



OFFICIAL REPORT
AITHISG OIFIGEIL

Public Petitions Committee

Wednesday 24 March 2021

Session 5



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Pàrlamaid na h-Alba

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PUBLIC PETITIONS COMMITTEE

7th Meeting 2021, Session 5

CONVENER

*Johann Lamont (Glasgow) (Lab)

DEPUTY CONVENER

*Gail Ross (Caithness, Sutherland and Ross) (SNP)

COMMITTEE MEMBERS

*Maurice Corry (West Scotland) (Con)

*Tom Mason (North East Scotland) (Con)

*David Torrance (Kirkcaldy) (SNP)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Jackie Baillie (Dumbarton) (Lab)

Jackson Carlaw (Eastwood) (Con)

Finlay Carson (Galloway and West Dumfries) (Con)

Neil Findlay (Lothian) (Lab)

John Scott (Ayr) (Con)

CLERK TO THE COMMITTEE

Lynn Russell

LOCATION

Virtual Meeting

Scottish Parliament

Public Petitions Committee

Wednesday 24 March 2021

[The Convener opened the meeting at 09:30]

Decision on Taking Business in Private

The Convener (Johann Lamont): Good morning, and welcome to the seventh and final meeting in 2021 of the Public Petitions Committee. The meeting is being held virtually.

Agenda item 1 is a decision on whether to take item 3 in private. Is that agreed?

As no member has indicated otherwise, that is agreed.

Continued Petitions

Polypropylene Mesh Medical Devices (PE1517)

09:30

The Convener: Item 2 is consideration of continued petitions. The first petition, PE1517, which was lodged by Elaine Holmes and Olive McIlroy on behalf of the Scottish Mesh Survivors hear our voice campaign, is on polypropylene mesh medical devices. The petition calls on the Scottish Government to

“1. Suspend use of polypropylene Transvaginal Mesh (TVM) procedures;

2. Initiate a Public Inquiry and/or comprehensive independent research to evaluate the safety of mesh devices using all evidence available, including that from across the world;

3. Introduce mandatory reporting of all adverse incidents by health professionals;

4. Set up a Scottish Transvaginal Mesh implant register with view to linking this up with national and international registers;

5. Introduce fully Informed Consent with uniformity throughout Scotland’s Health Boards; and

6. Write to the MHRA and ask that they reclassify TVM devices to heightened alert status to reflect ongoing concerns worldwide.”

At the committee’s previous consideration of the petition in February 2021, it agreed to write to the Cabinet Secretary for Health and Sport in respect of several outstanding issues, including what action the Scottish Government is taking to rebuild the trust and confidence of the petitioners and other mesh survivors who have been disappointed by the way in which it has pursued some of the actions that are called for in the petition, and whether the Scottish Government will agree to the call for a substantial inquiry to examine what happened to the women, in order to understand how their experience fell so short of what it should have been and to ensure that it does not happen again.

The committee has received two submissions from the cabinet secretary, and the petitioners have provided a submission.

In her submissions, the cabinet secretary highlights the Scottish Government’s on-going engagement with patients. She explains that the new specialist pelvic mesh removal service will provide a holistic service to patients, and that the service will be shaped by the views of and feedback from the women using it. Although the cabinet secretary hopes that women will have confidence in the new service, she recognises that that may not be the case.

To that end, women will be able to have care from surgeons in NHS England. In recognition that some women may wish to be treated by a surgeon outwith the national health service, she confirms that

“NHS National Services Scotland intends, at the earliest opportunity, to issue an invitation to tender for specified mesh removal services”,

which will

“provide an additional option for patients that will include the possibility of referral outside the NHS, which includes the possibility of referral outside the UK.”

I welcome John Scott, Jackson Carlaw and Neil Findlay to the committee for consideration of the petition. Before I ask committee members for their comments, I will go to our visitors, starting with Jackson Carlaw.

Jackson Carlaw (Eastwood) (Con): Thank you, convener, for your engagement with the petition in the course of this parliamentary session. As this is the final day of the session, the final meeting of the committee and, probably, your final official function, I wish you every success and good wish for the future.

I accept that petitions do not last for ever. As a member of the Public Petitions Committee in the previous parliamentary session, I remember the desire, as the session drew to a close, to draw to a conclusion petitions that had fulfilled their purpose. There were some petitions—I recall, for example, the petitions on the St Margaret of Scotland Hospice and on the fitting of seat belts into vehicles used for transporting children, such as minibuses—that were transferred across parliamentary sessions for good reason.

The mesh petition has been one of the most significant that the Scottish Parliament has considered. It has an international perspective and has received continued international attention. I accept that there are aspects of the petitioners’ requests that may be best served by a fresh petition in the next session of Parliament, but how do we get to that point? Is there anything in the current petition that is still relevant? Yes, there is.

I wrote a joint letter to the cabinet secretary on 3 March, with Neil Findlay and Alex Neil, outlining several concerns that we have been pursuing—if I can paraphrase, there have been three of us in this marriage in the Parliament and it has never felt crowded. We have worked closely together to pursue the issues that the petition has raised.

I asked the cabinet secretary about the fundamental, first request of the petition, which was the continued suspension of mesh procedures. In her reply of 10 March, the cabinet secretary said:

“I have been clear that I have no intention in lifting the halt in the use of transvaginal mesh. It is of course ... for the electorate to consider at the forthcoming election who they wish to form the next government, but—whatever the outcome—I have a high level of confidence that there will be in the next session of Parliament, as there has been in this, strong support across all parties for action to continue to improve vital services for those affected by mesh and wider women’s health issues.”

Therefore, I appeal to the committee to hold the petition open for the next session in order that the new committee can write to the new Government of the day—whatever the outcome of the election, there will be a new health secretary as the current one is retiring—in order to establish what its approach will be to the issues and the specific opening request of the original petition. Depending on the answer, at that point, it might be that some of the fresh initiatives that the petitioners and others have raised could be best served by a new petition.

The engagement of the Public Petitions Committee gives those involved in the issue a platform to ensure that the focus is not lost in the next session and so that I, and others concerned, can continue to do what we can to bring justice and ensure that we do not see any repeat of the fundamental, original errors.

John Scott (Ayr) (Con): I am grateful to the committee for allowing me to speak at the final meeting of the session of the Public Petitions Committee.

Further to what Jackson Carlaw has just said, I, too, think that the petition should be kept open. The matter is still a work in progress. Many of the matters raised by the petitioners have yet to be resolved, notwithstanding the many fine words that have been spoken on the issue.

People can lodge a new petition on the subject by all means. As you know, convener, the Standards, Procedures and Public Appointments Committee recently decided that the same petitioner can lodge one further petition while their original petition is open—even if it has been open for eight years, as this one has. The petitioners should also lodge a new petition in the next session if that is required.

I want the committee to discuss and investigate the issue of compensation for those who have had to take action for themselves and who have had to borrow money to get operations outwith Scotland—perhaps travelling to England or abroad to America—because, for whatever reason, they were not able to have an operation to remove mesh in Scotland.

Lives go on—politicians talk and so do ministers, but we need action on this. These services need to be set up and delivered, sooner rather than later. People cannot wait. That is my

point and I thank the convener, Johann Lamont, for allowing me to make it. I am grateful.

Neil Findlay (Lothian) (Lab): The work of the Public Petitions Committee has been hugely important and influential during the past eight years and I plead with the committee not to close this petition for a number of reasons. Also, I say to Jackson Carlaw that, if there are three in this marriage in Parliament, on this final day of the session I am filing for divorce—I am sorry to break it to him publicly.

One way in which the committee can justify continuing the petition is that the ban, which was requested in the petition, is not a legislative ban. Jackson Carlaw referred to the cabinet secretary's letter, but if we have a new cabinet secretary who takes a different view, that ban could end. We know that many in the medical profession would overturn that ban in a heartbeat. They want to restart implanting mesh because they believe that there is nothing wrong with it, despite all the evidence.

Secondly, there has never been a public inquiry into what is one of the biggest ever medical scandals in Scotland's NHS. Therefore, that point of the petition remains as well.

A new service is being set up in Glasgow and we will have to see how that develops. There is not a lot of confidence in it from mesh-injured women. However, the other three elements of the petition—mandatory reporting, a register of implants and informed consent—go to the very heart of what that new service might look like. Therefore, the committee should keep the petition open and oversee whether the new service actually has mandatory reporting and a register, and engages in services with fully informed consent.

John Scott raised the issue of compensating women who have gone of their own volition to the US or wherever for surgery and paid for that through crowdfunding, savings or borrowing. I raised that with the First Minister last week. She said:

"We are making progress on all key asks of the charter; on the asks on which we are not yet making progress, the health secretary has already given instructions—for example, on our finding a way of reimbursing the cost of mesh removal surgery, probably through an extension of the remit of the fund that has been set up."—[*Official Report*, 18 March 2020; c 16.]

However, eight days previously, the cabinet secretary's letter to which Jackson Carlaw referred, to himself, Alex Neil and me, said:

"With regard to reimbursing women who have sought treatment from Dr Veronikis at their own expense, Scottish Government officials have investigated in detail whether there exists appropriate statutory authority to use public funds to refund patients who have arranged and received

treatment privately, and not through a referral from an NHS Board. Further to this consideration, it is clear that there are not legal powers to reimburse persons in these circumstances."

It went on to say that

"the advice is clear with respect to using public funds in this regard."

Those are two contradictory positions. The First Minister says that the Government is looking at how it can do that, but the cabinet secretary has already discounted it. The Government may fall back on saying that it has to be done through a referral from an NHS board. However, the simple fact is that a number of women have taken their request to be referred to an NHS board and had it refused. Therefore, is that route completely blocked?

A number of contradictory things are going on and it would be appropriate for the committee to keep the petition open to look into those issues as well. There are other related issues, such as the appointment of the patient safety commissioner following the Cumberlege review—I am not sure who is overseeing or keeping an eye on that process—and there are also issues around the new mesh centre and how it develops.

Therefore, for a number of reasons, I urge the committee to continue the petition. You have done fantastic work on it. I know that, as a convener and a committee, I would be trying to wind up loose ends at the end of the term, but this is not a loose end—this must continue.

09:45

The Convener: I thank all three of you, who will I am sure be living in happy coexistence post-election.

For my part, I think that the petition is a huge issue. There are organisational and accountability issues for the committee. The fact of the matter is that we really ought not to go beyond what the petition itself asks for. It is a more general consideration for the Public Petitions Committee to avoid creep from the core business of a petition to what might be considered something that comes out of it.

If this was not the end of the session, I would be arguing for the petition to be referred to the Health and Sport Committee, because there should be parliamentary scrutiny and oversight of all the issues that have emerged here, including compensation. Clearly, there has been some progress; for example, the National Institute for Health and Care Excellence is looking at the advice that is given to people.

There is still a conflict, as some people with conditions say that you cannot not have mesh in

certain circumstances. There is clearly going to be quite an argument going on there. The question is whether that is a matter for the Public Petitions Committee.

My view is that some things remain outstanding. The question of compensation should probably be raised in a new petition, because it is a very specific ask that can be brought to bear and it is not in the original petition at all. I will be interested to hear what other committee members feel.

In an ideal world, I would have referred the petition over to the Health and Sport Committee for it to keep an eye on and to ensure that the scandal around this is properly considered in terms, which is part of the original petition. However, we do not have that option. Given that the petitioners have always had the sense that, if we do not shine a light on this, nothing will happen, and that, if we do not keep the focus of the light on things, nothing will happen and there will be drift, there is an argument for holding on into the new session, when referring the petition over to the next health committee and taking a new petition might be options. That is my view, but I am interested to hear members' views.

Gail Ross (Caithness, Sutherland and Ross) (SNP): I thank our family of campaigners, some of whom have joined us today, for all their work. I include Alex Neil in that as well.

In relation to everything that has been said, I totally agree with the convener's suggestion about passing the petition on to the Health and Sport Committee. However, for me, passing it on to that committee is not just about its keeping an eye on it; I would like to see it doing its own inquiry.

I agree with what has been said about the public inquiry aspect. Although the Scottish Government says that there is no need for a public inquiry because of the Cumberlege review, I think that they are two separate things. This is such an important issue. There are many strands to it and quite a few contradictions. I really believe that there needs to be some kind of separate inquiry, whatever that looks like.

As the convener also said, although there has been progress, there are still questions about that progress. Everything that has been said has been said and I do not really have anything to add apart from to say that I definitely would not close the petition.

I agree with what the convener said about compensation, which is a huge aspect of this. The cabinet secretary said in her response that the Scottish Government is looking at options to enable survivors who need an operation for the removal of mesh to go outwith Scotland. NHS England was mentioned but, reading between the lines, I believe that it is looking at options to send

people elsewhere if they request that. However, that has not been confirmed.

Many questions still need to be answered. We now have the ability to have two petitions working alongside each other, so we could pass this petition on to the successor Public Petitions Committee, with the recommendation that it passes it on to the successor health committee—whatever it looks like or is called—and we could also ask the petitioners to submit a separate petition about compensation. I think that that would be a good way forward, but I will wait to hear what other committee members have to say.

Maurice Corry (West Scotland) (Con): I thank the petitioners for keeping going with this long-standing petition. It is immensely important that we get it resolved as soon as possible. John Scott's point is valid, and I support having a new petition for the compensation factor—that is an excellent point.

I am enormously grateful to Jackson Carlaw, Neil Findlay and Alex Neil—the marriage of the three—for pushing the issue. I agree with my fellow member Gail Ross that the Cumberlege inquiry leaves a lot of gaps. There should be a public inquiry to follow that up, and I am absolutely loth to let the petition go, because we are nowhere near the end of it. Pressure needs to be kept up on the current Government and the Government that will be formed after 6 May. It is too important an issue to close the petition. A lot of work has been done on it, and there has been an immense amount of suffering for the victims of the issue with vaginal mesh.

I propose that we do not close the petition. We should keep it going and ensure that the new Parliament and the new Government are well aware of the issues that we have raised.

David Torrance (Kirkcaldy) (SNP): As someone who was on the Public Petitions Committee in the previous parliamentary session when the petition was first submitted, I thought that progress would have been much faster and that the issue would have been resolved more quickly. Listening to the evidence from the women who have been affected by mesh implants was probably my most emotional time ever in committee in my 10 years in Parliament. My thoughts go out to them, and I want to say a big thank you to them for submitting the petition, keeping going with the petition and for everything that they have had to go through to make progress on it.

Everything has not been resolved, and, after eight years, it really should have been, so I am happy to keep the petition open and to put it in our legacy paper. Like Gail Ross, I would like it to be passed to the health committee in the new session

of Parliament, because it could do a big inquiry into the issue. On the other issue that has been raised, I would advise the petitioners to submit a second petition to Parliament in the next parliamentary session.

Tom Mason (North East Scotland) (Con): I agree with pretty much everything that has been said. These ladies have been let down for so long, and it is so important that we maintain the momentum to ensure that they get the satisfaction that they need after such a long time. They have been very courageous and, as people have said, listening to their stories has been a very emotional process. If we close the petition now, we will lose the good will that is beginning to be created to get things done. There are promises in place and inquiries can be held. Plenty of time is needed for that, and it cannot be done at this stage of the parliamentary session, so we need to keep the petition open and include it in the committee's legacy report to ensure that all the issues are current.

I agree that the petition should be passed on to the new health committee and that the compensation issue requires a separate petition. Keeping the petition open is essential to keep faith with these ladies, and it is the least that we can do.

The Convener: Does any of our visiting colleagues wish to add anything?

John Scott: I am sorry; I do not appear to be able to make the chat function work.

I agree with members that the petition should be passed to the next health committee. I appreciate that we are too late in the session to do anything about it, but I wonder whether a codicil or annex might be added to the Health and Sport Committee's legacy report, through your good offices and the offices of the clerks, to draw the petition to its attention. It could say that we regret that the petition has not been passed over to it before now but that, nonetheless, this committee as well as a few colleagues who are not members of the committee and, more importantly, the women who are involved, would be grateful if the next health committee would consider it in the next session of Parliament. Such an annex would at least give the next health committee the start of a thought process.

As you and I know, convener, the work programme will be decided at the very beginning of the next session. The sooner the thought to look into the petition is put in front of the next health committee, the better. If the matter is mentioned in the Health and Sport Committee's legacy paper by whatever means, even at this late stage, it might bring about that inquiry more quickly.

Neil Findlay: I thank everyone for their helpful comments. It is of course up to this committee to request that the next health committee takes on the petition and carries out an inquiry, and I would support that. However, it would be worth keeping the petition open to await the response from the new health committee, which would mean that everything would not simply die away if it said no, because the petitions committee would have the matter open. If the next health committee takes on the call and opens up an inquiry, it might then be opportune for the petitions committee to close the petition.

Gail Ross: On Neil Findlay's point, I had not really thought about that possibility previously. We would need to get advice but, if the petition goes from here to another committee, does the latter have any ability to pass it back? As Neil Findlay said, can we keep it on our list even though it has gone somewhere else? What are the logistics of how we could keep an eye on it?

The Convener: We are getting a wee bit ahead of ourselves. All petitions come back to the Public Petitions Committee ahead of the end of a session. We get reports back from all the committees to which we have referred petitions. We are still responsible for them whether other committees have done work on them or closed them—we have information on whether they were closed.

We cannot refer the petition to the Health and Sport Committee, because it is too late, and I do not think that we can define what we want the next health committee to do with it. If we refer the petition to it, it becomes that committee's responsibility and it responds as it chooses.

The main thing is that petitioners could come in with a new petition on questions around compensation and other issues that were not highlighted in the original petition. The petitioners can bring a new petition with a new focus if there is no progress on a petition and things look as if they have stalled. I think, however, that there is general recognition that work has been done on this petition.

The downside of referring the petition to the next health committee is that we have no control over what it does with it. The upside is that that committee then has a specific focus on the work that has been done and on whether there is a need for an inquiry. We have to recognise that there are limits to that process, but that is balanced by the fact that the petitioners can lodge a new petition if they feel that there is a delay, a drag or other issues that they want to highlight, and that gives me comfort. At this stage, we cannot technically refer the petition to any committee, because nothing will be done; we can

only make recommendations to the next petitions committee.

Unless I am misreading the committee, we want to hold on to the petition, although we recognise, as Jackson Carlaw says, that eventually a petitions committee will have to let it go. However, there are outstanding issues that need to be addressed, and new issues have emerged that could be part of a new petition. We believe that the new health committee could focus on those outstanding issues, but obviously that is a matter for the new petitions committee to decide.

10:00

My feeling is that we should continue the petition, but make a recommendation in our legacy paper to the new petitions committee that the petition does not just sit but is referred to the new health committee. We also recognise that new issues might emerge in a new petition, and the context for that will be all the work that has already been done. I hope that members are content with that approach, if it is clear to them what I have suggested.

All the things that have been said about the petition remain true: that this is a scandal, that there are huge issues, and that there are women who are living with pain daily and who have lost confidence in the system. That is the other reason why the petition should be held on to—because they do not have confidence to let it go. Whether it was the review or other issues, the system so far has let them down. We need to give them confidence that there will still be parliamentary scrutiny, while recognising that that does not necessarily have to be done through a petitions committee. The specific emerging issues that Neil Findlay and others have highlighted, including compensation and so on, might be part of a further petition at a later date.

I think that we are agreed that we will continue the petition, and that we will put in our legacy paper commentary on where the petition might usefully go. We will also say to the petitioners, in relation to the specifics of issues that have emerged from the petition, that they might want to bring a further petition. Do members agree to that approach?

Members *indicated agreement.*

The Convener: I again thank our visiting MSPs. It has been an absolute privilege for me as a committee convener to welcome you to so many meetings. The work of the Public Petitions Committee is immeasurably enhanced by MSPs coming along to speak up on behalf of petitioners alongside the petitioners themselves. It is a powerful combination, and I hope that that will be

sustained in the next session of Parliament. Thank you for your attendance.

A75 (Upgrade) (PE1610)

A77 (Upgrade) (PE1657)

The Convener: The next continued petitions are PE1610, on upgrading the A75, by Matt Halliday, and PE1657, on upgrading the A77, by Donald McHarrie on behalf of the A77 Action Group. We welcome Finlay Carson MSP, who is in attendance for the petitions. John Scott MSP will sit in on this part of the meeting as well, and I will call him if he wants to make a contribution at a later stage.

PE1610 calls on the Scottish Government to upgrade the A75 Euro route to dual carriageway for its entirety as soon as possible. PE1657 calls on the Scottish Government to dual the A77 from Ayr, at Whitlets roundabout, south to the two ferry ports that are located at Cairnryan, including the point at which the A77 connects with the A75.

The committee previously agreed to consider the petitions together. Members may remember that, at the Conveners Group meeting with the First Minister on 13 November 2019, I raised the two petitions with the First Minister. The First Minister advised that she would respond to the committee in writing. Despite repeated requests for that information since December 2019, including in a letter sent to the First Minister in January 2021, no response has been received.

Since our last consideration, we have received submissions from the North Channel partnership, Allan Dorans MP, Dual the A75, Councillor Willie Scobie and Catherine Branson, as well as four submissions from the A77 Action Group. They are summarised in the clerk's note.

I found the submissions interesting. My reflection, as ever, is that this is very much a cross-cutting issue—it is about transport, the environment, tourism and the economy. The information that we received from the North Channel partnership about the implications and impact of not having an efficient system of getting into the port was particularly interesting.

The committee had planned to visit the affected communities, but we were unable to do that because Covid arrived and we all went virtual. I have always been interested in the issue. It is not just about the roads; it is about the implications of getting the right approach. We have to think about how best we can take forward the petition and whether we have gone as far as we can at this point.

I ask Finlay Carson to speak first and then committee members. If John Scott wants to comment, we can hear from him after that.

Finlay Carson (Galloway and West Dumfries) (Con): I first want to thank you, convener, for the way in which you have convened the committee over the years and for making it a friendly and welcoming forum for those who bring serious concerns to the Parliament. I wish you well for the future.

The Conveners Group met the First Minister on 13 November, way back in 2019. The First Minister said that she would respond to the petitions in writing and that she would use them as a case study to describe the process that the Government goes through to reach decisions. As we have heard, despite repeated requests for information, no response has yet been received. The lack of a response is not only disappointing but unacceptable, given that the First Minister singled out the petitions and committed to using them in a case study—if that is the process that the Government uses, it is no wonder that the people of the south of Scotland believe that they are no longer just the forgotten corner, but the ignored corner.

In June 2019, the committee suggested that there might be a round-table session with the Cabinet Secretary for Finance and the transport minister. However, that was delayed following a recommendation from the Government that it should take place after the Scottish Futures Trust meeting that was due to take place in Dumfries. That meeting was never held, and we are still waiting for the round table.

I urge the committee to continue the petitions and to drill down into why successive Scottish Governments have ignored the compelling case for upgrading the A75 and A77 as part of a strategic streamlining of transport infrastructure that links Scotland, England, Wales and Northern Ireland.

I must declare an interest because, right now, just by looking over my shoulder, I can see the increase in freight traffic since Brexit. The United Kingdom Government has identified those routes as priorities, and the recently published union connectivity review by Sir Peter Hendy clearly recommends upgrading the routes. We already have a priority list of upgrades and schemes that have been identified. It is time for the Scottish Government to stop ignoring the south of Scotland and start acting to implement those schemes. I urge the committee to continue the petitions.

The Convener: Thank you for those comments and for your kind words, Finlay.

Maurice Corry: I thank Finlay Carson for that summary and I am glad that John Scott is going to

speak later. I concur with what Finlay Carson has said. We should keep the petition live and include it in our legacy paper for our successor committee. I suggest that we seek an update from the Cabinet Secretary for Transport, Infrastructure and Connectivity on the strategic transport projects review 2.

I am loth to let the petition go. I have had similar experiences with the A83—the Rest and Be Thankful—on which I have been campaigning. I thank the campaign team and the petitioners for lodging the petitions with the Parliament. I know that they have been going on for a long time, but it is an important issue, particularly as the UK Government is currently reviewing the case for upgrading the A75 between Gretna and Stranraer and the A77 as part of the strategic review. If the UK Government makes progress on a connection to Northern Ireland by tunnel or bridge, it is important that we monitor the issue and keep pressure on the Scottish Government, as well as pushing the UK Government along.

I recommend that we continue the petitions.

David Torrance: I do not have anything to add to that, because my colleagues have covered it all. We will just have to wait and see what the strategic transport projects review offers the area. We should keep the petitions open until there is a definite answer on whether the roads will be upgraded.

Tom Mason: I agree with Finlay Carson and other members. We are short of the information that we asked for and we should not close the petitions until we get that information. Rational discussion and reviews that take the population along with them, with continual consultation, are essential, and we are not getting that. We should keep the petitions open until such consultation is complete.

Gail Ross: I do not have much to add, and I bow to the knowledge of the local members. I wish that there was an unlimited pot of money that we could use to upgrade all the roads in Scotland that desperately need it. We should keep the petitions open because, as you said in your opening comments, convener, the issue is much more than just a route: it is about economics, tourism and the people who live along the roads and have to use them all the time. We should push for an answer from the First Minister's office.

The Convener: John Scott, do you want to say anything?

John Scott: Yes, please, convener, and thank you for letting me speak.

I pay tribute to Finlay Carson and Brian Whittle for the work that they have done on the issue. They have done the heavy lifting in driving forward

some of this work in the Parliament. I also pay tribute to the Dual the A75 campaign group and the A77 Action Group. I should declare an interest: I live at Ballantrae, and I have driven on the A77 in and around Ayr, on many days of the week, for my whole life. So much work is needed on the road.

Finlay Carson is correct to say that the roads from Ayr to Stranraer and from Stranraer to Dumfries are the forgotten roads of south-west Scotland and need to be upgraded. As far as I can see, very little work is being done on the A77 apart from the emergency repair work at Glen App and Carlock, which is vital because the road is going to fall off the hill—a bit like the A83, which Maurice Corry mentioned.

If I may say so, convener, I suggest that the committee keeps the petitions open and seeks an update from the transport minister on the strategic transport projects review in the context of the work that is needed on the roads.

I welcome the United Kingdom Government's commitment to spend £20 million to jump-start connectivity across the UK, which was announced in the context of the interim report of Sir Peter Hendy's union connectivity review. There appears to be a willingness—at least on the part of the UK Government—to try to bring the roads up to the trunk road standard that is appropriate for the traffic that uses them. I very much support the committee's endeavours to get the roads brought up to standard and I again commend the work thus far of everyone who is involved in the petitions.

The Convener: Thank you. I think that the committee agrees that we want to continue our consideration of the petitions. People will always make an argument for an individual road to be upgraded, and of course others will say that they do not want spending on roads as opposed to other forms of transport, given the environmental question, but there are also serious environmental issues for people who live along the routes that we are talking about. When we asked the question of the First Minister, we were really looking for an understanding of how the Government connects what the transport minister is doing with activity to do with economic development, environmental issues and so on.

A lot of the evidence that we have received is about the impact on tourism and the opportunities that are lost because it takes a long time for lorries to get to the port and as a result of companies deciding to shift elsewhere. We also received evidence—from, I think, the North Channel partnership—about the fact that, although opportunities would be afforded by blockages at other ports as a result of Brexit, Cairnryan would not be able to benefit from those because of transport issues there.

10:15

It is not the case that all those issues can be dealt with by the Public Petitions Committee, but the Scottish Government needs to understand that it is not just an argument about whether to invest in this road or that road; there are interesting broader issues around the local economy in the south-west and how that economy is sustained.

We agree to continue the petitions, and we will include them in our legacy paper to the successor committee, with a view to receiving an update from the Cabinet Secretary for Transport, Infrastructure and Connectivity and a commitment to being reassured that there is an understanding that the issue must be considered in a joined-up context across Government.

I thank Finlay Carson and John Scott for their attendance and wish them all the best—it has been a pleasure to work with you.

Prescribed Drug Dependence and Withdrawal (PE1651)

The Convener: The next continued petition is PE1651, which was lodged by Marion Brown on behalf of Recovery and Renewal. The petition calls on the Scottish Government to take action to appropriately recognise and effectively support individuals who are affected and harmed by prescribed drug dependence and withdrawal.

Since the committee's most recent consideration of the petition, submissions have been received from the Cabinet Secretary for Health and Sport, Beverley Thorpe Thomson, Ann Kelly, Barry Haslam and Dr Peter Gordon. Three submissions have also been received from the petitioner.

The cabinet secretary advises that a short-life working group on prescription medicine dependence and withdrawal was established to take forward consideration of the petition and to make recommendations, and that draft recommendations were approved by her in December 2020. The Scottish Government intends to publish those draft recommendations as a consultation this month. Further correspondence that the committee has received from the Scottish Government this week confirms that the consultation is now open and that responses will be collected until 4 June.

The cabinet secretary advises that she is keen to hear views from a wide range of interested members of the public and officials, and that two virtual sessions will be run during the period for which the consultation is open.

I welcome Jackie Baillie, who is attending the meeting for our consideration of the petition. I invite her to comment, after which I will ask

committee members to reflect on what I consider to be significant progress by the Scottish Government on the issue.

Jackie Baillie (Dumbarton) (Lab): I thank the convener and the committee for allowing me to speak. As someone who has previously attended meetings of the committee, I was definitely not going to miss its final meeting of the session.

I would like to record my personal thanks to the convener for her service to the Parliament for the past 22 years. It seems like yesterday when we were both starting out in 1999. She has had a very distinguished political career. Good luck to Johann Lamont.

I ask the committee to keep the petition open and to include it in its legacy paper, although I know that that might not be the committee's instinct. I have been contacted by the petitioner, Marion Brown, and Ann Kelly, who is a constituent of mine. The reason for my asking the committee to keep the petition open is that the petitioners and their supporters have continuing concerns. In particular, they have concerns about the short-life working group that the Scottish Government set up to look at prescription medicine dependence. Even though they articulated those concerns directly to the working group, they felt that they had not been acknowledged or taken on board. They made the point to me that it has taken four years to get to this point, so they are nervous about continued progress.

There are concerns about the process, which, as I said, the petitioners have raised with the leadership. They also note that the language and emphasis of the Scottish Government and its advisers continue to be very much along the lines of the default position being to prescribe antidepressants without giving much explanation of the potential consequences of withdrawal. There does not seem to be awareness of the long-term problems that could be caused. They again made the point about the lack of practical support for people who are experiencing withdrawal—those issues have not been resolved.

As with the first petition, we will have a new cabinet secretary for health whatever the outcome of the election and we need to ensure that mental health stays very firmly near the top of the agenda. Continuing the petition would help with framing that, but, more importantly, it would mean that the petitioners do not need to start again with a problem that remains current and still needs to be addressed comprehensively by the Scottish Government.

I welcome the recommendations from the short-life working group, but I do not think that we are at the end of the process; it has just begun. Therefore, I would be enormously grateful if the

committee would consider continuing the petition into the next session of Parliament.

The Convener: I thank Jackie Baillie for her kind words. It is always useful to start nicely if you are going to make a case for a petition to be continued. I will be interested to hear what committee members feel about it.

I should underline something that is true for all petitions. There is a pressure to move petitions on because other petitioners are in a queue waiting to come in. It is a matter of balancing the rights of petitioners against the rights of new petitioners. That is the pressure that is operating and it becomes more intense as we get towards the end of a session. It is not a reflection of the significance of the individual petitions, but a kind of balanced judgement.

For what it is worth, even though the petitioners are concerned about the process, significant achievements have been made—the fact that the working group was established and has produced recommendations, which are out for consultation. If I thought that there was nowhere for the petitioners to go, I would be more concerned, but it is clear that it would be a question of saying that they should engage with the consultation and highlight their concerns and issues around it to make it a live consultation, rather than a tick-box exercise. There would be greater force to a new petition, if they are disappointed, having engaged actively with the process.

The Scottish Government is looking at the issue, as the petitioners wanted, even though there are flaws with the process. It is not a closed book to them, but something that they can engage with. Therefore, the judgment is whether the committee can add anything by holding on. The force of a new petition that said, "We engaged with this in good faith and nothing happened", would be very powerful. I emphasise to the petitioners that none of that is in any way a reflection of the seriousness with which we take their concerns about an area that they have highlighted to the committee over a period of time, which had probably not been given sufficient focus in the past.

I very much agree with Jackie Baillie that, whatever comes out of Covid, in the new session there has to be a strategy to deal with issues around mental health and how those are dealt with. If, as the petitioners contend, there has been inappropriate use of prescriptions or drugs that are not then monitored closely, that is a huge area that will develop in the next period. The decision to close would not in any way undermine the significance of what has been said. As I said, I will be interested to hear what committee members think, but I emphasise and underline that, even if we close the petition, the issue is clearly not going away. There is a vehicle for it to be pursued and

there are further options to come back to the Public Petitions Committee.

David Torrance: I thank the petitioner Marion Brown for bringing the petition to the committee. Progress has been made on it—not everything that the petitioner wants, but the short-life working group has made draft recommendations that are out for public consultation and the petitioner is able to feed into that consultation. I do not think that the committee can take it any further, but if there are specific issues that the petitioner is not happy with, that would be reflected better in a new petition in the new session of Parliament, which could highlight the issues and bring them forward to the committee.

Therefore, I am happy to close the petition under rule 15.7 of standing orders.

Tom Mason: It is a difficult one, but on balance I go with your thoughts, convener. We have achieved quite a bit with the petition. A consultation is going on and the petitioners can participate in it. Bearing in mind that the petitioners can always come back with a new petition if they are not satisfied with the results of the consultation process, on balance I am for closing the petition at this stage.

Gail Ross: I concur with what has been said. The right thing to do is to let the consultation run its course. The petitioners and anyone else who has been following the petition can feed into the consultation. As I have said before, and as we all know, the issue is extremely important, and I am loth to let the petition go but, as it stands, we have taken it as far as we can. It is in part due to the tenacity of the petitioners that we have got to this stage, so I thank them very much. There is the option of bringing back the petition in the new session if the conclusions of the consultation are not what the petitioners expected. That will be the right time to bring back the petition. Given what is happening and the work that is going on, I am content for us to close the petition.

Maurice Corry: I, too, know Marion Brown from my work as a regional MSP—I have had several meetings with her. I understand Jackie Baillie's point of view, and I know that she has had a lot to do with the petition, for which I thank her. I have concerns about the points that have been raised and about the long-term effects of prescribed drug dependence but, on balance, I feel that we have taken the petition as far as we reasonably can. At least we have achieved a consultation process, and that has to run its course. The petitioners can feed into that along with others who are concerned about the issue. After the public consultation, if Dr Brown or her team are unhappy with any points, they can lodge a new petition. We need to give the consultation process and the short-life working group a chance.

I concur with the issues that Dr Brown has raised with me in my time as a regional MSP, and I am concerned about the long-term effects. Nevertheless, I agree with my colleagues and with you, convener, that we should close the petition under rule 15.7 of standing orders, and on the basis that I have just set out.

The Convener: I am not sure whether Jackie Baillie wants to come back in, but there is a clear consensus on action. Is there anything that you want to flag up to us, Jackie?

Jackie Baillie: Yes, convener. I know when not to flog a dead horse, but let me make a couple of observations that the committee might want to raise with the Scottish Government, either now or in future. It has taken four years for a short-life working group to report. I hope that the Government will consult quickly on the recommendations and will actually start to change things, because there is no doubt that a huge number of people are already dependent on antidepressants. As you rightly pointed out, convener, as we emerge from the pandemic, the scale of the problem will only increase, and people's mental health will become a key consideration. I am grateful to the committee and I have no doubt that the petition might come back in the new session.

The Convener: We recognise your comment about how long it has taken to get to this point. Clearly, for people who are in the middle of the system and who feel that folk are not listening to them or recognising the scale of the problems that they face, that is even more of a concern.

I suggest that, in closing the petition, we write to the Cabinet Secretary for Health and Sport to say that we recognise the force of the arguments that have been made, that we are encouraging the petitioners and others to engage fully with the consultation, that the issue is a matter of urgency for them and others, and that we certainly hope that the issue will be a focus of work in the future. Clearly, we do not know who the cabinet secretary will be after the election, as that is up in the air—it could be Jackie Baillie.

Nevertheless, it would be useful to underline that the committee is not simply saying, "Okay, you have done that work, move on." It is a work in progress, and the committee's role is in relation to where that progress appears to be stalled and another petition coming in would be helpful in pushing it on again.

10:30

We are agreeing to close the petition and we recognise that the short-life working group is consulting on its recommendations. We urge the petitioners to engage with that process and we

recognise the scepticism about how that will be taken forward. In closing the petition we agree to write to the cabinet secretary to emphasise the concerns that people have highlighted.

We thank the petitioners for engaging thus far with the committee and recognising that it may be an issue that we want to come back to at a later stage. Their engagement with the consultation on recommendations is critical and their observations of the effectiveness of that consultation will be important. We thank the petitioners for all that they have done and continue to do to highlight these issues. I also thank Jackie Baillie, who I think will be here for another petition, so I will not say too many fond farewells yet.

Island Lifeline Ferry Ports (Parking Charges) (PE1722)

The Convener: The next continued petition is PE1722, on parking charges at island lifeline ferry ports, which was lodged by Dr Shiona Ruhemann on behalf of Iona and Mull community councils and others. The petition calls on the Scottish Government to island proof transport infrastructure to ensure that public bodies do not charge for parking in car parks at island ferry ports, which are essential lifeline services, and that any proposed island parking charges are subject to rigorous impact assessment.

Since the last consideration of the petition, responses have been received from the Minister for Energy, Connectivity and the Islands and the petitioners. In his response, the minister advises that he wrote to all six island strategic group authorities to get a full picture of the approaches that are being taken to parking at island ferry ports. Their responses can be found in our papers. Responses are currently outstanding from two councils.

In their response, the petitioners raise concerns that the minister's submission demonstrates the

"inconsistent understanding and responses of island councils to the shared challenges for island communities."

That important information has been provided to us. The force of the argument about ferries being lifeline services for local communities is important. Any further decisions will include a proper island communities impact assessment, which perhaps might give people reassurance, so the question is what we want to do with the petition. I am reassured that there has been a step back from the decision that triggered the petition in the first place and that the island communities impact assessment will ensure that people who are going to the mainland to work or to hospital or whatever are not disadvantaged in a way that they would not be if they were in a mainland community.

Tom Mason: We have got more information on the situation. It seems that we have taken the petition as far as we can. There will be an island communities impact assessment on any further parking charges if they are to be reconsidered. There are no charges as yet, so there is no problem that has to be reeled back. It is about making sure that other situations are properly assessed. We have done the best that we can at this stage and we should close the petition.

Gail Ross: There has been a certain element of reassurance from various councils. I note that there are two outstanding responses from councils and I believe that one of those is Highland Council, which is not surprising. I might be being cynical, but the issue will probably come up again. Given where we are with those reassurances—some of which are stronger than others—could there be a memorandum of understanding between the councils that have lifeline ferry ports and the Government or the Convention of Scottish Local Authorities, or could something else be considered?

Given the evidence that we have, I believe that we have taken matters as far as we can. I am happy to include the petition in the legacy report, or to close it and, in doing so, write back to the minister with recommendations. However, we are on our last day, and the obvious thing to do would be to close the petition. The petitioner is tenacious and determined, and I believe that, if the issue came up again in the future, it would be ready and waiting to come back to us, which would be a good idea, as would keeping an eye on other ferry ports around the country to make sure that the same thing does not happen anywhere else. I think that I have convinced myself that we can comfortably close the petition.

The Convener: Thank you. It was interesting to hear you work through the thought process there.

David Torrance: I do not have anything to add. The petition has achieved what the petitioner wanted. There is free parking, and if a local authority proposes to impose parking charges, it must do an island communities impact assessment beforehand, which provides a safeguard. Therefore, I am happy to close the petition under rule 15.7 of standing orders.

Maurice Corry: I have nothing further to add, and I agree with my colleagues regarding the process and the situation. I also note Gail Ross's interesting comment that the petitioner may come back if we close the petition. I think that we are in a position where we must close it, as there is no more that we can do. An island communities impact assessment can be done, and the majority of the island strategic group authorities have confirmed their position on free parking. Therefore,

I am happy for the petition to be closed under rule 15.7 of standing orders.

The Convener: I think that there is general agreement that we should close the petition. I suspect that we have all been on the journey that Gail Ross went on, which is understanding that it is an important issue, and that it is not completely nailed down that there will never be parking charges, but that there would be transparency around any decision making on the issue.

Given the need for an island communities impact assessment, we would hope that there would be recognition of how significant the matter is for particular island communities. There has been sufficient reassurance for us to close the petition. However, we are mindful of how important the issue is. The importance of understanding the impact on island communities of decisions that are made, and why they are being made, is reflected in some other petitions that we have had. However, on this particular issue, there has been progress. Therefore, we agree to close the petition under rule 15.7, but we thank the petitioners for highlighting the important issues, and remind them that it is possible to return with another petition in the new session if those commitments do not prove to be as strong as we believe them to be. I thank the petitioners for their engagement with the committee.

Care Homes (Designated Visitors) (PE1841)

The Convener: The final continued petition on our agenda is PE1841, which was lodged by Natasha Hamilton on behalf of the Care Home Relatives Scotland group. The petition calls on the Scottish Government to allow a designated visitor into care homes to support loved ones. We welcome Jackie Baillie back for our consideration of the petition.

Since the last consideration of the petition, responses have been received from the Cabinet Secretary for Health and Sport, the national clinical director, the Care Home Relatives Scotland group, the petitioner and numerous other stakeholders who have an interest in the petition.

In her submission, the cabinet secretary provided the committee with a copy of new guidance on care home visits, which was issued on 24 February 2021. The guidance recommends that care homes put in place the necessary arrangements to support safe, meaningful contact for up to two designated visitors per resident, twice a week.

The national clinical director explains that, with the multiple levels of safeguards and protections in place, he is confident that safe, indoor visiting can resume. He further explains that everyone living in

adult care homes, no matter their age, health, or otherwise, can have meaningful contact with their families and loved ones.

In its submission of 15 March, the Care Home Relatives Scotland group advises that, in its recent survey, 58.4 per cent of respondents reported that meaningful visits had started as per the 24 February guidelines, whereas 41.5 per cent answered that they had not. The Care Home Relatives Scotland group states that its survey results demonstrate the

“inequality that is happening to care home residents and their families across the country despite having guidance”.

The petitioner, in her personal submission, has explained how the restrictions have personally affected her and her family as well as highlighting more generally the negative effect that they have had on people living in care homes. She states that there has been

“So much focus on keeping people like my relative safe but who knows at what detrimental effect”.

I will invite Jackie Baillie to speak in a moment. It is a difficult and emotive issue. I have heard very strongly from the petitioners that they do not want us to feel sorry but want us to act; everyone always says how difficult and problematic the issue is and how sorry they feel, but I understand that the petitioners want action.

The petitioners also want the gap between what the guidance says and what is happening to be closed. Their argument is that that would involve legislation. Parliament is closing for the campaign, so there is no prospect of legislation in the short term. The fastest way to get a commitment to legislation would be by pressing political parties to make it a manifesto commitment. Regardless of whether we decide to continue the petition or close it, the decisions and immediate pressure will come from elsewhere—that has to be the case because it is so immediate.

The figures in the submission on people who describe their contact as not matching up to the guidance are very powerful.

Jackie Baillie: Thank you, convener, for giving me a second opportunity to speak this morning—I promise that I will not go on too long and test your patience.

Having failed in my praise for the convener earlier, I will turn to Gail Ross, the deputy convener, who is also standing down. I regret that, because Gail Ross is a newer member of the Parliament who has made a great contribution in her time here. I wish her well for the future.

I am grateful to the petitioner, the Care Home Relatives Scotland group and the committee for their work on the petition. That pressure has led to the revised guidance. As you rightly said,

convener, the difference between the guidance and the reality in many areas across Scotland is stark. Relatives are at a loss to understand when, in practice, they will be able to see their loved ones.

I know relatives with loved ones in local care homes who have struggled during the pandemic—there is no doubt about that. We know that care homes have been at the epicentre of the pandemic, but we also know that the consequences for care home residents have been stark—many of them have lost their lives and those who, thankfully, have not have been deprived of contact with their relatives and loved ones, which has had an impact on their health and wellbeing and on the wellbeing of their relatives. I know that the committee recognises all of that.

A few days ago, I was contacted by constituents who asked me to come along and support the petition because they are concerned about the possibility of a third wave of coronavirus. I hope that the roll-out of the vaccination programme means that that never happens, but their concern is so great that they are very keen to keep the petition open, first on the basis of the inconsistencies between the guidance and its implementation and, secondly, because of a genuine concern about the future.

Convener, you have talked about the immediate pressure—the issue is very much live. On that basis, I ask the committee to consider keeping the petition open and putting it in the legacy paper to tide us over this period while the pressure is still on.

10:45

Gail Ross: I want to thank our co-opted member, Jackie Baillie, for her kind words. She has contributed so much on many petitions, even in the short time that I have been here, and her advice and guidance have been really valuable. I also thank her for her contribution today.

We need to be absolutely honest with ourselves and the petitioners. We should not give them false hope that keeping the petition open will mean that legislation will definitely follow. Having taken legislation through the Parliament, we know that it can take quite a while, as it has to go through many different processes. We need to ask ourselves what the value is of keeping the petition open. We can put it in the legacy paper, but we need to think about when it is likely to come up again in the next session. Given the new petitions that will come through and the other petitions that we have kept open, there is a chance that we, or rather the successor committee—obviously, I do not include myself in that—might not see it until September. Given where we are with the

pandemic and the vaccine programme and given the guidance that has been issued, come September we will probably have got beyond what is happening now.

However, I take on board what Jackie Baillie said about a third wave. Touch wood, the vaccine programme is getting ahead of that situation now. Therefore, I hope that the guidance would be enough but, as you say, that stark figure of nearly 42 per cent of care homes not implementing the guidance is quite concerning. I can see why care homes are quite risk averse, given what has happened in the past. None of us wants a return to those horrible dark days. However, there is the other side to the picture, which the petitioners have put forward extremely well, about the mental health and wellbeing of not just the people in the homes but the families who are unable to see them.

I am quite conflicted. I want to show the petitioners that we are taking this as seriously as we can but that we are limited in what we can do as the Public Petitions Committee. Your suggestion, convener, of pushing the parties to include the issue in their manifestos, in order to get some action on it as soon as the election is concluded in May, is excellent. That would bring it forward much more quickly than the committee could.

Given our limitations, I am minded to close the petition under rule 15.7 of standing orders but to make these other recommendations to the petitioners about where they could go to try to get the legislation in place quicker than we could possibly push for it. I will wait to hear what other committee members feel about it.

Maurice Corry: I thank Jackie Baillie for her input—there are always some wise words spoken. It is a very difficult question. I agree with my colleague Gail Ross that we are between a rock and a hard place. I am on the COVID-19 Committee and these sorts of issues come up every week. The latest from the national clinical director is that it is being left to health boards to advise on access to care homes for relatives and visitors in their areas, because they know their areas best. I note the figure that around 42 per cent of care homes are not, or do not seem to be, implementing the guidance. That concerns me.

I am reluctant to let the petition go. On the other hand, one has to be realistic. There is a move by the Scottish Government to let the local areas decide on how they implement the guidance. However, if it is not being implemented, there is a gap, and that is what is concerning the petitioners. I agree with the convener that the quickest way through this is to have the parties put it in their manifestos. That is an excellent idea and should get a quicker reaction. The issue is certainly very

important and we discuss it every week at the COVID-19 Committee to try to get some movement on it. We are mindful of the concerns.

At this stage, if there is any dissatisfaction among the petitioners, they can raise another petition; that would take a bit more time, given that there will be a new Parliament. As I have said, I am torn desperately on this one, because, from our discussions in the COVID-19 Committee, I am not entirely happy that the Scottish Government's guidance on implementation is absolutely sound; however, again, we are steered by professional advice on the whole matter of infection, during what is a very serious pandemic.

I think that, on balance, I have to say that we should close the petition under rule 15.7 of standing orders. Perhaps we could write strongly to the Scottish Government, to make sure that the guidance on visiting is given high priority. The issue is very current, irrespective of manifestos, but I think that it needs to be kept on the boil. That is certainly the feeling of the COVID-19 Committee. On that basis, I ask you to do that.

The Convener: Will the COVID-19 Committee continue to meet?

Maurice Corry: Until 5 May, we will meet only in emergency. The committee is still there, but it is slimmed down. It will meet only if emergency regulations and Scottish statutory instruments need to be approved.

The Convener: It may be that, if we were agreeing to write to the cabinet secretary, we could write to the COVID-19 Committee and say that this is an urgent issue that the committee might want to be aware of, too.

David Torrance: As do my colleagues, I think that the issue is very difficult; however, I do not think that the committee can take the petition any further because by the time that the new petitions committee meets, whoever is on that committee will probably not see the petition for five or six months, and we know how long it takes to get legislation through the Parliament, in some cases.

I genuinely do not think that we can take it any further. We should close it under rule 15.7 of standing orders and, if the petitioners are not happy with the progress that has been made, they can bring a new petition to the Parliament in the new session.

Tom Mason: On balance, I think that we will have to close the petition. The situation is changing month by month as we go forward, and any legislation on the matter would be made for the situation at a point in time, so I do not think that that will be a solution. Strong enforcement of the guidance is what I think is necessary. If getting some action on that can be achieved via the party

manifestos, that might be the way to do it. I think that it would be right to write, if we can, to the minister, to make sure that the current action and enforcement takes place. However, the committee cannot do much at this stage and I think that closing the petition is our only option.

Maurice Corry: Further to the point about the COVID-19 Committee, it is very important that you write to the convener, Donald Cameron, on the point that we discussed. That would be of benefit and a quick way to try to get some resolution. The matter can then be raised at the COVID-19 Committee as and when that is convenient. It may be considered an urgent question; if so, the committee could be convened quite readily.

The Convener: Thank you. People have wrestled with this petition. I go back to my earlier point about the frustration that the petitioners expressed. Everybody agreed that there was a terrible problem and was worried for them, and they accepted people's concern, but they were very clear that what they wanted was action. We need to be honest in return that we are gravely concerned that the gap between what the guidance says and how people are experiencing it is massive, with consequences for them and their loved ones, but that it will not be resolved by the petition sitting with the Public Petitions Committee.

Given the urgency of what the petitioners want to achieve and that their proposed solution is legislation, the matter will need to be decided by others. I understand that the current policy makers—the national clinical director and so on—are reviewing the guidance weekly. When there is a gap between the guidance and what people are telling them is happening, what do they say and to what extent are the petitioners engaged with that? I know that it is a very active campaign and they are making their views strongly felt. The situation is being reviewed weekly and pressure can be brought to bear there.

If the implementation of the guidance is not working, as would seem to be the case, we should write to the COVID-19 Committee and the cabinet secretary to say that these are the concerns of the petitioners and it could be on our books for six months. In those six months, the world could be completely and utterly transformed—I certainly hope that it will be—but the issue needs to be resolved as a matter of urgency. I agree with members that we want to close the petition because the petitioners have been clear that what they want is action. We cannot do that through this committee, but we can write to the cabinet secretary and underline in the strongest terms that that is what is required.

My observation to the campaigners is that the people who need to answer the question of how we address this as a matter of urgency are those

seeking election in the next six weeks. The petition has been caught up in the fact that there is an election. There would have been other avenues open to us if the Parliament was not rising this afternoon.

Do members agree that we should close the petition under rule 15.7? We recognise that it is a crisis for families that has not been resolved and we will write to the cabinet secretary and the COVID-19 Committee emphasising that simply saying that there is guidance does not address the issue. The issue is that what is in the guidance is not what people are experiencing and it is something that is absolutely fundamental to people's lives. In terms of policy, if there were a new petition, the Public Petitions Committee would be able to agree in terms.

Maurice Corry wants to come back in and then I will give Jackie Baillie a last chance to say something, before we make our final decision.

Maurice Corry: I will be very quick. You talk about the cabinet secretary and that is fine, but in the case of the COVID-19 Committee it would also be worth writing to Michael Russell, because he is the cabinet secretary that the committee works with. His remit is constitution and legislation, so it is important to bring it to his attention.

The Convener: We can certainly copy him in to the correspondence. That would make sense.

Maurice Corry: Yes, exactly, if you would not mind.

Jackie Baillie: Although I am disappointed by the committee's conclusions on closing the petition, I understand and support the actions that you will take in writing to the COVID-19 Committee and the cabinet secretary. The issue is one of speed and what is happening on the ground just now. I am happy to commit the Labour Party to including the issue in its manifesto, but the reality is that that kind of process waits until after the election when people see the result. If it involves legislation, that takes time, in and of itself. My plea would be that, if people experience a discrepancy on the ground, they should get in touch with their MSPs or their local candidates and raise it as an issue during the election.

The Convener: Thank you. We hope that, because the issue has been aired and commented on in the committee, it has been heard publicly. If there were a request for it, the committee would be willing to make a statement that it recognises that this is a matter of urgency and that none of the options that are open to the committee respond to that urgency. The committee's fundamental problem is that it cannot respond because of where we are in the parliamentary cycle.

11:00

We agree that what the petitioners ask for is not warm words, but more action. The Public Petitions Committee cannot deliver that action, but we are clear that we cannot be in a position in which we continue to see a huge gap between people's experience and what the guidance says. The matter is being looked at closely every week and, although we do not need to tell the petitioners what to do, since they have run such an effective campaign and they will do this anyway, we could highlight as a matter of urgency that they should keep the pressure up on those who make the decisions while the election process goes on. Pressure also needs to be put on individual candidates and parties to make a commitment and understand that the matter cannot wait, because of the direct consequences in real time.

We agree to close the petition with all the reservations about why we had to make that decision. However, I have indicated that we will want to write to thank the petitioners, to say that we wish that they did not have to be in that position and that we hope that matters are resolved urgently. It is my great hope that they will partly be resolved by the fact that, with any luck, we are moving into a safer world than we have been in for the past year.

I thank Jackie Baillie for her attendance—she was the equivalent of the fifth Beatle. I am appreciative of all the work that she has done in helping to inform the work of the Public Petitions Committee.

This is the last Public Petitions Committee meeting of the session, my last Public Petitions Committee meeting and my last time as a convener or member of a parliamentary committee. I want to underline my personal gratitude for the opportunity to serve. Whatever has happened in recent days, the beating heart of the Parliament has to be the committee process, because it brings people together. People can breach the walls of the Parliament, and if we are not doing that in committee, we are not doing the right thing.

It has been a particular privilege for me to convene the Public Petitions Committee because it is the only committee in the Parliament where the agenda is entirely determined by members of the public. I stand in awe of all the petitioners. They have brought to us issues that they care about, which they would much rather not have had to petition on, because they represent personal trauma and sadness. All petitioners have displayed great courage, determination, persistence and focus, all of which have informed the work of the Public Petitions Committee over the session. It has been a privilege to be able to be a part of that. Whatever legacy paper we write,

we will want to underline the importance of the Public Petitions Committee attempting to be as responsive and open as possible to the people of Scotland, to ensure that their issues are heard as they might not be heard anywhere else.

I thank my fellow committee members. It has been a particular challenge in the recent period during which meetings have been virtual. Who knew that wi-fi matters so much when you are trying to make a political decision? I am appreciative of all the work of all committee members I have dealt with in the past, but the particular group of members that we have had over the past year has been wonderful to work with.

I offer Gail Ross and Tom Mason every good wish as they depart, along with me, into whatever the world brings next. It has been a great privilege to work with you. I wish Maurice Corry and David Torrance all the best in the elections. You understand that that does not necessarily mean that I wish you electoral success, but I know that if you are returned you will bring the same energy as you have done in this committee.

I thank the broadcasting team, who have managed to pull us together—it has been like herding cats. It has done a great job of making meetings a professional process, even though we are all in different places.

Finally, I thank the clerks, who do immense amounts of work not only to make the committee meetings work and keep us informed in a way that means that we understand and appreciate the key issues, but to engage with petitioners. That engagement with petitioners about the issues that matter to them, and bringing them into a process in such a way that they can participate really well, is the most fundamental thing of all. Most of that work is hidden, but that does not make it any less difficult or challenging. Many petitioners have told me that the clerks have dealt with them sensitively, and the importance of the clerks' professionalism to the effectiveness of the committee has been beyond measure over the last period.

Tom Mason: As you said, convener, I am leaving the committee in a very short time. The success of the committee—it has, undoubtedly, been a success—has been thanks in no small part to your very balanced and considerate convenership. You have always encouraged members to participate and allowed very balanced discussion to take place. It has been a privilege to serve on the committee. I am sure that the rest of the committee will agree.

The Convener: Thank you very much. I have never been accused of being balanced in the past, so that is a great compliment.

Maurice Corry: Thank you, convener, for all your work. I reiterate what my colleague Tom Mason said. The two periods that I have been on the committee have been thoroughly enjoyable; I have enjoyed it all since the start.

I, too, thank the clerks and support teams for the immense work that they do, which has been wonderful. It is such a special committee because it is, as we know, unique. Other parts of the world—such as the Government of Western Australia—have been asking to see how we work and our systems. As has been said, the committee reflects the words, “the people’s Parliament”; it really is an emphatic message.

Thank you once again, Johann. May God be with you, and all best wishes to you and your family in your retirement.

The Convener: Thank you very much. I will call David Torrance and then I will give the deputy convener the last word before we move into private session. That is much more indulgent than I usually am as a committee convener.

David Torrance: Thank you very much, convener. It has been a privilege to be on the committee once again in this parliamentary session. The committee has worked really well, which is down to the convenership. We have all been united in the decisions that we have made, unlike some other committees in the Parliament. The guidance and help that you have given every one of us have been excellent. Thank you very much to you, to Gail, who is also retiring, and to Tom. I hope that you have an enjoyable and relaxing life after this. I am sure that every one of you will be called up to do something in your communities in the future, which you will not refuse to do. Thank you very much—it has been a privilege to work with every one of you.

The Convener: Thank you very much, David. I appreciate your very kind words. We go finally to Gail, our deputy convener.

Gail Ross: It has been an absolute privilege to serve on the committee. The subjects and information that we have had before us mean that I have learned about many different things that I had never even considered, and I have been so impressed by the determination and commitment with which some petitioners raised their issues. I thank each and every one of them. You are absolutely right that, without them, there is no petitions committee.

I have always said this behind the scenes and I will now say it in public: we are the best committee in the Parliament. I thoroughly believe that. We have worked so well together.

Thank you, convener, for including me in a lot of the background work. I hope that I have been the support that you have needed.

On a closing note, I thank all the clerks, broadcasting and everyone else who has made this relatively straightforward—in my eyes, it has been that. Perhaps in the background it has not been so straightforward, but you have made it work very well and we are very grateful.

I will miss you all; do not be strangers and good luck for the future. Thank you.

The Convener: Thank you very much, Gail. We look forward to seeing what the new Public Petitions Committee does. If it is as focused on what the petitioners are trying to raise as we have been in this session, I am sure that it will do a powerful job of work. Thank you very much. I remind colleagues to join the private session on Teams.

11:10

Meeting continued in private until 11:17.

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