is the focus of today's motion. There are challenges in a number of subject areas, including mine, so we need to reflect on the position of teaching in the post-pandemic period and its attractiveness as a profession, which was the point that I was making in my initial speech.

As we all know, teachers are the most valuable resource in our schools. Maggie Chapman was right to point to the extra funding that has been provided in the Government's budget in relation to teacher numbers—that funding has been uprated—and the funding for additional support needs. That is a political choice that the Government has made in protecting funding nationally, and it follows that local councils should do likewise. I was therefore very pleased that, through the budget negotiations, we managed to arrive at a budget agreement with COSLA on that point.

I come to some of the points that Ms Duncan-Glancy made. The Labour amendment speaks to a national supply system, and I very much agree with her on that point. We currently have 32 councils with 32 different approaches to recruitment. Douglas Ross raised that issue in relation to his constituent in Moray when he talked about recruitment practices involving the appointment of internal applicants only preventing others from being able to apply. I know that that approach was used in Fife Council when I was last employed as a teacher back in 2014, before I became a politician. There was a very locked-down approach to teacher recruitment in Fife Council, which was detrimental to enabling talent to flow into that part of Scotland.

With regard to broadening recruitment practices, I would therefore be very supportive of Ms Duncan-Glancy's proposals in that space. We have previously tried to do exactly that through the Scottish Negotiating Committee for Teachers. We have to get agreement from the teaching unions and COSLA to move forward on that, but I am absolutely up for pushing it forward if Parliament supports that position today, because I think that there are opportunities in that respect.

I turn to some broader points that were made in the debate. I am conscious that I have two minutes left, Deputy Presiding Officer. Mr Greene made a number of points in relation to STEM subjects. As I mentioned, there are issues in a range of subject areas, but the point that he made speaks to the language of entitlements. The entitlement to the totality of our curriculum is something that Louise Hayward flagged up in her review report back in 2023. We should have democratic availability of entitlements in all subject areas, and I want that to be the case in every school. However, I recognise that that is not currently the case, so we need to be creative in finding solutions to address that challenge.

Mr Greene also touched on the General Teaching Council for Scotland's relationship with, and responsibilities towards, the teaching profession. There is an opportunity for us, with the GTCS, to look at that issue in more detail. Colleagues write to me regularly on the GTCS's role in that respect.

With regard to the ask on joint workforce planning, it is important to put on the record that that process is being led by the newly established education and childcare assurance board. On the responsibilities, I note that the Government has responsibility for national workforce planning, but local workforce planning is the responsibility of local authorities. I do not think that I heard any challenge to that this afternoon.

It is important to reflect on the points that Mr Adam made about the number of teachers who are in permanent posts these days. I accept that the situation in our primary schools is currently challenging but, since 2014, across the board, approximately 80 per cent of our teachers have been in permanent posts. We also know that about 3,000 extra staff, including nearly 1,000 teachers, are currently being employed through the Scottish attainment challenge. That extra funding is coming from the Scottish Government to help to support teacher recruitment.

I was interested to see the point in the Labour amendment on making the SAC and PEF allocations permanent—

**Pam Duncan-Glancy:** Will the cabinet secretary give way?

**Jenny Gilruth:** I am conscious of time, Deputy Presiding Officer, and I see that you are shaking your head.

I am interested in the proposals that the Labour amendment sets out on funding. The Government has committed to the continuation of that funding to 2026-27. I have to acknowledge that there will be an election next year, so how we fund our schools beyond next year is in the gift of the Scottish people. Nevertheless, we have given that

commitment, and I know that the Labour Party also supports the continuation of that funding.

It is important to recall that there is still a lot to be positive about in Scottish education. We in the Parliament have a responsibility to be mindful of that as we want to encourage people into teaching as a profession. Members have contributed much in terms of solutions, and I commit again to working with and supporting them to drive the improvement that we need in our schools.

**The Deputy Presiding Officer:** I call Beatrice Wishart to wind up the debate.

15:53

**Beatrice Wishart (Shetland Islands) (LD):** I thank all the members who contributed to the debate. I pay tribute to teachers across Scotland, who are working under increasing pressures. As George Adam highlighted, teachers show up and shape young people's lives.

At the beginning of the debate, Willie Rennie touched on the £20,000 bursary for teachers of STEM subjects and the fact that it does not seem to have improved recruitment of teachers in those subjects. Scottish Liberal Democrats have previously pointed to falling numbers of teachers in those subjects since the SNP took power. The numbers in technical education and computing studies have fallen to their lowest levels since records began, with the numbers of maths and physics teachers decreasing by 12 per cent and 8 per cent respectively.

At this morning's meeting of the Rural Affairs and Islands Committee, we scrutinised the Natural Environment (Scotland) Bill and we heard about the importance of resources to implement various aspects of the Scottish Government's proposed legislation. I found myself wondering where the scientists, innovators, marine planners and data analysts are that we need for the future. Where are they going to come from if STEM subjects are not comprehensively taught in our schools and the possibilities for future careers in STEM are not opened up to learners?

Locally, I have heard from EIS Shetland association representatives about pressures on teachers, which include unresolved contact time issues. Teachers have reported increases in verbal abuse and violence in schools, which is putting them at risk of harm and increased stress and anxiety. At the same time, learning in classrooms is being seriously disrupted by such incidents. Teachers leave the profession because of such incidents and the stress and anxiety that they are placed under. The effect of that cannot be measured simply by figures that show that there is one less teacher; we also need to consider the loss of institutional memory and experience, which

is a loss to learners, colleagues and newly qualified teachers joining the profession, who rely on experienced teachers to be mentors.

As Willie Rennie stated when he opened the debate, things are not simple for newly qualified teachers either, as they face difficulties such as gaining employment, underemployment and unreliable zero-hours jobs, despite some teaching roles having been advertised repeatedly. Data from a freedom of information request by the Scottish Liberal Democrats to all local authorities covering the past five years showed that a post in Aberdeenshire had been readvertised 11 times in one of those years. In the same year, 636 teaching posts were readvertised. The same data unveiled a post that had gone unfilled for 205 days, and in Shetland, a craft, design and technology post was readvertised seven times.

I turn to some of the comments that were made in the debate. The education secretary has said repeatedly that local workforce planning is the responsibility of local authorities, but the Government is responsible for the supply.

I need to go back to school, because I cannot read my own writing. [*Laughter.*]

**Martin Whitfield:** Beatrice Wishart makes a powerful point about the obligation that rests on the Scottish Government to create the pool that our qualified teachers can be taken from in order to be employed in schools.

**Beatrice Wishart:** That is exactly the point that I was trying to get across. I thank Mr Whitfield.

Miles Briggs spoke about the pressure on teachers and the sharp decline in key subjects, which is impacting on subject choices and, ultimately, the Scottish economy.

Jackie Dunbar spoke about the energy sector and the STEM graduates that are sought by that sector, but she acknowledged that key subjects have shortages.

Douglas Ross highlighted that the Government's amendment seeks to remove from the motion the words about the failure to recruit 3,500 more teachers. He also raised the issue of Highland teachers being excluded from interviews due to internal-only applications, which is diminishing the number of opportunities for more teachers to come to the area. Housing is another issue that can impact on recruitment and retention.

Alex Rowley referred to the impact of large class sizes and ratios of one teacher to 25 or 30 pupils. If primary pupils are ill-equipped to transition to secondary school, they are, in effect, being doomed to failure. Recruitment and retention is a problem in rural and island areas, which is further impacted by the lack of housing. It can make things difficult for those who are interested in

moving to the Highlands and Islands to take up teaching posts there.

To stray a little into the next debate's topic, I note that an EIS survey of teachers in Shetland found that only 11 per cent of respondents usually receive the support that they need to teach learners with ASN. In a decade, we have seen a 20 per cent increase in the number of secondary learners with ASN. Improvements in diagnoses and the reduction of stigma around mental health may have contributed to such increases, but it begs the question of why teachers do not feel supported where we are able to identify learners with ASN.

The lessons on teaching have not been learned. As the motion says, the Scottish Government needs to work with stakeholders and those in the workforce to develop a new plan. The longer we wait, the more damage we will do to our young people's education. Young people are our future—they are our future doctors, architects, fishermen and teachers. What benefits them will benefit us all and benefit Scotland's economic growth.

**The Deputy Presiding Officer:** That concludes the debate on a new plan for Scotland's teaching workforce. Before we move on to the next item of business, there will be a brief pause to allow front-bench members to change positions.

## Neurodevelopmental Conditions

**The Deputy Presiding Officer (Liam McArthur):** The next item of business is a debate on motion S6M-17670, in the name of Alex Cole-Hamilton, on addressing the inadequate provision for neurodevelopmental conditions. I invite members who wish to participate in the debate to press their request-to-speak buttons, and I advise members that there is very little time in hand.

16:00

**Alex Cole-Hamilton (Edinburgh Western) (LD):** It gives me great pleasure to propose the motion that is before the Parliament. This is the kind of debate that I got into politics to lead, and I am sure that I am not alone in that. The issue comes straight from each of our constituency casework surgeries.

On Mondays and Fridays, when we are not in the chamber, we receive our instructions from the people who sent us here and we pick up themes and narratives around what is going on in the country. Since the pandemic, I have seen a worrying uptick—it is almost an avalanche—of people coming to my surgery looking for my help because they are struggling to obtain neurodivergence diagnostic support. Put simply, they cannot get a diagnosis for things such as attention deficit hyperactivity disorder or autism.

Families at breaking point come to us all. Parents are worried sick about their children, who are—for want of a diagnosis, whether of autism or ADHD—struggling in class, with their friendship groups and with the isolation that comes with that. In some cases—at least in my constituency—they have been told that they have to wait as long as seven years for diagnostic assessment. Let me put that in real terms. For a 15-year-old who is struggling to concentrate at school while facing life-qualifying exams—perhaps they are not even able to attend school, given the severity of the situation around their neurodivergence—seven years takes them past their 22nd birthday, and that is just to get to the races, before they are even prescribed anything that will control their condition. Their exams, their confidence, their future work prospects and their relationships are all affected by a fundamental lack of proper support.

The pandemic did not create neurodivergence, but it stripped away the routines and distractions that helped many people to cope, and the scale of unmet need became impossible to ignore. Lockdown forced us to be still, and people who had usually filled their lives with noise and activity suddenly began to understand a great deal more about their make-up. As we emerged from

lockdown, referrals for ADHD diagnosis and treatment soared and waiting times exploded. That did not just happen here—it is a phenomenon that we saw the world over. In the year after Covid restrictions were lifted, the number of referrals for ADHD in adults in Greater Glasgow and Clyde rose by more than 1,000 per cent. That is a staggering number, but it speaks to the revelation that we encountered after the pandemic. That was replicated in countries around the world, which led to a global shortage of ADHD medication due to the huge surge in demand. Health boards had reports of closures of the titration clinics that people needed to get started on treatments in order to begin their care pathways, which created a perfect storm.

Desperate for help, many families turned to the private sector. For years, there was at least a safety net there. If someone could scrape together the money for a private diagnosis, their general practitioner could prescribe them medication on the national health service under a system called shared care, whereby they would recognise that private diagnosis. However, in areas such as NHS Lothian, shared care has now been scrapped, with no clear explanation as to why. Do not get me wrong—those families would not normally have gone private. They could not normally afford to go private, but such was their desperation and anxiety about their children's prospects that they would scrape together that money, and, by so doing, they were doing everyone a favour. If even a small proportion of the people on the list can get a quicker diagnosis privately, they are freeing up space for anybody else left on that list.

It should go without saying, however, that no family should have to shell out thousands of pounds due to a failure in the system. That flies in the face of the fundamental principles on which the NHS was established. I have never had a satisfactory answer from NHS Lothian about why shared care has ended. It is not right to blame GPs—they are stretched to breaking point. Let us be clear that it is a political failure. We have talked previously in the chamber about how GPs in primary care have been let down by the Scottish Government, and this situation is no exception.

Through its amendment, and by the decisions that it is taking, the Scottish Government is failing to tackle or even acknowledge the serious pressure that our GPs are under. I am disappointed by that, but I am not surprised. I also note that the Government's amendment sidesteps my party's call for a "robust protocol" for reinstating shared care arrangements. Again, I am disappointed but not surprised. We need to show real leadership here so that people get the support that they need now, not in seven years' time.

**Sandesh Gulhane (Glasgow) (Con):** I declare an interest as a practising NHS GP. When patients come to see me, they are often desperate, and they come with a private diagnosis. There is nothing that I can do for them. Does the member agree that that is absolutely destroying the morale of medical professionals?

**Alex Cole-Hamilton:** I think that we all know—we have heard about it in several debates in the chamber—about the pressure that our hard-working GPs are under. I pay credit to Sandesh Gulhane for his work at the front line. His testimony speaks volumes and adds to the debate.

Ministers will also not acknowledge their failure to keep the pledge to allocate 10 per cent of NHS spending to mental health—a hard-won pledge that has now disappeared—and 1 per cent to child and adolescent mental health services. It was a promise made and a promise broken.

This is a crisis. It is a crisis for learning, mental health, work and families. It affects attainment in our schools, productivity in our economy and the wellbeing of tens of thousands of our constituents. That is why the Lib Dems have brought the debate to the chamber today. We are demanding urgent action from the Government. Today, we are calling for those robust protocols on shared care. We are calling for the creation of a national stepped pathway for autism and ADHD diagnosis; for titration clinics to remain open; for the delivery of the promised 10 per cent of the NHS budget for mental health; and for the recruitment of the GPs, psychiatrists and support workers we need.

This is not just about cutting waiting times. It is about building a system that meets the needs of people where they are.

I move,

That the Parliament recognises the scale of the mental health emergency in Scotland; notes with concern the lack of adequate provision for neurodevelopmental conditions, particularly in the context of a sharp rise in demand for neurodiversity assessments and treatment for adults and children following the COVID-19 pandemic; further notes the additional pressure on services caused by the global shortage of attention deficit hyperactivity disorder (ADHD) medication, which has led to the closure of titration clinics in some areas and significantly impacted waiting times and access to care; recognises the profound distress and disruption this causes for individuals and families who are left without timely diagnosis or support; acknowledges the knock-on effects on child and adolescent mental health services (CAMHS), as well as the wider economic consequences of rising levels of economic inactivity linked to unmet mental health needs; notes the pressure that this puts on GPs and primary care; further notes with concern the widespread removal of shared care arrangements where patients who obtained a private diagnosis could receive ongoing care and medication through the Scottish NHS; expresses disappointment at the Scottish Government's failure to meet its commitment to allocate 10% of NHS spending to mental health and 1% to CAMHS;

calls on the Scottish Government to work urgently with NHS boards and local authorities to devise a robust protocol on the use of shared care arrangements to allow for their use where appropriate, and further calls on the Scottish Government to create neurodevelopmental pathways and stepped care models, as recommended by the National Autism Implementation Team and Royal College of Psychiatrists in the 2021 National Clinical ADHD Pathway Feasibility Study.

16:07

**The Minister for Social Care, Mental Wellbeing and Sport (Maree Todd):** I thank the Liberal Democrats for lodging the motion, which highlights the need to improve neurodevelopmental support.

I acknowledge that the increase in the number of people—children and adults—seeking neurodevelopmental support and assessment in Scotland is creating challenges for services right across Scotland. Figures on the number of people seeking a diagnosis for a neurodevelopmental condition are not currently nationally reported or published. We are working with health boards and local authorities to improve our understanding of how many people are seeking support and how that data can be used to deliver improvements.

It is important that I acknowledge that a diagnosis can be important to an individual's health and wellbeing, but I must stress that a diagnosis is not required to access support. I also want to address the issue raised in the motion of the unmet need for mental health support.

**Alex Cole-Hamilton:** Does the minister recognise that, although she is right that a diagnosis is not necessary just for support, it is definitely necessary for medication? In some cases, particularly with ADHD, medication can really manage symptoms.

**Maree Todd:** Certainly. As a prescriber, I recognise the role of medication in the treatment of ADHD. It is not the only treatment, and neither is it the first-line treatment. There are a number of steps to go through before medication is prescribed for ADHD, but I recognise that medication can be life changing for people with that diagnosis.

I put on record the fact that we have a higher number of staff delivering more care to a larger number of people than ever before. For the first time ever, national performance has met the 18-week child and adolescent mental health services standard, with 90.6 per cent of children and young people starting treatment within 18 weeks of referral.

The budgets for direct mental health programmes have also more than doubled in the past five years. Collectively with NHS boards, we spend more than £1.5 billion in this area each

year, and we expect more than £1.5 billion to be spent in the current year. Health boards continue to make good progress towards their target of spending 10 per cent of their front-line spend on mental health and 1 per cent on CAMHS.

A range of work is under way to improve support for neurodivergent adults. We have accepted the recommendations from the adult neurodevelopmental pathways pilot and we are working with partners to implement them. We also fund the national autism implementation team to support NHS boards to develop, enhance and redesign local neurodevelopmental services for adults. Through our adult autism support fund, we invest £1 million a year to provide support to autistic adults. That fund has supported 1,800 autistic people and 470 families, and a formal diagnosis is not required to access the support that is provided.

Training and development for the workforce is also key to improving services and getting better at meeting demand. That is why we have commissioned NHS Education for Scotland and the NAIT to develop a range of professional learning on neurodevelopmental conditions.

As I said recently in the chamber, we are also taking action to support young people with neurodevelopmental needs. Building on our previous investment of more than £1 million, we provided nearly £250,000 in 2024-25 to fund a range of individual projects that are aimed at improving assessment and support for children and young people.

In partnership with the Convention of Scottish Local Authorities, we have undertaken a review of the implementation of the national neurodevelopmental specification. The review offers an opportunity to reflect on learning and progress, and it will inform improvements to support health boards and local authorities to deliver the specification. I will provide a further update on that to the Parliament in due course.

I know that many people are concerned about the issue of private diagnosis and shared care policies. Some NHS boards have shared care policies, but it always remains at the clinical discretion of each individual GP to decide the best course of action for their patients. My officials have written to all health boards, seeking information on the adult neurodevelopmental services and support that are offered locally, including protocols for patients with a private diagnosis. However, I highlight that any local protocols cannot require GPs to enter shared care agreements. GPs are independent contractors and are not obliged to enter into agreements as a consequence of their contracts with local NHS boards.

I also know that an issue of concern to many people with ADHD and their families is shortages of medication for ADHD. The chief pharmaceutical officer wrote to NHS boards in January to provide further background on medicine shortages more generally and how those are managed and to clarify the current position on ADHD prescribing.

I look forward to hearing from colleagues and to responding to more specific issues in my closing speech.

I move amendment S6M-17670.3, to leave out from “of the mental” to end and insert:

“and urgency of unmet need in both mental health and neurodevelopmental support, particularly in the context of a sharp rise in demand for neurodiversity assessments and treatment for adults and children following the COVID-19 pandemic; notes the additional pressure on services caused by the global shortage of attention deficit hyperactivity disorder (ADHD) medication, which has led to the closure of titration clinics in some areas and significantly impacted waiting times and access to care; recognises the profound distress and disruption this causes for individuals and families who are left without timely diagnosis or support; acknowledges the knock-on effects on the health service, as well as the wider economic consequences of rising levels of economic inactivity linked to unmet neurodevelopmental and mental health needs; notes with concern the widespread removal of shared care arrangements where patients who obtained a private diagnosis could receive ongoing care and medication through the Scottish NHS; calls on the Scottish Government to work urgently with NHS boards and local authorities on their shared care arrangement protocols, but understands that decisions around the best course of treatment for patients are for individual clinicians; further calls on the Scottish Government to expand and create adult neurodevelopmental pathways and stepped care models, as recommended by the National Autism Implementation Team and Royal College of Psychiatrists in the 2021 National Clinical ADHD Pathway Feasibility Study; notes the four pilots that the Scottish Government funded following these recommendations, the establishment of a neuro-affirming community of practice and ongoing scoping work on demand and capacity for adult neurodevelopmental services, including work with NHS boards and local authorities on local neurodevelopmental data; calls on the Scottish Government to convene a cross-party summit on addressing waits for neurodevelopmental support and mental health capacity to avert a crisis for individuals and families waiting too long; recognises the progress made towards the Scottish Government’s commitment to allocate 10% of NHS spending to mental health and 1% to CAMHS by the end of the current parliamentary session, and thanks the dedicated NHS and wider workforce for its hard work in providing neurodevelopmental and mental health services in this time of increased demand.”

16:13

**Sandesh Gulhane (Glasgow) (Con):** The Scottish Conservatives support the motion and will vote for it.

As a clinician, I have seen first hand the growing numbers of families that are coming through my door worried sick about their children’s



development or mental health. They are exhausted from hitting brick walls when they try to get help. They are not asking for miracles; they are asking for assessments that do not take years, for teachers who understand their child's needs and for support that actually shows up when it is needed, not an age after the crisis has already hit.

We are absolutely in a mental health emergency, and the lack of effective support for neurodevelopmental conditions such as ADHD and autism is making it worse. Covid accelerated demand, but let us be honest: these cracks were there before the pandemic. Children are now waiting up to four years for assessments; a 12-year-old will be assessed when he sits his national 5s. We also know that, in some health board, services have simply shut their doors to new referrals.

I do not need to tell anyone here what that does to families. Parents are left feeling ignored, and young people lose confidence, fall behind in school and, in too many cases, develop more serious mental health issues as a result.

The SNP says that it is investing in mental health, but we have got a postcode lottery for services—and behind every postcode is a child, a parent, a family, a teacher and a GP trying to hold things together without the right tools.

The number of special teachers has gone down, and special schools have been shut. In my Glasgow region, East Park school has delivered outstanding specialist education for the most challenging children with special needs on the same Glasgow site for more than 150 years, but its £1.3 million grant is ending, throwing the school into crisis.

As for mainstream schools, they are expected to do more with less while more than 40 per cent of pupils now have additional support needs. The SNP also quietly shelved its proposed learning disabilities, autism and neurodiversity bill.

We in the Scottish Conservatives believe that all that must change—and that it must do so urgently. We want there to be clear national pathways for assessment and treatment, proper investment in CAMHS and local neurodevelopmental teams. Shared care arrangements should be reinstated where appropriate so that people who are diagnosed privately are not abandoned by the NHS. We want schools to be equipped to support neurodivergent pupils from the start, not only after problems escalate.

We need to stop managing crisis and start delivering early joined-up care that gives children the best chance to thrive and parents the reassurance that the system is on their side, not working against them.

I move amendment S6M-17670.2, to insert at end:

“; believes that years of Scottish National Party (SNP) administration mismanagement have led to over 3,000 children and young people waiting to start mental health treatment; acknowledges that the Scottish Government pledged £55.5 million in 2023-24 to improve neurodevelopmental and mental health services, but that inconsistent referral processes and widespread delays remain; recognises that some NHS boards, such as NHS Tayside, have stopped all new referrals for attention deficit hyperactivity disorder (ADHD) and autism child and adolescent mental health services (CAMHS) due to increased demand for assessments; notes that children and adults alike have faced waits of up to 201 weeks for autism and ADHD assessments, with regions like Grampian and Tayside reporting delays of four years or more; understands that thousands of children last year waited for neurodevelopmental assessments, with 7,650 children in Greater Glasgow and Clyde alone waiting to be screened; agrees with the Royal College of Psychiatrists, which said that the growing demand for neurodevelopmental conditions services in Scotland poses a systemic risk to the sustainability of mental health services, and acknowledges that waiting times for neurodevelopmental assessments in Scotland are at risk of exceeding 10 years within the next few years if urgent reforms are not made by the Scottish Government.”

16:16

**Paul Sweeney (Glasgow) (Lab):** I thank the member for Edinburgh Western for allocating one of his party's official Opposition day debates to a motion about the inadequate provision for neurodevelopmental conditions in Scotland. I know that our constituents' access to mental health services is an issue that is close to the heart of many members across the chamber and is one that is reflected in our casework.

It is a matter of fact that this Government has overseen a decline in mental health service quality across the country—and, given the amendment that it has lodged, it seems that it is unwilling to address and remedy that.

We are rightly concerned about the state of mental health services. Even though the Covid pandemic devastated Scotland's already overstretched mental health services, we find ourselves in a position in which funding is still not being allocated properly to realise best value, waiting lists keep growing, private diagnoses are increasing unnecessarily and service after service is cut across Scotland, with the buck passed to local authorities and ministers washing their hands of the situation.

We need to recognise that we did not build back better. Indeed, it has just been crisis followed by crisis, leading to more broken lives and distressed families across Scotland. A point that we often forget when we talk about funding and percentages is what the Scottish Government's goal of spending 10 per cent of NHS funding on

mental health services and 1 per cent of its funding on CAMHS is supposed to mean. That is not meant to be just an abstract numerical target. It is supposed to mean security of funding for mental health practitioners; the end of waiting times that are measured in months and years rather than weeks; and a Scotland where support is available for those who need it, not just those who can afford private healthcare, where children's mental health is a priority, not an afterthought, and where getting it right for every child is the reality.

Let us remember that real people are affected by the Government's failure. We know that people with ADHD are five times more likely to attempt suicide and that self-harm is higher in those with ADHD and emotional dysregulation. Every delay in diagnosis and every failure to intervene early is a decision that might lead to far worse outcomes for the individual who is involved. There is a price to be paid for this Government's failure, and that price falls on the heads of those who are most unable to pay it. That is why the Labour Party is happy to support the motion, which our amendment seeks to strengthen by calling on the Government

"to publish data on the number of patients with neurodevelopmental conditions who are being removed from CAMHS waiting lists."

We know there is a real danger that children and adolescents are falling through the gaps and that the current data collection is not able to accurately capture the situation. We therefore need to see a step change in how the Scottish Government collects its data so that the statistics reflect the experience on the ground and are not just a contrived mathematical construct that allows ministers to say, "Job well done," and ignore the unacceptable reality that is faced by our constituents and is reflected in our casework.

We know that the Government is failing adolescents and children across Scotland. We see that in our inboxes. In Glasgow, we have seen waiting times increase, vital services such as the Notre Dame Centre for children being shut, and more and more responsibilities being placed on the shoulders of teachers and school counsellors to fill the gaps that have been left by funding shortfalls and by a more general deprioritisation of mental health, which we have seen through the cuts to the integration joint boards and health and social care partnerships. That is simply not good enough, and it is not good enough for ministers to shirk responsibility for the consequences of these funding cuts and place it a local authority level.

It is right that the Parliament recognises the mental health crisis that is presided over by the Government and calls for urgent action by that Government to take place quickly. We are happy

to support the motion, and I hope that all members will join Labour in supporting our amendment to call for better data collection for those who are removed from CAMHS waiting lists.

I move amendment S6M-17670.1, to insert at end:

“, and calls on the Scottish Government to publish data on the number of patients with neurodevelopmental conditions who are being removed from CAMHS waiting lists.”

16:20

**Ariane Burgess (Highlands and Islands) (Green):** I, too, thank the Liberal Democrats for bringing forward this important debate, and I express my gratitude to staff across health, education and the third sector who work with dedication to support people with neurodevelopmental conditions. There is little doubt that, across Scotland, there is a fundamental gap in how we identify, assess and support those with neurodevelopmental conditions, particularly autism and ADHD, which is causing real harm. Constituents have contacted me and my colleagues, seeking support and direction. We have heard from Alex Cole-Hamilton that that is the case for him, too.

There is a lot to cover in this debate and, although I will try not to repeat what others have said, I wish to highlight a few key points that are essential. Demand for assessments is rising, and existing systems are unable to cope. The result is years-long waits for diagnosis. Without a diagnosis, many cannot access the basic support that they need to participate fully and confidently in education, work and community life. Long waits and unclear pathways are standing in the way of effective treatment. That is particularly true for ADHD, for which treatment can be highly effective and truly transformative.

I hope that this debate can serve as the starting point for a constructive conversation about what needs to change. We need clear action and strong commitments from the Scottish Government to begin fixing a system that is currently failing too many people. I welcome the call for the Government to convene a cross-party summit that would focus on reducing waits for neurodevelopmental support and increasing mental health capacity. That is an important first step in initiating the conversation. I hope that the minister will commit to ensuring that people with lived experience are not only heard but play a central role in shaping solutions and decisions going forward.

Another critical issue is the lack of accurate data. We do not know how many people are waiting for assessment or how long they have to

wait. Without transformation in that area, we cannot accurately measure progress.

Significant action can and should be taken to address those issues. The Royal College of Psychiatrists in Scotland calls for strong national leadership and a clear focus on delivering support across four key levels of care. It has devised a model with practical solutions to many of the immediate and medium-term challenges, and it is clear that that must be paired with a long-term strategy.

We need to move away from a single-condition model. Many people experience multiple overlapping challenges. For example, a person with autism may have not just autism but several other conditions. We need integrated neurodevelopmental pathways in all 14 health board areas and to replace siloed systems with co-ordinated whole-person approaches. The national autism implementation team's "Adult Neurodevelopmental Pathways" report makes that clear. It calls for consistent national standards, early access to support and proper accountability.

We need to stop treating neurodevelopmental support as an optional extra. National leadership is essential, as is long-term investment. Third sector organisations have long echoed that. Promising work is under way. The proposals for new care models and the inclusion of neurodevelopmental conditions in the mental health and wellbeing strategy are all steps forward.

The NAIT report gives us a direction, but efforts should be stepped up. So far, the pace has been too slow. Community-based models show promise but, at present, many people still access GPs or secondary care referrals. Monitoring and on-going support in the community are patchy and inconsistent.

This is the moment to be ambitious. The Scottish Government needs to expand and create adult neurodevelopmental pathways and stepped care models. They have been recommended by the NAIT and by the Royal College of Psychiatrists in the 2021 "National clinical ADHD Pathway Feasibility Study". That has to be backed by leadership, funding and accountability. We must start the conversation to build a system that works for everyone, and we must back it up with urgent action.

**The Deputy Presiding Officer:** We now move to the open debate.

16:25

**Willie Rennie (North East Fife) (LD):** It was once the case that middle-aged working men were placed on incapacity benefits. They were from post-industrial communities and they were stuck

on incapacity benefits for years. That had a detrimental effect on their lives, on the economy and on the country's tax base.

The situation has changed. Younger people with mental health conditions and neurodevelopmental conditions such as ADHD and autism are stuck on benefits and support at a very young age. We are losing them not just at middle age through to their retirement but at a young stage in life. That is bad for them, because they are stuck on those benefits for their whole life. It is not good for their health, it is not good for the economy and it is not good for the country's tax base.

We see that in the figures. The 16 to 64-year-old inactivity rate in Scotland is at 24 per cent. The level is 21.7 per cent in England, which is bad enough. That sits with the demographic challenge of our ageing population, who are not ageing well—they are ageing with long-term conditions, which places a significant pressure on public services, and those who are retiring early add to economic inactivity. That pincer movement is having a dramatic impact on our economy and on our tax base. In other words, it is just not sustainable—and that is without mentioning the impact on individuals who are struggling with their conditions for years on end.

I attended the St Andrews ADHD support group earlier this year. There were bright, intelligent people there—people who were full of ideas and really engaged, but who were struggling to get the support that they needed. One parent told me about their son, who was diagnosed with ADHD at school, where he got the right support and was stabilised. When he left school, he came off the medication, went off the rails and got into trouble—he had difficulties with the police and the justice system. They tried to get him back on, but three years later, they are still waiting.

All that time, he has been unable to work or to contribute—a bright young lad who could make a huge contribution to the country, and who could take the burden off the state. It is a crying shame that he is not just one; he is one of many. That is why we need to provide solutions.

The Royal College of Psychiatrists' stepped care approach, with the four-tier national programme that has been talked about today, is of course the right route. People do not have to just take a medicalised route; some can perhaps get benefit from alternative methods of support. Waiting for years for even that is unacceptable, however, and that is why the pathway needs to be implemented with urgency.

Children 1st says that the medicalised route is not necessarily the appropriate way for young people and suggests that whole-family support is an alternative that can work. We need to get

things co-ordinated fast, because the crisis has bedevilled the country.

I want to provide one further challenge to the NHS as a whole. If we are to deal with the economic inactivity levels, we will have to place the right priority and the right funds in the right places. If we do not tackle the issue of economic inactivity, we will not have the tax that is necessary to pay for our NHS services. My appeal to the Cabinet Secretary for Health and Social Care is that he considers the overall allocation of resources and recognises that huge challenge.

16:30

**Elena Whitham (Carrick, Cumnock and Doon Valley) (SNP):** It is clear that we are facing significant challenges in how we support individuals with neurodevelopmental conditions in Scotland—challenges that demand not only honest recognition, but bold and compassionate action.

We are all acutely aware of the profound pressures on our mental health services. Those pressures were hugely intensified by the Covid-19 pandemic. Many individuals, such as my own loved one, became unable to mask their neurodiversities when the world went back to normal, and their whole lives were impacted. Believe me—total burnout and withdrawal from life for more than a year is horrendous.

Demand has risen sharply, not just for CAHMS but for adult services as well. More people are seeking answers, assessments and support for neurodevelopmental conditions such as autism and ADHD, and they are not wrong to expect timely, effective care. We as a Parliament cannot shy away from the fact that there are far too many people being left to wait, too many families struggling to keep their heads above water and too many GPs and educational settings bearing an unsustainable burden.

I fully recognise the distress that is caused by the current situation. I have heard from many constituents about the subject. I have heard from parents who are battling for a diagnosis and from adults who are coming to terms with a new understanding of themselves but who face years-long waiting lists for assessment and treatment—or, indeed, who have no way to get on to those waiting lists because they are closed to patients unless there is a demonstrable, co-occurring, severe and enduring mental health condition.

One of my constituents has lodged a petition with the Parliament, entitled “Improve access to ADHD diagnosis and treatment across Scotland”. Our constituents should not have to lodge petitions to get access to healthcare.

Despite my own child’s four-year wait for assessment, I consider my family to be lucky—unlike the family who came to see me in my office last Friday. They have a child who is experiencing acute mental distress, but despite being told that their child is most likely autistic, they have no way to seek assessment as their GP’s multiple referrals are being knocked back. They are pushed between services: the school is trying to support through decreasing attendance and a GP is recognising the mental distress that is being experienced, but a system that rejects all the evidence is saying that it is all down to their suspected, but as yet undiagnosed, neurodivergence. That is not acceptable. We cannot have a system that sees people’s mental health spiral down due to unmet neurodevelopmental needs, nor a system that requires such deterioration in order to access the pathway.

The Scottish Government has committed to delivering the national neurodevelopmental specification and we are all avidly watching to see its manifestation. The specification is vitally important because it aims to ensure that children and young people can access timely, co-ordinated support regardless of whether they have a formal diagnosis. I know that that is supposed to be what is happening now—it is a fundamental shift, from waiting to identify need to responding to it early and holistically.

We must also ensure that services in local areas are resourced, supported and trained to undertake that work. That is what was supposed to happen for my own family, but there was no support on the ground. It is one thing to say that no diagnosis is needed and another thing to have services responding to the real and urgent need that all our inboxes tell us is there and that requires it.

We cannot overlook the reality of the workforce pressures, the structural complexity of services or the trauma that delays can cause. We also cannot pretend that private diagnosis is a viable option for most families—and, when it is used, we need a transparent, clinically safe, shared care framework that allows for collaboration with NHS professionals, not the blanket refusals that we are all hearing about.

We cannot shy away from the scale of the challenge. I acknowledge that progress is being made in the background but it is yet to be felt on the ground by my constituents. Let us work together across the chamber with a cross-party summit being convened to ensure that every Scot—whether diagnosed or undiagnosed, child or adult—gets the support that they need to thrive.

16:34

**Annie Wells (Glasgow) (Con):** I am pleased to take part in this important debate and I thank Alex Cole-Hamilton and the Liberal Democrats for bringing it to the chamber.

This is not the first time that we have debated the mental health emergency in Scotland and I, for one, do not believe that it will be the last time. It is hard to think of a topic that has been discussed so widely in Holyrood and yet on which so little progress has been made. On many fronts, Scotland's mental health crisis appears only to be getting worse. It is getting worse for the kids in school, for their teachers and parents, and for adults who are battling a range of problems for which treatment seems virtually impossible to access.

Most political parties have agreed, at one point or another, that mental health should have parity of esteem with physical health within Government and the NHS. However, no one working in the system, or who has had to navigate their way through it from outside, really believes that that has ever happened. Today's debate focuses on a number of areas relating to neurodevelopmental conditions and the provision—or lack thereof—to help people cope with them.

Those shortages affect people of all ages, but their impact on children is causing the most distress across society. Services are so chaotic and disjointed, and the waiting times so unbearably long, that many young people will not even be children any more by the time that the NHS gets round to seeing them. That is not a reflection on the dedicated and hard-working staff, many of whom constantly go the extra mile just to keep their services above water. It is, however, very much a reflection on the Scottish Government, which has underfunded and undervalued mental health care for nearly 20 years of its being in power.

Since 2007, mental health has been under the sole control of the SNP Government. It is entirely devolved, and the Scottish Government has no one to blame but itself for the current state of affairs. Education is also devolved, and the Scottish Government's desire to mainstream as many children as possible is visibly backfiring. We have heard countless reports—shared in the chamber and beyond—of how so many young people are being forced into environments to which they are clearly unsuited. It ruins their learning and development, and it jeopardises the experience and education of those around them.

Only last year, I had a Glasgow family in my office in tears because they could not access special school provision for their child who has severe autism. They were terrified about what life

would look like for him in a mainstream school, but because of Government and local government policy, they had no choice but to go with it. The statistics bear that out, too. Hundreds of special schools across the country have been lost since 2007, and with them have gone hundreds more specialist, experienced and skilled teachers. Kids are waiting years for testing in relation to autism and ADHD. Professional psychiatry bodies have said that, by failing to help those young people now, we are merely storing up even more problems for the future.

There are things that the Government could do now to help. It could increase mental health spending to 10 per cent of the front-line NHS budget; it could ensure that there is sufficient capacity in education for pupils with complex needs; and it could better support teachers to identify and help pupils with conditions such as ADHD and autism. Those measures would make a real difference to those suffering on the ground. If mental health and physical health are, indeed, to have parity of esteem, those commitments would be a good place to start.

16:38

**Claire Baker (Mid Scotland and Fife) (Lab):** The motion sets out clearly the lack of provision for neurodevelopmental conditions and the impact that that is having. The significant waiting times for diagnosis and support are leaving far too many without the support that they need. The 2021 report by the national autism implementation team was clear on the need for neurodevelopmental pathways and stepped care, but the lack of delivery alongside the growing demand is putting huge pressures on our mental health services.

In my region, NHS Fife has publicly recognised the impact that demand for neurodevelopmental services is having on mental health teams. Fife was one of the pathfinder sites that were identified for adult neurodevelopmental pathways following the 2021 feasibility study. An audit that was undertaken in 2023-24 showed that there was significant unmet need and high demand for adult neurodevelopmental services. Like all boards, NHS Fife is in dire need of additional resources and solutions from the Scottish Government. However, within existing resources, it is starting to pilot some approaches.

A digital neurodevelopmental hub has been created alongside self-help platforms such as moodcafe.co.uk, which is designed to give families and individuals better access to guidance, screening tools and signposting to support. NHS Fife is also trialling group-based interventions such as I CAN, which is delivered by psychology teams, and SPARKS, which was developed by occupational therapists. Those initiatives are

aimed at helping people to build resilience and coping strategies while waiting for formal assessment or treatment, but although they are pragmatic and forward-thinking interventions, they are not a replacement for properly resourced and delivered care models and pathways.

We know that, where statutory services struggle to meet demand, the voluntary and community sector steps up. In Mid Scotland and Fife, there are great organisations that are working hard to provide support. In Glenrothes, Autism Rocks (Fife) has been a lifeline for many families. Run by parents for parents, it offers advice, peer support, playgroups and events for children and young people. For many local families, it is the first port of call when diagnosis is delayed or support is absent. In Lochgelly, Hyperclub provides a safe, inclusive place for children and young people with additional needs, many of whom are neurodivergent.

As well as offering respite to parents, those clubs offer a sense of belonging and understanding that formal systems often fail to provide. Although the support that such groups are able to offer is invaluable, it should be delivered alongside NHS services. The Scottish Government must act with the urgency that is required to ensure that support is available, without extensive waits, and in all communities.

The Scottish Government promised to allocate 10 per cent of NHS spending to mental health and 1 per cent to CAMHS, but it has not yet met either target. It promised to recruit people into additional roles to support community health resilience. It promised a learning disability, autism and neurodiversity bill to give voice and rights to people who are too often overlooked. It promised action on CAMHS waiting times. Instead, it has been quietly removing patients with neurodevelopmental diagnoses from those waiting lists altogether—skewing the data to mask the truth. If we are to make progress, it is essential that we have transparency on those figures.

The economic impact of undiagnosed neurodevelopmental conditions often makes a compelling argument. The Mental Health Foundation has estimated the lifetime cost of untreated ADHD to be more than £100,000 per person. The wider cost to the economy runs into the billions when we factor in lost productivity, increased health service use and social impacts.

However, at the core of the debate is the human impact. We know that, if they do not have the proper support in place, people with neurodevelopmental conditions can experience significant mental and physical health inequalities. They are more likely to experience depression and anxiety, more likely to struggle with employment and more likely to come into contact with the

justice system or to have substance misuse issues. The right diagnosis and the right support can transform lives. That support can unlock talent and allow people to thrive, rather than simply manage their symptoms. That is what we all have to deliver.

**The Deputy Presiding Officer:** The final speaker in the open debate will be Christine Grahame, who has up to four minutes.

16:42

**Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP):** I, too, welcome the debate and recognise the commitment of the Liberal Democrats to the subject. Diagnosis and referral for adults or children who are suspected of having, for example, ADHD have become more of an issue post-Covid. I have a number of cases in my inbox relating to the situation that has resulted from the different protocols that are in place in different NHS board areas.

In this short debate, I intend to focus on early intervention pre-school and in early years. The preceding debate focused on education, as I will do, but I hope to keep within the scope of the motion and the amendments, because I do not think that coping with neurodevelopmental issues and supporting people with such issues and, indeed, their families is isolated to health.

I have brief comments on the Government's amendment. We surely all agree that there is unmet need, that there has been a sharp rise in demand following Covid, that there are difficulties with the supply of medication and that there is concern about the widespread removal of shared care arrangements, although I worry that some parents can afford to obtain a private diagnosis for their child and others cannot. As I indicated, I have cases in which parents have been told that they cannot even—

**Alex Cole-Hamilton:** Will Christine Grahame give way?

**Christine Grahame:** I will, if the Deputy Presiding Officer will give me a little bit of time back.

**The Deputy Presiding Officer:** Be very brief, Mr Cole-Hamilton.

**Alex Cole-Hamilton:** I understand what Christine Grahame says about people going private, but does she recognise that, if even a small proportion of those who are on waiting lists went private for a diagnosis, that would relieve pressure on those lists, which are already stretched?

**Christine Grahame:** I always find it unfortunate when money is able to put people nearer the front of the queue. I do not say that to in any way insult the people who do that—it is just a problem for me.

That said—this is not an alternative—ADHD and other neurodevelopmental conditions can be suspected and even identified without a diagnosis, and the support that a toddler or child requires might not include medication. That is not to dismiss medication and diagnosis, because they matter, but there might be appropriate temporary or permanent options. For example, early intervention at school or nursery might be preferable as a first step. That will also support other children, as it will avoid all the other children having to be decanted into the playground almost daily when one child disrupts a class or a nursery.

I say that in the context of recent constituency cases. I had a fruitful and focused conversation with the director of education, the principal educational psychologist and the chief education officer from Scottish Borders Council. The upshot is that, in three primary schools, tailored support has been provided to individual children under what the education team describes as a 12-week process. That appears to work in the interests of the class and of the individual child, and the situation of classes having been disrupted appears to be improving. I cannot say whether medication is involved for those individual children, but those interventions, with support, are certainly working. Diagnosis and medication matter, but other steps can be taken in place of or in addition to diagnosis and medication.

I stress that my submission about other interventions is not to sidestep, dismiss or minimise diagnosis and medication but simply to illustrate that those may be—I stress the words “may be”—unnecessary in whole or in part.

**The Deputy Presiding Officer:** We move to the winding-up speeches.

16:46

**Ariane Burgess:** The debate has certainly brought to light our urgent need to strengthen the way in which we support people with neurodevelopmental conditions across Scotland. I thank colleagues for their thoughtful contributions. It is good to see widespread recognition of the challenge, its scale and the opportunity that we have to improve provision.

Willie Rennie pointed out that a medicalised route is not necessarily needed for everyone, and nor is it best in some cases. We just heard from Christine Grahame about the need for early intervention at school or nursery, whereby, if we provide appropriate and tailored support, we may

not need medical interventions. Elena Whitham and others raised the challenge of constituents’ families being pushed around the system, having had an indication from a GP of a potential diagnosis but being unable to get one, as well as the need to ensure that local areas are properly resourced. Willie Rennie and Annie Wells spoke about young people having to wait for so long that they will no longer be children. Claire Baker spoke about the third sector community groups in her constituency that offer incredible support to families but said that such support should be delivered through the NHS.

There are key actions. There is no doubt that the current system is under serious strain. Families and individuals are waiting for far too long for assessment, treatment and support. Rightly, the motion

“calls on the Scottish Government to work urgently with NHS boards and local authorities”

to improve

“shared care arrangements”.

The recommendations from the NAIT and the Royal College of Psychiatrists are clear: we need dedicated adult neurodevelopmental pathways and stepped care models. The on-going scoping work on demand and capacity and the use of local neurodevelopmental data are essential, but data collection must not delay decisive action. We cannot afford to wait while individuals and families remain in limbo.

I express sincere thanks to NHS staff, local authority teams and third sector organisations that continue to provide vital neurodevelopmental and mental health services. They fulfil their roles often under immense pressure. I hope that the debate can be the beginning of a focused and sustained effort to listen to those with lived experience, learn from evidence and urgently deliver the real change that is needed.

16:48

**Carol Mochan (South Scotland) (Lab):** I thank the Liberal Democrats for bringing the debate to the chamber. I agree with Ariane Burgess that it has allowed us to have a good look at an important matter. It was good to hear the minister acknowledge that things need to improve—that was very helpful. Elena Whitham’s call for cross-party focus was also helpful.

However, reflecting on what we have heard today, it is clear that the current provision for neurodevelopmental conditions does not match rising need and demand. Those in the system and their families feel that they are being let down, and they are. My colleague Paul Sweeney laid that out well in his speech, and Willie Rennie’s contribution

brought out some strong points that we perhaps do not always consider.

We heard from Dr Gulhane and others that many are waiting months, and sometimes years, for treatment, and we are yet to see a dedicated pathway for diagnosis.

The Government promised to improve access and reduce waiting times for CAMHS, but we see in our inboxes that some children and young people are still waiting years for treatment. We know that delays threaten the effectiveness of treatment—Ariane Burgess and others mentioned that—and we need to help people to make a change in their life.

Mental health services face unprecedented pressure. All members have spoken about that, and we accept it, but NHS spending on mental health services falls short of the Government's 10 per cent commitment, as a number of members mentioned. Perhaps the minister will speak about that in her closing speech.

That failure falls against a backdrop of increased reporting of mental health conditions, which links very well to the Labour amendment. We need to understand the figures and what is happening, and I hope that the Government recognises that.

The removal of patients from CAMHS waiting lists means that people who have been waiting for years now have to wait even longer. That has been brought up with me on many occasions. Families, parents and the people who are waiting do not understand what has happened, and we in this chamber all have a responsibility—although the Government is ultimately responsible, of course—to understand the long-term pattern of what is happening. That is why Scottish Labour seeks to strengthen whatever is agreed to today, by saying that the Government should get that data into the public domain, so that we can understand the number of patients with neurodevelopmental conditions and how that relates to CAMHS waiting lists.

In his opening speech, Alex Cole-Hamilton raised the failure of the shared care system and the work that needs to be done with GPs on that. We all agree that patients and their families who cannot afford to go private are doing so because they feel that it is so important for their loved ones to get treatment. That is another hurdle that people face, so we need to get on top of that issue.

We all agree that the workforce is absolutely crucial. We need to see what is needed in the workstreams. My colleague Claire Baker mentioned the disappointment around the proposed learning disabilities, autism and neurodivergence bill. That has also been

mentioned to me. Something needs to be done for parents and families who are heartbroken by what has happened to that promise.

In fairness, for too long the SNP has been asleep at the wheel on the mental health crisis. We need investment in mental health services, more mental health workers and improvements to CAMHS. Patients, parents and clinicians deserve better than what the Government is currently delivering. That is why Scottish Labour supports the motion, which I hope that our amendment will strengthen.

**The Presiding Officer (Alison Johnstone):** I call Stephen Kerr.

16:53

**Stephen Kerr (Central Scotland) (Con):** It is nice to see you back in the chair, Presiding Officer. We have had a good debate. The frustrating thing about it is that we all seem to be agreeing with one another. I know that that can happen in a Scottish Parliament debate, but everyone is also expressing frustration about what is not happening and what should happen.

I thank the Liberal Democrats for this debate, and the previous one. It is a terrible shame that the Government cannot use the hours of its debating time to allow such subjects to be properly addressed in a full-scale debate. The Government runs away from these issues.

I have to say from the off that, although Alex Cole-Hamilton gave a brilliant summary of the problems, I felt that Marie Todd's contribution was too self-congratulatory. There was not enough self-awareness or a realisation that the SNP is the Government—it has been sitting where it sits for 18 years and we are still talking about a problem that is worsening rather than improving.

When Sandesh Gulhane talked about there being a postcode lottery, he combined that with anecdotal evidence from his experience as a GP in dealing with some of the emotional issues that arise in his surgery as families express their frustration about the lack of care that they are getting.

I come back to the point that Paul Sweeney made so well in a simple phrase. Ministers, he said, are “washing their hands” of the issue. All too often, Scottish ministers wash their hands of issues for which they have full accountability—to this chamber and to the people of Scotland.

Willie Rennie gave an excellent speech about the human cost of the lack of action in this area. He also specifically highlighted the economic cost, and the statistic that he shared about economic inactivity among 16 to 64-year-olds ought to make us all stop and think very deeply about what our



priorities are in this Parliament and what the Scottish Government's priorities ought to be to get this country working.

When Willie Rennie told the story about his visit to the ADHD support group in St Andrews, he said that the situation of the young man whose story he shared was "a crying shame". I would use a stronger phrase: I think that it is a scandal. It is a scandal that, even though we live in one of the richest countries in the world, we cannot give that sort of support to people who need help. That is beyond a crying shame; it is a scandal.

It is hard to disagree with Elena Whitham. She said—I hope that I am not misquoting her; I am sure that she will correct me if I am—that we "cannot shy away" from the fact that too many people are being let down, and that people

"should not have to lodge petitions to get access to healthcare."

I think that that says it all.

If this debate does anything, it should serve to call us to action—not just to share words and sentiments and sympathy but to see that something is done to change the situation.

**Christine Grahame:** Do you accept the point that I made in my speech that we should not park medication or assessments until a diagnosis is secured but consider interventions and alternatives early on in the educational process, from the very start, at nursery?

**The Presiding Officer:** Always speak through the chair.

**Stephen Kerr:** Of course I agree with Christine Grahame on that subject. All practical means should be used to alleviate the suffering and confusion that people feel when they have conditions that they do not understand and their own self-awareness is challenged. What Christine Grahame said in that regard is right. She also said, in concluding her remarks, that her suggestion was not an attempt on her part to sidestep the importance of a diagnosis, and I would like to conclude on the issue of diagnosis.

Before I do that, however, I note that Claire Baker was absolutely right in what she said about the Government playing about with the waiting lists, changing definitions and moving blocks of people to different lists. That is a disgrace, and the Government has engaged in that for years in order to get the answer that it wants from statistics. That is not acceptable.

On the issue of diagnosis, the minister failed to acknowledge that, for adults in particular, the inability to obtain a diagnosis has disqualified them from some of the support that they need, particularly, as Willie Rennie said, in relation to

employment. A diagnosis is not a luxury or an added extra; it is the key that often unlocks the support that people need, particularly when it comes to their employment.

I realise that I am out of time, but I thank the Liberal Democrats for bringing the subject to the chamber. I hope that the cabinet secretary will meet the Minister for Parliamentary Business and ask for a proper debate in the Government's debating time, so that we can properly air the issue and come together as a Parliament to ensure that something changes for people who ought not to have any further delay in their diagnosis and treatment.

16:58

**Maree Todd:** I again thank the Liberal Democrats for bringing the issue to the chamber, and I thank all members for their speeches.

I reiterate the importance that the Scottish Government places on providing high-quality services and support for neurodivergent people and for mental health, and I state my unwavering commitment to improvement.

I acknowledge the significant growth in demand for neurodevelopmental services. I have already set out that we have taken a number of steps to address that, and we are committed to continuing to take action, including implementing the recommendations from the adult neurodevelopmental pathways pilots and the children and young people's neurodevelopmental specification review; commissioning NHS Education for Scotland and NAIT to provide professional learning about neurodevelopmental conditions; and investing £1 million a year to provide support to autistic adults. We continue to engage with the Royal College of General Practitioners Scotland on the shared care agreements—

**Ariane Burgess:** Will the minister take an intervention on that point?

**Maree Todd:** Yes—I will just finish the point.

As I said, we are already engaging with the Royal College of General Practitioners Scotland on the shared care agreements, and we are keen to unlock the barriers to entering those.

**Ariane Burgess:** I would love to hear from the minister whether her Government remains committed to the allocation of 10 per cent of NHS spending to mental health services and 1 per cent specifically to CAMHS by the end of the current parliamentary session. In addition, given the constructive nature of today's debate, it would be good to get a sense of the timeline for the cross-party summit that is mentioned in the Government's amendment.

**Maree Todd:** Absolutely—we are still committed to those 10 per cent and 1 per cent targets. Annie Wells was completely correct in making the point that those targets for funding are intended to achieve parity of esteem between physical and mental health, and we are making good progress on that. The latest available figures, from 2023-24, show that we are at 9.03 per cent and 0.82 per cent, respectively.

I acknowledge that there is a great deal more work to be done to ensure that neurodivergent people are able to access the support that they need. We are all working hard to adapt to meet a new set of challenges.

**Stephen Kerr:** Will the minister give way on that point?

**Maree Todd:** If Stephen Kerr will give me one moment; I have not finished responding to Ms Burgess.

The Scottish Government cannot deliver that change alone, and it is not the responsibility only of Government—it requires collaboration with a range of partners working together. To that end, I am absolutely content to commit to convening a cross-party summit on neurodevelopmental support needs. That summit will enable us to dedicate more time to this important topic and to work together on a shared vision for the way forward. That probably responds to the point that Mr Kerr was going to make, as well.

The change that we want to see will not happen overnight, but I hope that members acknowledge that progress has been made and that there is work under way, and note the Government's commitment to delivering further improvements in the future.

On the issue of removing from CAMHS waiting lists those children and young people who are seeking an ND diagnosis, I state categorically to the Parliament that that is not the case. As I have said many times in the chamber, the overriding focus is to ensure that the right help and support is available for our young people and, for many, that is best provided through an ND pathway and not through CAMHS. However, I am happy to support the Labour Party amendment to improve data collection and publication in that area.

Ariane Burgess mentioned the need to include lived experience, and I am absolutely keen to do that. I agree with Willie Rennie on the opportunity cost that can come if people do not get the right support in the right place at the right time. That is why we are working so hard to improve the situation.

Elena Whitham spoke powerfully—again, I am in awe of her ability to talk in the chamber about her personal experience and to use that to

strengthen her work as a constituency MSP. I agree that there is an urgent need all over the country to improve things where services are not integrated, and I recognise that many people cannot yet feel the difference on the ground.

However, I know—although it is of no comfort to those who are waiting—that there are some pockets where things are working well. Claire Baker mentioned initiatives in Fife. In addition, I recently visited North Lanarkshire and heard powerful testimony from a mum who said clearly, “My child does not have a diagnosis yet, but I’m getting all the support that we need”. I assure Claire Baker that we are working on the LDAN bill, and we will bring forward draft provisions shortly.

I am very grateful that we have had time in the chamber today to debate this issue. I am grateful for the commitment that colleagues have shown, and I look forward to working together to make much-needed progress.

**The Presiding Officer:** I call Jamie Greene to wind up the debate.

17:04

**Jamie Greene (West Scotland) (LD):** Thank you, Presiding Officer, and welcome back to your place.

I thank all members who have contributed to the debate. I hope that it has been quite a sobering experience for those on the SNP front benches, because a number of truths have come across, on which I think that all the Opposition parties, at the very least, and some members of the governing party agree.

There is some agreement on the following. There are extremely—and overly—long waits for diagnosis, and there are gaps in adult services. There is a retreat from shared care agreements—those agreements, from which people previously benefited, no longer exist. That has left families stranded and, in some cases, out of pocket, and that is not acceptable. The human cost of the incredibly long diagnosis waits and backlogs is also unacceptable. The reality is that what neurodivergent people in Scotland are facing is not just a challenge; it is unjust, and—as one member put it—it is scandalous. I hope that, as a starting point, we can all agree on that.

Right now, thousands of children across Scotland are simply waiting for an initial autism or ADHD assessment. Let us look at some of the numbers. In NHS Lothian, the waiting list currently sits at more than 6,000 young people; in NHS Greater Glasgow and Clyde, it is more than 7,500 young people; and, in NHS Lanarkshire, the number is more than 8,500 people. In those three areas alone, 22,000 young people are sitting on a

waiting list right now—a waiting list not of weeks or months, but of years. They are waiting for two years, three years and, in some cases, seven years. How is that acceptable in modern-day Scotland?

Who picks up the pieces? GPs do. They are managing complex cases without the time or support that they need to come up with solutions. Teachers are picking up the pieces in our classrooms without adequate time, training or support. Families are picking up the pieces because they are navigating a fragmented, broken system that too often confuses, delays or even denies them help.

The backlog is not temporary.

**Elena Whitham:** Will the member give way?

**Jamie Greene:** I will make some progress first, and then I will.

The backlog did not happen overnight; it is a long-term failure to plan to meet demand, which has been growing for almost a decade. In the years from 2019 to 2021, demand for ADHD assessments increased by 500 to 600 per cent. That happened six years ago—the Government has known that demand will increase, but capacity has not kept up.

The SNP made some very explicit and specific promises. The Cabinet Secretary for Health and Social Care is shaking his head, but here are some specifics of what his Government promised to voters when it got into power in 2021. It said:

“10% of our ... NHS budget will be allocated to mental health.”

Is that happening? Nobody else seems to believe that it is.

**Neil Gray:** Will the member give way?

**Jamie Greene:** I am happy to give way if the cabinet secretary can enlighten us on that point.

**Neil Gray:** I am happy to confirm that our commitment remains to bring forward the 10 per cent and 1 per cent pledges in the lifetime of the Parliament, as we committed in our manifesto.

**Jamie Greene:** The answer speaks for itself: the Government is “committed” to it. We are nine or 10 months out from an election, but that commitment was made nearly five years ago. Tens of thousands of people are sitting on a waiting list because it has not happened. The Government can wish it to happen, but making it happen is another thing.

The other commitment that was made was for 1 per cent of the NHS budget to be spent on CAMHS, which has clearly not happened. We could pop up and down all day to confirm where

we are with each of the commitments, but the reality is that none of them is being met.

Here is another one: the promise to develop a national neurodevelopmental pathway. A feasibility study was done four years ago, but the pathway has still not happened. What about the shared care arrangements that we have heard so much about today? Where have families been left with those? They have been left with a system that they can access only if they have the ability to pay for it. We have a two-tier diagnosis system for neurodivergence in this country, just as we probably have for dental care, audiology and many other front-line NHS services.

Is that where we are? Is that what the SNP went to Scotland with in 2021? I think not. The problem is that those are not just broken promises, political ones or otherwise; they are impacting people's lives.

Paul Sweeney talked about GIRFEC. If we want to get it right for every child, we have to bring down those waiting times. We are getting it very wrong for very many children—that is where GIRFEC is at the moment. As Willie Rennie eloquently pointed out, we face not only a health emergency but an economic emergency due to the inactivity in our working-age population. If one in 10 people is deemed to be neurodivergent, why on earth would we not want to get many of those people back into the workplace? What do we need to do to support employers and businesses that want to help those people into the workplace?

Here are some startling statistics. Twenty-nine per cent of autistic people in Scotland are in employment. For those with learning disabilities, the figure drops to 4 per cent of autistic people. By comparison, 82 per cent of non-disabled people are in employment. To be clear, neurodivergence is an asset in the workplace, because neurodivergent people can be more diverse and productive. It is about time that the Government and business saw that.

What needs to change? We need to reinstate those shared care protocols; we need to look at the stepped care and four-tier pathways that others have suggested; we need an employment strategy that includes neurodivergent people; and we need to close the mental health funding gap. Why? Because neurodivergent people in Scotland are not asking for special treatment—they are asking for fairness, timely diagnosis, care and a chance to thrive. We cannot afford to leave neurodivergent people behind in our economy, physically or mentally.

I hope that today's debate is a turning point for ministers, so that neurodevelopmental services are no longer optional extras but essential to a

healthier, more inclusive and more ambitious Scotland.

## Business Motions

17:10

**The Presiding Officer (Alison Johnstone):**

The next item of business is consideration of business motion S6M-17701, in the name of Jamie Hepburn, on behalf of the Parliamentary Bureau, setting out a business programme.

*Motion moved,*

That the Parliament agrees—

(a) the following programme of business—

Tuesday 3 June 2025

2.00 pm Time for Reflection

*followed by* Parliamentary Bureau Motions

*followed by* Topical Questions (if selected)

*followed by* Ministerial Statement: A Just Transition for Aberdeen and the North East

*followed by* Citizen Participation and Public Petitions Committee Debate: A Blueprint for Participation - Embedding Deliberative Democracy in the Work of the Scottish Parliament

*followed by* Committee Announcements

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

*followed by* Members' Business

Wednesday 4 June 2025

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions: Constitution, External Affairs and Culture, and Parliamentary Business; Justice and Home Affairs; Education and Skills

*followed by* Scottish Government Debate: Empowering Entrepreneurs and Innovators

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

*followed by* Approval of SSIs (if required)

5.00 pm Decision Time

*followed by* Members' Business

Thursday 5 June 2025

11.40 am Parliamentary Bureau Motions

11.40 am General Questions

12.00 pm First Minister's Questions

*followed by* Parliamentary Bureau Motions

12.45 pm Decision Time

*followed by* Members' Business

Tuesday 10 June 2025

*Motion agreed to.*

2.00 pm Time for Reflection  
*followed by* Parliamentary Bureau Motions  
*followed by* Topical Questions (if selected)  
*followed by* Stage 3 Proceedings: Care Reform (Scotland) Bill  
*followed by* Committee Announcements  
*followed by* Business Motions  
*followed by* Parliamentary Bureau Motions  
 7.00 pm Decision Time  
*followed by* Members' Business

Wednesday 11 June 2025

2.00 pm Parliamentary Bureau Motions  
 2.00 pm Portfolio Questions:  
 Deputy First Minister Responsibilities,  
 Economy and Gaelic;  
 Finance and Local Government  
*followed by* Scottish Labour Party Business  
*followed by* Business Motions  
*followed by* Parliamentary Bureau Motions  
*followed by* Approval of SSIs (if required)  
 5.10 pm Decision Time  
*followed by* Members' Business

Thursday 12 June 2025

11.40 am Parliamentary Bureau Motions  
 11.40 am General Questions  
 12.00 pm First Minister's Questions  
*followed by* Members' Business  
 2.30 pm Parliamentary Bureau Motions  
 2.30 pm Portfolio Questions:  
 Net Zero and Energy, and Transport  
*followed by* Scottish Government Business  
*followed by* Business Motions  
*followed by* Parliamentary Bureau Motions  
 5.00 pm Decision Time

(b) that, for the purposes of Portfolio Questions in the week beginning 2 June 2025, in rule 13.7.3, after the word "except" the words "to the extent to which the Presiding Officer considers that the questions are on the same or similar subject matter or" are inserted.—[*Jamie Hepburn*]

*Motion agreed to.*

**The Presiding Officer:** The next item of business is consideration of business motion S6M-17702, in the name of Jamie Hepburn, on behalf of the Parliamentary Bureau, on extension of a stage 2 timetable.

*Motion moved,*

That the Parliament agrees that consideration of the Housing (Scotland) Bill at stage 2 be extended to 6 June 2025.

## Parliamentary Bureau Motions

17:11

**The Presiding Officer (Alison Johnstone):** The next item of business is consideration of three Parliamentary Bureau motions. I ask Jamie Hepburn, on behalf of the Parliamentary Bureau, to move motions S6M-17703, S6M-17704 and S6M-17705, on designation of lead committees.

*Motions moved,*

That the Parliament agrees that the Criminal Justice Committee be designated as the lead committee in consideration of the Prostitution (Offences and Support) (Scotland) Bill at stage 1.

That the Parliament agrees that the Constitution, Europe, External Affairs and Culture Committee be designated as the lead committee in consideration of the Desecration of War Memorials (Scotland) Bill at stage 1.

That the Parliament agrees that the Social Justice and Social Security Committee be designated as the lead committee in consideration of the Wellbeing and Sustainable Development (Scotland) Bill at stage 1.—  
[*Jamie Hepburn*]

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

## Decision Time

17:12

**The Presiding Officer (Alison Johnstone):** There are nine questions to be put as a result of today's business. The first question is, that amendment S6M-17669.3, in the name of Jenny Gilruth, which seeks to amend motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

There will be a short suspension to allow members to access the digital voting system.

17:12

*Meeting suspended.*

17:15

*On resuming—*

**The Presiding Officer:** We move to the vote on amendment S6M-17669.3, in the name of Jenny Gilruth, which seeks to amend motion S6M-17669, in the name of Willie Rennie. Members should cast their votes now.

The vote is closed.

**The Cabinet Secretary for Education and Skills (Jenny Gilruth):** On a point of order, Presiding Officer. My app would not connect. I would have voted yes.

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

**Kenneth Gibson (Cunninghame North) (SNP):** On a point of order, Presiding Officer. I was unable to connect. I would have voted yes.

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

**For**

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Constance, Angela (Almond Valley) (SNP)  
 Dey, Graeme (Angus South) (SNP)  
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)

Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Annabelle (Cowdenbeath) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 Lochhead, Richard (Moray) (SNP)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP) [Proxy vote cast by Rona Mackay]  
 Martin, Gillian (Aberdeenshire East) (SNP)  
 Mason, John (Glasgow Shettleston) (Ind)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP) [Proxy vote cast by Jamie Hepburn]  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Slater, Lorna (Lothian) (Green)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Torrance, David (Kirkcaldy) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Yousaf, Humza (Glasgow Pollok) (SNP)

#### Against

Baker, Claire (Mid Scotland and Fife) (Lab)  
 Balfour, Jeremy (Lothian) (Con)  
 Bibby, Neil (West Scotland) (Lab)  
 Boyack, Sarah (Lothian) (Lab)  
 Briggs, Miles (Lothian) (Con)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Choudhury, Foyso (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Dowey, Sharon (South Scotland) (Con)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Eagle, Tim (Highlands and Islands) (Con)  
 Findlay, Russell (West Scotland) (Con)  
 Fraser, Murdo (Mid Scotland and Fife) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)

Golden, Maurice (North East Scotland) (Con)  
 Gosal, Pam (West Scotland) (Con)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Greene, Jamie (West Scotland) (LD)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Lennon, Monica (Central Scotland) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Lumsden, Douglas (North East Scotland) (Con)  
 McArthur, Liam (Orkney Islands) (LD)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 O'Kane, Paul (West Scotland) (Lab)  
 Rennie, Willie (North East Fife) (LD)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Rowley, Alex (Mid Scotland and Fife) (Lab)  
 Sarwar, Anas (Glasgow) (Lab)  
 Simpson, Graham (Central Scotland) (Con)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Smyth, Colin (South Scotland) (Lab)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Sweeney, Paul (Glasgow) (Lab)  
 Villalba, Mercedes (North East Scotland) (Lab)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 Whitfield, Martin (South Scotland) (Lab)  
 Whittle, Brian (South Scotland) (Con)  
 Wishart, Beatrice (Shetland Islands) (LD)

**The Presiding Officer:** The result of the division on amendment S6M-17669.3, in the name of Jenny Gilruth, is: For 64, Against 49, Abstentions 0.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that amendment S6M-17669.2, in the name of Miles Briggs, which seeks to amend motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce, be agreed to.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that amendment S6M-17669.1, in the name of Pam Duncan-Glancy, which seeks to amend motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce, be agreed to.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce, as amended, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

**For**

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Balfour, Jeremy (Lothian) (Con)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Briggs, Miles (Lothian) (Con)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Constance, Angela (Almond Valley) (SNP)  
 Dey, Graeme (Angus South) (SNP)  
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dowey, Sharon (South Scotland) (Con)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Eagle, Tim (Highlands and Islands) (Con)  
 Ewing, Annabelle (Cowdenbeath) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)  
 Findlay, Russell (West Scotland) (Con)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Fraser, Murdo (Mid Scotland and Fife) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)  
 Golden, Maurice (North East Scotland) (Con)  
 Gosal, Pam (West Scotland) (Con)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 Lochhead, Richard (Moray) (SNP)  
 Lumsden, Douglas (North East Scotland) (Con)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Martin, Gillian (Aberdeenshire East) (SNP)  
 Mason, John (Glasgow Shettleston) (Ind)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP) [Proxy vote cast by Jamie Hepburn]  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 Nicoll, Audrey (Aberdeen South and North Kincardine)

(SNP)

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

**Against**

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

**The Presiding Officer:** The result of the division on motion S6M-17669, in the name of Willie Rennie, on a new plan for Scotland's teaching workforce, as amended, is: For 89, Against 23, Abstentions 0.

*Motion, as amended, agreed to,*

That the Parliament acknowledges the work carried out by Scotland's teachers in schools across the country and commends them for all they do; recognises that the subjects that they teach provide important foundations for knowledge and skills in sectors that can be vital for Scotland's economy; notes with concern, however, that there has been a sharp decline in the number of teachers in key subjects, such as maths, physics and modern languages, and that targets to train teachers in STEM subjects have been continuously missed; believes that, should these targets continue to be missed, and the decline in the number of teachers continues, it will add to the strain on the teaching workforce, Scottish education will suffer and Scotland's ability to compete globally in important



sectors will be impacted; further believes that a lack of permanent contracts for teachers will further compound issues with recruitment and training; notes that there are also high levels of unemployment and underemployment of primary teachers and teachers for some secondary school subjects; recognises that local workforce planning is led by local government and must be undertaken in partnership with it; supports local authorities, as the employers of teachers, to use the significant additional funding made available, including £186.5 million in the 2025-26 Budget, to increase teacher numbers and create more permanent posts, and calls for the Scottish Government to commit to working in partnership with COSLA, through the joint education and assurance board, to develop a joint evidence-led education workforce strategy with stakeholders; continues to be concerned at the levels of violence being reported in schools, including unacceptable physical and verbal attacks and threats being experienced by teachers and the wider school community; notes the significant concerns over high levels of work-related stress being reported by teachers and the health and wellbeing of the profession; calls on the Scottish Government to bring forward a national coordinated education workforce plan, including data on additional support needs (ASN) and projections on workforce capacity for additional support workers and classroom assistants across local authorities as part of the ASN review; recognises concerns that absence cover is not being consistently applied across schools and local authorities; supports the better provision of access to resources and training, including the delivery of a new model of support alongside the NHS Education for Scotland trauma informed practice training on neurodivergence and autism, and further calls on the Scottish Government to develop a consistent national system of supply to support supply teachers across local authorities, make Pupil Equity Funding permanent to empower schools to properly plan, address concerns with the teacher census to ensure that it is known where staff are and where they are needed, ensure places on teacher training are aligned to workforce planning needs, including in science, technology, engineering and mathematics (STEM) subjects, and collect and publish data around the number of senior phase lessons being taught by non-subject specialist teachers.

**The Presiding Officer:** The next question is, that amendment S6M-17670.3, in the name of Maree Todd, which seeks to amend motion S6M-17670, in the name of Alex Cole-Hamilton, on addressing the inadequate provision for neurodevelopmental conditions, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

#### For

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Constance, Angela (Almond Valley) (SNP)  
 Dey, Graeme (Angus South) (SNP)  
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)

Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Annabelle (Cowdenbeath) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 Lochhead, Richard (Moray) (SNP)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP) [Proxy vote cast by Rona Mackay]  
 Martin, Gillian (Aberdeenshire East) (SNP)  
 Mason, John (Glasgow Shettleston) (Ind)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP) [Proxy vote cast by Jamie Hepburn]  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Regan, Ash (Edinburgh Eastern) (Alba)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Slater, Lorna (Lothian) (Green)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Torrance, David (Kirkcaldy) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Yousaf, Humza (Glasgow Pollok) (SNP)

#### Against

Baker, Claire (Mid Scotland and Fife) (Lab)  
 Balfour, Jeremy (Lothian) (Con)  
 Bibby, Neil (West Scotland) (Lab)  
 Boyack, Sarah (Lothian) (Lab)  
 Briggs, Miles (Lothian) (Con)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Choudhury, Foyso (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Dowey, Sharon (South Scotland) (Con)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Eagle, Tim (Highlands and Islands) (Con)

Findlay, Russell (West Scotland) (Con)  
 Fraser, Murdo (Mid Scotland and Fife) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Golden, Maurice (North East Scotland) (Con)  
 Gosal, Pam (West Scotland) (Con)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Greene, Jamie (West Scotland) (LD)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Lennon, Monica (Central Scotland) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Lumsden, Douglas (North East Scotland) (Con)  
 McArthur, Liam (Orkney Islands) (LD)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 O'Kane, Paul (West Scotland) (Lab)  
 Rennie, Willie (North East Fife) (LD)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Rowley, Alex (Mid Scotland and Fife) (Lab)  
 Sarwar, Anas (Glasgow) (Lab)  
 Simpson, Graham (Central Scotland) (Con)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Smyth, Colin (South Scotland) (Lab)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Sweeney, Paul (Glasgow) (Lab)  
 Villalba, Mercedes (North East Scotland) (Lab)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 Whitfield, Martin (South Scotland) (Lab)  
 Whittle, Brian (South Scotland) (Con)  
 Wishart, Beatrice (Shetland Islands) (LD)

**The Presiding Officer:** The result of the division on amendment S6M-17670.3, in the name of Maree Todd, is: For 65, Against 49, Abstentions 0.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that amendment S6M-17670.2, in the name of Sandesh Gulhane, which seeks to amend motion S6M-17670, in the name of Alex Cole-Hamilton, on addressing the inadequate provision for neurodevelopmental conditions, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

**For**

Baker, Claire (Mid Scotland and Fife) (Lab)  
 Balfour, Jeremy (Lothian) (Con)  
 Bibby, Neil (West Scotland) (Lab)  
 Boyack, Sarah (Lothian) (Lab)  
 Briggs, Miles (Lothian) (Con)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Choudhury, Foyso (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Dowey, Sharon (South Scotland) (Con)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Eagle, Tim (Highlands and Islands) (Con)  
 Findlay, Russell (West Scotland) (Con)

Fraser, Murdo (Mid Scotland and Fife) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Golden, Maurice (North East Scotland) (Con)  
 Gosal, Pam (West Scotland) (Con)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Greene, Jamie (West Scotland) (LD)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Lennon, Monica (Central Scotland) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Lumsden, Douglas (North East Scotland) (Con)  
 McArthur, Liam (Orkney Islands) (LD)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 O'Kane, Paul (West Scotland) (Lab)  
 Rennie, Willie (North East Fife) (LD)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Rowley, Alex (Mid Scotland and Fife) (Lab)  
 Sarwar, Anas (Glasgow) (Lab)  
 Simpson, Graham (Central Scotland) (Con)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Smyth, Colin (South Scotland) (Lab)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Sweeney, Paul (Glasgow) (Lab)  
 Villalba, Mercedes (North East Scotland) (Lab)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 Whitfield, Martin (South Scotland) (Lab)  
 Whittle, Brian (South Scotland) (Con)  
 Wishart, Beatrice (Shetland Islands) (LD)

**Against**

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Constance, Angela (Almond Valley) (SNP)  
 Dey, Graeme (Angus South) (SNP)  
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Annabelle (Cowdenbeath) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Kidd, Bill (Glasgow Anniesland) (SNP)

Lochhead, Richard (Moray) (SNP)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP) [Proxy vote cast by Rona Mackay]  
 Martin, Gillian (Aberdeenshire East) (SNP)  
 Mason, John (Glasgow Shettleston) (Ind)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP) [Proxy vote cast by Jamie Hepburn]  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Regan, Ash (Edinburgh Eastern) (Alba)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Slater, Lorna (Lothian) (Green)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Torrance, David (Kirkcaldy) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Yousaf, Humza (Glasgow Pollok) (SNP)

**The Presiding Officer:** The result of the division on amendment S6M-17670.2, in the name of Sandesh Gulhane, is: For 49, Against 66, Abstentions 0.

*Amendment disagreed to.*

**The Presiding Officer:** The next question is, that amendment S6M-17670.1, in the name of Paul Sweeney, which seeks to amend motion S6M-17670, in the name of Alex Cole-Hamilton, on addressing the inadequate provision for neurodevelopmental conditions, be agreed to.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that motion S6M-17670, in the name of Alex Cole-Hamilton, on addressing the inadequate provision for neurodevelopmental conditions, as amended, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

The vote is closed.

**Pauline McNeill (Glasgow) (Lab):** On a point of order, Presiding Officer. I experienced connection problems. I would have voted no.

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

**Ben Macpherson (Edinburgh Northern and Leith) (SNP):** On a point of order, Presiding Officer. Similarly, I was unable to connect. I would have voted yes.

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

**For**

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Balfour, Jeremy (Lothian) (Con)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Briggs, Miles (Lothian) (Con)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Constance, Angela (Almond Valley) (SNP)  
 Dey, Graeme (Angus South) (SNP)  
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dowey, Sharon (South Scotland) (Con)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Eagle, Tim (Highlands and Islands) (Con)  
 Ewing, Annabelle (Cowdenbeath) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)  
 Findlay, Russell (West Scotland) (Con)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Fraser, Murdo (Mid Scotland and Fife) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)  
 Golden, Maurice (North East Scotland) (Con)  
 Gosal, Pam (West Scotland) (Con)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greene, Jamie (West Scotland) (LD)  
 Greer, Ross (West Scotland) (Green)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 Lochhead, Richard (Moray) (SNP)  
 Lumsden, Douglas (North East Scotland) (Con)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)

Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP) [Proxy vote cast by Rona Mackay]  
 Martin, Gillian (Aberdeenshire East) (SNP)  
 Mason, John (Glasgow Shettleston) (Ind)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP) [Proxy vote cast by Jamie Hepburn]  
 McArthur, Liam (Orkney Islands) (LD)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Rennie, Willie (North East Fife) (LD)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Simpson, Graham (Central Scotland) (Con)  
 Slater, Lorna (Lothian) (Green)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Torrance, David (Kirkcaldy) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Whittle, Brian (South Scotland) (Con)  
 Wishart, Beatrice (Shetland Islands) (LD)  
 Yousaf, Humza (Glasgow Pollok) (SNP)

### Against

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

**The Presiding Officer:** The result of the division is: For 96, Against 18, Abstentions 0.

### *Motion, as amended, agreed to,*

That the Parliament recognises the scale and urgency of unmet need in both mental health and neurodevelopmental support, particularly in the context of a sharp rise in demand for neurodiversity assessments and treatment for

adults and children following the COVID-19 pandemic; notes the additional pressure on services caused by the global shortage of attention deficit hyperactivity disorder (ADHD) medication, which has led to the closure of titration clinics in some areas and significantly impacted waiting times and access to care; recognises the profound distress and disruption this causes for individuals and families who are left without timely diagnosis or support; acknowledges the knock-on effects on the health service, as well as the wider economic consequences of rising levels of economic inactivity linked to unmet neurodevelopmental and mental health needs; notes with concern the widespread removal of shared care arrangements where patients who obtained a private diagnosis could receive ongoing care and medication through the Scottish NHS; calls on the Scottish Government to work urgently with NHS boards and local authorities on their shared care arrangement protocols, but understands that decisions around the best course of treatment for patients are for individual clinicians; further calls on the Scottish Government to expand and create adult neurodevelopmental pathways and stepped care models, as recommended by the National Autism Implementation Team and Royal College of Psychiatrists in the 2021 National Clinical ADHD Pathway Feasibility Study; notes the four pilots that the Scottish Government funded following these recommendations, the establishment of a neuro-affirming community of practice and ongoing scoping work on demand and capacity for adult neurodevelopmental services, including work with NHS boards and local authorities on local neurodevelopmental data; calls on the Scottish Government to convene a cross-party summit on addressing waits for neurodevelopmental support and mental health capacity to avert a crisis for individuals and families waiting too long; recognises the progress made towards the Scottish Government's commitment to allocate 10% of NHS spending to mental health and 1% to CAMHS by the end of the current parliamentary session; thanks the dedicated NHS and wider workforce for its hard work in providing neurodevelopmental and mental health services in this time of increased demand, and calls on the Scottish Government to publish data on the number of patients with neurodevelopmental conditions who are being removed from CAMHS waiting lists.

**The Presiding Officer:** If no member objects, I propose to ask a single question on three Parliamentary Bureau motions. The final question is, that motions S6M-17703, S6M-17704 and S6M-17705, in the name of Jamie Hepburn, on behalf of the Parliamentary Bureau, on the designation of lead committees, be agreed to.

### *Motions agreed to,*

That the Parliament agrees that the Criminal Justice Committee be designated as the lead committee in consideration of the Prostitution (Offences and Support) (Scotland) Bill at stage 1.

That the Parliament agrees that the Constitution, Europe, External Affairs and Culture Committee be designated as the lead committee in consideration of the Desecration of War Memorials (Scotland) Bill at stage 1.

That the Parliament agrees that the Social Justice and Social Security Committee be designated as the lead committee in consideration of the Wellbeing and Sustainable Development (Scotland) Bill at stage 1.

**The Presiding Officer:** That concludes decision time.

## Hearing Care (Age-related Hearing Loss)

**The Deputy Presiding Officer (Liam McArthur):** The final item of business is a members' business debate on motion S6M-16452, in the name of Sharon Dowey, on improving access to hearing care for Scotland's ageing population. The debate will be concluded without any question being put.

### *Motion debated,*

That the Parliament understands that over 900,000 adults in Scotland live with age-related hearing loss; believes that uncorrected hearing loss can have a significant impact on people, notably social isolation, mental ill health and a heightened risk of developing dementia; understands that demand for hearing care services is increasing across the country, including in Ayrshire, as a result of changing demographics; notes that the number of over 60s in Scotland is projected to increase by 50% by 2033, and that South Ayrshire is the fastest ageing local authority area; notes the view that additional capacity in NHS services is needed to ensure that people presenting with hearing loss can access quality and timely care; considers that independent providers of audiology services have the skills, IT connectivity and capacity to meet the increased demand; notes the Scottish Government's commitment to bolster community audiology provision and put community audiology services on a par with the country's free community eye care services, and further notes the view that there is an opportunity to improve dramatically access to hearing care services by replicating this model.

17:28

**Sharon Dowey (South Scotland) (Con):** I am delighted to bring this vital topic to the chamber for a members' business debate. I thank colleagues from across the chamber for supporting the motion, and I look forward to hearing their contributions.

In the Scottish Parliament, we often debate Scotland's ageing population and the various ramifications of that for health services, communities, families and quality of life. Of course, the fact that people are living longer is a good thing, and it should be celebrated—nothing could be better than being able to spend more years with our loved ones. However, as parliamentarians, we cannot afford to ignore the challenges that it presents, too.

Like almost all western countries, Scotland has a declining birth rate and, on top of that, the number of those who are aged over 60 is projected to increase by 50 per cent by 2033. That is especially true for the area that I live in and represent. South Ayrshire is the fastest-ageing local authority area in Scotland, and, by 2043, one fifth of its population will be over the age of 75. I will speak later about the significant impact that

that is having on the local population and on providers.

We have heard many times about the various pressures that that will place on the healthcare system, including the number of staff who are needed and the resources that are required. We have also heard about the imbalance that exists, with a smaller working-age population paying taxes to support an increasing number of people who have served their time at the coalface and now deserve to enjoy retirement knowing that there is a stable and reliable healthcare system behind them.

Today, I will talk specifically about audiology services. As my motion states, it is estimated that more than 900,000 people in Scotland are living with age-related hearing loss. As a result of that increasing number, services across the country appear to be struggling to keep up. I appreciate that the Scottish Government has identified that area as a key priority for improvement, and I hope that today's debate will go some way towards helping with that improvement.

We know from research that waiting times for various audiology appointments are too long, and some people can be left for several months without getting the help that they need. We know that, as with almost every other service in the national health service, provision is under so much strain, and hard-working staff are struggling to keep up with an ever-growing workload.

However, there is more to it than that. Hearing loss is different from many other ailments that are frequently debated in the chamber. It can be hard for an elderly person to come to terms with the fact that their hearing is worsening. It can often be years before someone can be persuaded to seek help, and, by that point, significant damage will have been done. Social isolation, depression and loneliness are all exacerbated by hearing loss and, worst of all, it has been identified as the single largest avoidable risk factor for dementia.

Therefore, improving services must also take account of what we can do to encourage elderly people and their families to step forward, and, when they do, we must ensure that the NHS is ready for them, and not just at the first appointment. The aftercare system is equally crucial, especially as research suggests that people can abandon things such as hearing aids if they do not get comfortable with them quickly. We also need to ensure that services such as those that provide maintenance and battery replacements for hearing aids are up to scratch, especially in rural areas.

A number of private providers step up, too, such as Specsavers, and we should not be afraid to listen to those organisations when it comes to

creating the very best services. Last year, I met members of the Specsavers team in Ayr to learn about the work that they are doing to support people with hearing difficulties. Thomas Allison, the audiology director, and Linda Fulton, the retail director, spoke at length about the challenges that people in the area face. They are aware of the demographic challenges in NHS Ayrshire and Arran, where they estimate that nearly a quarter of the population have some form of hearing loss.

About 4,000 adults in the health board area are waiting for their first appointment for hearing issues, and the average waiting time is anywhere between 18 months and two years. Specsavers staff in Ayr hear horror stories every day from locals, many of whom have come to Specsavers because they have given up on the NHS.

I also heard about how things are different in England, where an any qualified person scheme is in operation. That means that some of the care that is usually provided in hospitals can be provided on the high street as long as those who are providing it are qualified. Given that Specsavers has a proven infrastructure for providing such services elsewhere in the United Kingdom, it would surely be of use to Scotland, including Ayrshire, too. The team told me about the importance of creating a positive environment for people to come in for follow-up care and about how many returning customers enjoyed chatting with the staff while getting their hearing aids cleaned.

Working alongside our NHS, companies such as Specsavers can contribute to building an audiology landscape that is ready for the demographic evolution that we face. I know that there have, in the past, been tensions between official audiology services and what is offered on the high street, and we must all work together to ensure that those two strands work with each other, rather than in opposition. We might even get to the point at which more patients could have their hearing loss managed in the community, which would take the pressure off hospitals and could even save money.

The Scottish Government has, in the past, stated that it would like audiology care to be on a par with what is offered in eye care services, and I fully agree with that aspiration. We do not always find consensus in the chamber, but I hope that, on this issue, we can come up with a plan to help the hundreds of thousands of elderly people struggling with their hearing who need exactly that.

As I mentioned, there are professionals in Ayr who deal with this kind of thing every day. They know better than anyone the challenges that we face, but they have some solutions, too, and MSPs would benefit very much from listening to them.

I finish by mentioning something that a doctor told me last week. We had actually met to discuss women's healthcare, and she had great ideas about how to improve the service that we currently give, but she said one thing that could apply to all areas, which is that we can choose to deliver the service differently. That is what we need to do.

17:35

**Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP):** I congratulate Sharon Dowey on securing this debate. As the Parliament's only—perhaps last—octogenarian MSP, I should perhaps declare an interest, because people of my age certainly become aware that their hearing is not in as sharp shape as it was in their youth. It is a realisation, rather like needing glasses, that sneaks up on people. I had compensated for my short-sightedness by recognising people by their gait and the sound of their footfall. I can still do that. I did not realise until I could not read a notice board in a lecture room that there was more to it. Glasses, and now contact lenses, are a liberation.

Hearing loss follows a similar path. I began to notice that I preferred to sit in the middle of a group, because then I could more clearly hear the conversations. Ambient noise disrupts people's hearing. Their whisper—my colleagues will identify with this—becomes more of a stage whisper. People say "Pardon?" or "Sorry?" far too often. The difference is that people do not find a reduction in someone's vision funny, but hearing loss can certainly make someone the butt of a joke. It is time that that stopped. Loss of hearing—small or large—can have an impact on our wellbeing. We might keep apologising when we have absolutely nothing to apologise for.

At this point, I will slip in a point about the importance of earwax removal by a professional. Earwax might not be the sole source of reduced hearing, but it certainly does not help. However, not all general practitioners now provide that service and, at about £60 for private treatment, it is not an option for everyone.

As more of us, thankfully, grow older in Scotland, it is no surprise to find that, currently, just under a million adults have their hearing affected, and demand for services is expected to rise significantly as the population ages. Indeed, the number of over-60s is projected to increase by 50 per cent by 2033—I do not think that I will be around then.

However, all is not lost. Midlothian Council has developed a strong partnership with Deaf Action to support residents of all ages who are living with deafness or hearing impairment, through initiatives such as—this is just one example—outreach and

home support, covering health, financial and social issues. Similarly, in the Scottish Borders, the Royal National Institute for Deaf People's Near You service is a community-led success. In 2024, it supported 2,497 people through local drop-ins and phone and online support. It also engaged in more than 4,300 individual interventions, including 1,907 hearing aid support interventions, 2,347 information and advice sessions and 116 hearing checks.

However, as is the case everywhere, Midlothian and the Scottish Borders face funding pressures, and—for reasons that we all appreciate and I need not expand on—accessing services in rural areas is more expensive. Therefore, bringing audiology services into community settings, on a par with Scotland's eye care model, would be most welcome. That early intervention could prevent more serious ear conditions from developing and help to tackle preventable mental health problems, cognitive decline and isolation, which can be linked directly to hearing loss. Frankly, and quite brutally, it would help the public purse. This is a well-worn mantra, but it is worth saying again: spend to save. I would like the Government to provide the same kind of access to audiology services that we have to free eye care and eye tests.

17:39

**Roz McCall (Mid Scotland and Fife) (Con):**

First, I congratulate my friend and colleague Sharon Dowey on securing the debate. This is an important issue, which is not spoken about enough. It is disappointing that many of the fundamental issues that affect people in Scotland are addressed only in members' business debates, without the full focus of the Government and at a time when many MSPs have other commitments. That is not to say that the minister will not listen to the debate intently—I am sure that she will—and I sincerely hope that progress is made on the issue.

I want to highlight the issue of hearing loss and dementia. We know that Scotland has an ageing population, and we know that health and social care demands increase exponentially as we get older. Although dementia is not classed as an elderly person's disease, it primarily affects people over 65, with 96 per cent of cases in Scotland involving people over that age.

What concerns me most about the issue is that, although we know that there are direct links between sensory loss and dementia, we do not routinely test for sight or hearing issues when we diagnose a person. How can we be sure that any treatment plan will work for the patient if we do not know how much they can see or hear?

After this debate, I will attend a meeting of the cross-party group on deafness, on which I work with some fantastic people on the issues surrounding deafness and deafblindness in Scotland. The group has been working on a report that highlights the problems in the current diagnosis pathway, which cannot help but have a knock-on effect on treatment. The results of the surveys that were conducted for the report showed that only 6 per cent of GPs and 12 per cent of other health and medical professionals would assess both sight and hearing as part of an integrated assessment of memory or dementia. That is a big problem, as most dementia assessments rely on the person being able to see or hear the questions. We are diagnosing somebody with dementia without considering whether they have any sensory impairment. Dr Hannah Tweed from the Health and Social Care Alliance Scotland says:

"Brain changes caused by dementia can have similar symptoms to Deafness, Deafblindness or Visual Impairment—and many people experience both dementia and sensory impairment. But even when standard dementia assessments are done, the results aren't able to separate dementia brain changes from sensory impairments which commonly overlap."

We must, therefore, ask how we know whether we are actually diagnosing dementia.

The ALLIANCE is calling for sensory assessments to be a mandatory part of dementia assessment, and, considering that the number of dementia cases is set to rise by 50 per cent in the next 20 years, it is prudent to ensure not only that we are diagnosing the issue correctly but that we have in place adequate treatment plans for people, which is also essential.

A lack of proper sight or hearing assessments, or even clear guidance on who is responsible for that assessment, can lead to poor and inadequate care or, at worst, people's sensory impairments being continually missed.

I know that work has started with Healthcare Improvement Scotland on Scottish intercollegiate guidelines network—SIGN—guidance on next steps that can be taken to implement some of the dementia report recommendations. I urge the Scottish Government to work with the ALLIANCE and HIS to make that happen.

I look forward to a time in Scotland when sensory assessment is just a matter of routine, with everyone having access to improved care pathways and with support for people who not only have dementia but experience deafness, deafblindness and visual impairment.

17:43

**Carol Mochan (South Scotland) (Lab):** I thank Sharon Dowey for bringing this debate to the chamber. It concerns an area that I have recently discussed with constituents, audiologists and third sector groups that support older people in my region.

As we have heard, hearing loss is very common. In fact, it is one of the most common disabilities in the UK. In 2015, Action on Hearing Loss Scotland estimated that there were 945,000 people living with hearing loss in Scotland, which is one in six of the population. As we have heard, the statistics speak for themselves.

The issue affects many people and their families. More than half the population over the age of 55 has some form of hearing loss, and the presence of hearing loss rises with age. It is estimated that 70 per cent of people over the age of 70 have some degree of hearing loss. Given the demographic changes in our population, the prevalence of hearing loss is set to continue, as we have heard from other members. It is, therefore, right that Sharon Dowey is raising the issue tonight and giving us an opportunity to discuss options for future service delivery.

Of course, it is real stories that shine a light on the issues that we discuss. Going through the literature that was provided for us by the Scottish Parliament information centre during my research for the debate, I was particularly struck by some of the words from Kathryn, a retired nurse. She said:

“The best thing for me is feeling whole again ... My hearing loss happened gradually. I didn’t suddenly realise it was a problem. I was continually asking my husband to turn the television up and would often take a back seat in social situations.”

I think that many of us know that social isolation can be so hard for people. I particularly liked how Kathryn described the way that she felt after she got her hearing aids. She said:

“It was incredible the first time I listened with them ... The immediate impact of being able to hear again was realising how much I had missed—like the joyful sound of birds singing. I believe it lifted my mood and I think it increased my confidence.”

Improved hearing is really important for people. Kathryn said that she could appreciate music again, hear children, and experience all the things that lift our spirits and make us feel positive. It has a real impact. One thing that I had not considered was what she said about feeling safer because she could hear cars coming and things like that. She also said that she wears her hearing aids with pride, which is an important point.

I also want to mention the impact on families. We know from RNID research that nine out of 10 of us would feel upset if a family member was

missing out on a conversation or avoiding having a conversation altogether because of hearing loss. However, one in three say that a family member regularly does not hear them or asks them to repeat themselves. Despite that, many of us struggle to know the right way to speak with people about the issue.

I agree, because that is my own experience. Everyone else in the household and the wider family is talking about how bad things are or how frustrated they are by a member of the family not hearing them, but they rarely mention it to the individual who is suffering from hearing loss. It is so important that we discuss these matters and encourage people to talk freely about what is happening to them or their loved ones and about what can be done.

That brings me to the point that we are here to discuss tonight. There is no doubt that, in Scotland, we must galvanise ourselves to implement NHS community audiology services to ensure access to them, as they are incredibly important. We know that waiting lists are long in hospital settings, but there are opportunities, and many people want to have those opportunities within the community.

In response to a question that my colleague Jackie Baillie recently asked, the Government said:

“Audiology is considered as a clinical priority area and the Scottish Government remains committed to its vision for an integrated and community-based hearing service in Scotland.”

It also said that it wants to

“continue to work with the NHS, Third Sector and private providers to identify and cost an appropriate model of community care for any future service reform”.—[*Written Answers*, 10 March 2025; S6W-35353.]

In closing, I say to the minister that I am interested to hear what the options are, because we need to make sure that there are options. I would not like us just to go down a road of using private services, so it would be good to know whether the Government has managed to get that work done. Given the time, I will close there.

17:48

**Douglas Lumsden (North East Scotland) (Con):** I congratulate my colleague Sharon Dowey on securing the debate, although I feel that it is a debate that we should not be having. We should not be in the situation that we are in now.

The system that we have in place is cruel. Audiology is in crisis. Imagine saying to an elderly person, “I’m sorry, but we’re not going to be able to see you for two years.” We in the chamber can all recognise how inhumane that would be, but the



waiting times in NHS Grampian, for example, show that people are having to wait for two years before they get an assessment and then wait longer to get a hearing aid.

As Christine Grahame points out, all that leads to social isolation and links to dementia. There is also an impact on family and community settings. I imagine that people can only say “Pardon?” once or twice before they withdraw from engaging in conversation altogether. The issue should be looked at as soon as possible.

The answer is clear and has been accepted by all: we need to get people out of a hospital setting. Ninety-four per cent of people with hearing loss have uncomplicated adult-onset hearing loss that is suitable for community treatment. At present, those patients compete for the limited capacity that is available to treat children and adults with sudden onset hearing loss and specified comorbidities, who have to be treated in hospital.

There is absolutely a need for intensive audiology in major hospital settings, but the specialists involved should be reserved for the 6 per cent of cases that involve traumatic hearing loss or child hearing loss from birth. However, just now, so much of that resource is being spent on people who should be not in a hospital setting but in community settings instead.

As Sharon Dowe pointed out, we already have a solution in our communities. Companies such as Specsavers, which I visited on Friday—I even had a hearing test done—already provide that service. As we have said, we already do community eye care so, surely, we should just replicate that for hearing.

A couple of months back, I met Neil Gray and Jenni Minto, and the issue was one thing that I spoke to them about, because I had raised questions on it. I thank them for that time.

NHS Grampian would be an ideal place for a pilot on community audiology. There are huge waiting times and a real need for something to be done. I urge the Government to take on the seriousness and urgency of the issue and move with pace, because we are talking about mainly elderly people who might be reaching the end of their lives. We need to look after them and make sure that they can communicate with everyone else as much as possible.

17:51

**The Minister for Public Health and Women’s Health (Jenni Minto):** I, too, thank Sharon Dowe for lodging the motion. I welcome the opportunity to conclude the debate. I also thank everybody for the tone of their contributions—clearly, the topic is something on which we all agree.

I note Roz McCall’s comments about the connections between sight and hearing loss and dementia. Although dementia does not sit in my portfolio, I know that Maree Todd will be very interested in the conversations and the points that were raised.

From personal experience, I recognise the importance of supporting people who live with dementia with their hearing so that they avoid loneliness, as many have commented. I reiterate the Scottish Government’s commitment to improvements in the way that audiology services are delivered. The publication of the report “Independent Review of Audiology Services in Scotland” highlighted real failings in the way that care was delivered in Scotland, but it also recognised opportunities to build on the services to give real improvements to those who use them.

As Sharon Dowe and others have pointed out, the number of adults in Scotland with age-related hearing loss is growing. Almost one in six of the population experiences some form of hearing loss. It is right that we should provide those patients with a clinical service that meets their needs—not only to diagnose their condition quickly and efficiently but to manage that condition and lessen the impacts of social isolation and loneliness. I, too, will attend the cross-party group meeting tonight.

I was struck by Christine Grahame’s comments on stigma and the differences in the way that we treat sight and hearing. I will take that away for when I speak to my officials again; I had a conversation with them this afternoon about the Scottish Government’s work on audiology more widely.

**Christine Grahame:** That point is one of the reasons why many people disguise the fact that they cannot hear what is going on, which makes it worse for them. They suppress it, because they know that it will be an amusement to many people.

**Jenni Minto:** Christine Grahame has raised an important point. While she was speaking, I was thinking about the difference. My father wore glasses from a very young age and could only have the NHS-style ones; now, however, there are so many different styles that people can get. There is possibly the same stigma about the size of hearing aids, as opposed to the much smaller ones that are currently available. That was a really important point, which was well made.

As with many of our clinical services, waiting times are increasing, and patients cannot access them as quickly as we would like. However, the 2025-26 budget provides record funding of £21 billion for health and social care, and health boards are receiving an additional £200 million to reduce waiting lists and support the reduction of delayed discharges. I hope that that funding will be

a welcome addition to health boards, and it should build on the work that they have already been doing to address waiting times by reducing their failed-to-attend rates through patient-focused bookings.

References have also been made to the Scottish National Party manifesto commitment to bolster community audiology provision to help to free up capacity in our acute sector. The Scottish Government remains committed to that vision. We are all familiar with the manifold benefits that increasing community provision brings, both in reducing the cost of services and in supporting patients to receive care when they need it, without the constraints of waiting times, as members have referenced with regard to optician services.

**Douglas Lumsden:** It is good to hear that the Government is still committed to community audiology. Can the minister give a timescale for when that change will start to happen?

Getting access to the service initially is only one issue; the follow-up is also missing. I speak to many people who have NHS hearing aids, but they never go back to get them checked. That is something else that we are missing out on.

**The Deputy Presiding Officer:** I can give you the time back for that, minister.

**Jenni Minto:** I will touch on Mr Lumsden's second point later in my speech. I am afraid that I cannot give timelines, but that conversation started earlier today with regard to moving on audiology in the community.

The Scottish Government has a strong desire to deliver care as close to the patient as possible. That is an example of where our population-based planning principles will provide benefits to patients and staff.

As I highlighted, we have been working specifically on the "Independent Review of Audiology Services in Scotland" report. That is part of the work that we are doing to ensure that we have the right evidence base so that we deliver value for money and ensure sustainability in the longer term. The commitment is evident through our on-going work with the Royal National Institute for Deaf People to deliver the Near You service, which is supported by nearly £250,000 of funding. Christine Grahame mentioned the service in NHS Borders. I had the privilege of seeing the work at first hand during a visit to Portobello library in the NHS Lothian area in February.

As Christine Grahame noted, Near You offers free hearing checks, hearing aid services and aftercare, as well as information and peer support on matters such as hearing aid maintenance and assistive technology for those who are deaf and are experiencing hearing loss or tinnitus. The feedback from users has been extremely positive,

with regard to both decreasing the pressures on our acute services and providing direct support to those who are affected.

In response to Mr Lumsden, I say that that is one of the key things that we must remember. As I say in a lot of meetings, it is about the third sector, health boards and the Government working together to make those connections. I heard from users of the Near You service and the RNID, which provides that service, about the importance of the relationship. The RNID felt that it could take people away from the front door of hospitals to allow hospitals to treat those with more acuity. I agree with Mr Lumsden that we must make sure that there is aftercare, but we need to check where that aftercare is best placed.

Ms Dowey and others noted that independent audiology providers have the skills, information technology connectivity and capacity to support our audiology services. I do not disagree that independent audiology providers are giving a great level of care to those who use them. However, the NHS continues to be the majority care provider for the people of Scotland, accounting for around 80 per cent of all audiology care.

We must also recognise that, due to shared pipelines, independent providers face similar workforce challenges to the NHS. We are working to address the shortfall in the number of trained audiology graduates through our commitment to develop a career pathway for those studying healthcare sciences. We are working with stakeholders across Scotland to ensure that that will provide a pipeline of staff to bolster audiology services.

Overcoming those workforce challenges will not happen overnight, and it will take time to support students in our workforce. During that time, it is therefore vital that we work together to ensure that the people of Scotland receive the care that they need to manage their conditions. I commit to keeping open any lines of communication with representatives of independent providers, and I will invite their input when discussions on the development of a community model for audiology progress.

I agree that there is much to do and that it is vital that we get this right for the people of Scotland. I am confident that we in Government are already taking the right steps to deliver sustainable, safe, effective and efficient services to support hearing loss for our population in the longer term, and the matter has my full focus.

**The Deputy Presiding Officer:** Thank you, minister. That concludes the debate.

*Meeting closed at 18:00.*

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