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Scottish Parliament

Wednesday 29 September 2021

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

Portfolio Question Time

Health and Social Care

The Deputy Presiding Officer (Annabelle Ewing): Good afternoon, colleagues. I remind members about the Covid-related measures that are in place. Face coverings should be worn when moving around the chamber and across the Holyrood campus.

The first item of business is portfolio questions, and the first theme is health and social care. If a member wishes to ask a supplementary, they should press their request-to-speak button or enter the letter R in the chat function during the relevant question. In order to get in as many members as possible, I ask for succinct questions, and answers to match.

Covid-19 (Winter Service Provision)

1. Claire Baker (Mid Scotland and Fife) (Lab): To ask the Scottish Government how it is supporting national health service boards to mitigate the impact of Covid-19 on service provision over the winter. (S6O-00201)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): As has been widely reported, our health and care system is under extreme pressure, which has been exacerbated by the onset of the pandemic. Of course, we are still firmly in the midst of that pandemic. Those unprecedented challenges are resulting in staffing shortages and high demand in hours and out of hours, and in a level of delayed discharge, and as well as that there has been a recent increase in Covid cases, which is now—I am thankful—on a downward trajectory.

We expect that this winter will be the most challenging that we have ever faced. To mitigate that, we are working closely with partners to ensure that measures are put in place to improve flow and increase capacity across the system. We are also promoting alternative pathways to ensure that patients receive the care that they require.

This year, we have already provided in excess of £1 billion to meet Covid pressures in health and social care, including £80 million to address treatment backlogs; additional investment—as members know—to support the Scottish Ambulance Service; and £8 million for staff

wellbeing. I will update Parliament shortly on significant further funding that will be provided to support our national health service and social care system.

Claire Baker: Earlier this month, NHS Fife postponed all non-urgent surgery and some out-patient appointments, and said that it is facing pressures

“unlike anything ... experienced during”

its

“response to the pandemic.”

Hospitals are already seeing more people turning up with Covid-related and non-Covid-related conditions than they would normally see at the height of winter, but it is still only September. When will the winter preparedness plan be published? What assurances can the cabinet secretary give to NHS staff and patients that the situation in Fife will not deteriorate further?

Humza Yousaf: I assure Claire Baker that I regularly meet NHS boards up and down the country, and that my officials speak to them regularly, so we are very aware of the pressures that not only NHS Fife, but NHS boards across the country, are under.

We are not sitting on our hands. We have already invested, and we are investing, to address not just Covid pressures, but non-Covid pressures, for which I announced significant investment over the summer.

As I said in answer to the member’s first question, I will shortly lay out to Parliament additional funding announcements. We are not spending time on creating plans just for the sake of it; we are investing in services across the entire NHS system. I hope to give more details later this week, and will focus in particular on a whole-systems approach and on the social care side, which we know can help us with delayed discharge.

On Claire Baker’s last question, I promise that things will get better, but I think that this will be the most challenging winter that the NHS has ever faced. We will take action, as we have been doing, and we will do our best to mitigate the significant pressures.

Sue Webber (Lothian) (Con): In January, Professor Griffin from the Royal College of Surgeons of Edinburgh called for roads and pavements to be gritted properly, because icy conditions would lead to accidents that the NHS does not have capacity to deal with. Although that was in the context of reducing admissions to hospitals to prevent Covid infections, the same case can now be made in order to reduce

emergency admissions, given the current pressures that we face.

Scotland's NHS is in crisis; today the cabinet secretary extended the state of emergency in the NHS until March 2022. Can he guarantee that all council areas across Scotland will be provided with resources to ensure that roads and pavements are properly gritted this winter, in order to prevent further strain being placed on our NHS?

Humza Yousaf: That is a good question. I assure Ms Webber that I am working on resilience in relation to that very issue across Government and across portfolios, with my colleagues. As she rightly points out, it is vital that when we come to the season of slips, trips and falls, our local authorities are properly resourced to ensure that roads are gritted. I discussed that with the chief medical officer just this morning, and he gave me an absolute assurance that he is also having conversations with local partners.

Covid-19 (Allergic Reaction to Vaccine)

2. Meghan Gallacher (Central Scotland) (Con): To ask the Scottish Government how many systemic reaction specialists there are who can support people who have had an allergic reaction to their first Covid-19 vaccine. (S6O-00202)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): The Government does not hold centrally information on how many systemic reaction specialists are available, but that information would be available at national health service board level.

Allergy to food and medicine is not uncommon and those types of conditions are treated by a variety of clinicians in primary and secondary care. NHS health boards lead on local delivery of the vaccination programme and are well placed to support people who have concerns about allergic reactions, as well as those who have experienced allergic reactions.

It is important that people discuss their allergies and disclose any previous serious allergic reactions or anaphylaxis to their vaccinator. The vaccinators are trained to deal with allergic reactions and treat them immediately. If a person has concerns about receiving their first Covid-19 vaccination because of a potential allergy, they should ask their general practitioner or clinician for advice.

Meghan Gallacher: My constituent, Craig, contacted me after experiencing a severe systemic allergic reaction to his first vaccination. He was referred to a specialist, but was advised that he was going to be put on an 18-month waiting list.

That is not an isolated case and the situation is causing concern for people who are eager to see a specialist, especially as Covid vaccination passports will come into force this Friday. I have checked the Scottish Government website this afternoon, and the guidance is still not clear for people who cannot be vaccinated for medical reasons. How will the Scottish Government tackle that backlog? How can the cabinet secretary reassure my constituent that he will not be excluded from any venue, such as a nightclub or football stadium, because he cannot produce a vaccination passport?

Humza Yousaf: I thank Meghan Gallacher for raising the issue of her constituent, Craig. I am more than happy for her to write to me about the specifics of his case.

As members might imagine, I have spoken extensively to clinicians about the issue of allergic reactions to the Covid vaccine. There have been cases in which people have had an adverse reaction when they were given their first dose, but were able successfully to complete their second dose once they had had appropriate clinical advice or, in some cases, had had a change of vaccine, if that was necessary.

I am as concerned as Meghan Gallacher is about the circumstances that she mentioned. In answer to the second part of her question, a medical exemption process will be in place for anybody who is clinically unable to have the vaccine—although those numbers should be very small.

Martin Whitfield (South Scotland) (Lab): With regard to the answer to the second part of the question, will the medical exemption be available by 5 am on Friday?

Humza Yousaf: Absolutely. People who have been identified by health boards as being unable to complete vaccination for good clinical reasons—again, I note that the numbers are very small—will have received notice by the time the scheme comes into effect. In fact, letters will be going out to them very shortly.

Only a very small number of people cannot complete both doses of the vaccine. As I mentioned in my answer to Meghan Gallacher, there are instances of people who have had quite severe allergic reactions to their first dose being able, through clinical guidance, to receive a second dose successfully.

Leukaemia (Awareness)

3. Katy Clark (West Scotland) (Lab): To ask the Scottish Government what it is doing to raise awareness among the public and healthcare professionals of the symptoms of leukaemia. (S6O-00203)

The Minister for Public Health, Women's Health and Sport (Maree Todd): The detect cancer early programme works collaboratively with blood cancer charities and aims to raise awareness of possible symptoms, including leukaemia symptoms, to ensure that people present timeously. The national health service recovery plan has committed a further £20 million to the programme.

The refresh of "Scottish Referral Guidelines for Suspected Cancer", which was published in January 2019, supports primary care clinicians to recognise suspicious cancer symptoms, including leukaemia symptoms, and to put the patient on the right pathway at the right time.

Additionally, we continue to support Cancer Research UK to work with health professionals to raise awareness of symptoms and to promote referral best practice.

Katy Clark: According to Leukaemia Care, patients with leukaemia have a significantly higher rate of emergency diagnosis than those with other forms of cancer, which means that people only find out that they have leukaemia when they present with an emergency. The problem is also being exacerbated by the pandemic.

What can the Government do to increase awareness, given that people are delaying seeing general practitioners, and that there are backlogs in the health service?

Maree Todd: One of the challenges with leukaemia is the non-specific range of symptoms with which it can present. Often, people think that they have a virus, rather than leukaemia. Therefore, Katy Clark is absolutely right that we need to raise awareness and to encourage people who are feeling unwell and not improving to present at their GP.

Members will remember that at the beginning of the pandemic there was, among the public, real reluctance to attend healthcare settings. However, the number of urgent cancer referrals is now higher than it was pre-Covid, so we are catching up on the backlog.

As Katy Clark said, the NHS is experiencing significant and sustained pressures that are being immeasurably exacerbated by the Covid-19 pandemic. However, cancer treatment and diagnosis have been prioritised throughout our response to the pandemic, and we have invested an extra £10 million to support cancer services during and beyond the pandemic, focusing on diagnostics and staffing.

We have, in order specifically to support people who require radiology tests, invested £5.6 million to support additional mobile magnetic resonance imaging scanners and three computed

tomography scanners, which are operational throughout Scotland, and which should speed up access to diagnostics tests for earlier diagnosis.

General Practitioners (Hard-to-reach Groups)

4. Audrey Nicoll (Aberdeen South and North Kincardine) (SNP): To ask the Scottish Government what action it is taking to support general practitioners and other healthcare professionals to engage with traditionally hard-to-reach groups. (S6O-00204)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): All primary care professionals have a duty of care in relation to reducing health inequalities. To support that duty, we have established a health inequalities in primary care short-life working group, drawing on a wide range of experts, to identify and implement improvements in how primary care supports vulnerable people.

Our investment in community links workers is already helping vulnerable people to address the issues that affect their health and wellbeing, and the general practitioner contract will allow for longer consultations for patients who have more complex needs.

Audrey Nicoll: The long-standing challenge of the unworried unwell, whereby people who are impacted by poverty, unemployment and austerity are less engaged with primary healthcare services, will be further exacerbated by the United Kingdom Government's choice to end universal credit, which is the biggest overnight cut to social security since world war two.

What reassurance can be given that the Scottish Government is doing everything that it can do to ensure that those who are most vulnerable to health inattention access the healthcare services that they need?

Humza Yousaf: I thank Audrey Nicoll for her question, which is on an incredibly important issue. In last night's debate in the chamber, most of the parties came together to condemn the unforgivable decision by the UK Government to cut universal credit. That decision will, with the end of furlough, the hike in national insurance contributions and rising energy and food prices, create a perfect storm. The Scottish Government estimates that the cut will push 60,000 people—including 20,000 children—in Scotland into poverty.

We are acutely aware of the need of people who are impacted by poverty, unemployment and austerity to be fully supported by our primary healthcare services. That is why the Scottish Government is providing funding to support 150 welfare advice and health partnerships, in addition

to the investment in community links workers that I spoke about.

More broadly, in October last year, a working group was established to identify service improvements and actions specifically for primary care in order to help to reduce health inequalities.

It is not too late for the UK Government to change its mind and reverse the cut. As Audrey Nicoll rightly said, it would be the biggest cut since the welfare system began, so I hope that the UK Government sees sense and changes its mind.

Sandesh Gulhane (Glasgow) (Con): Worrying new figures show that 17 per cent of adults in Scotland are current smokers and that more than that vape, which contributes to 16 per cent of all Scottish deaths. That is a hard-to-reach group. Currently, pharmacists and third sector organisations are offering replacement therapy and counselling. What new measures or interventions will the Government consider to help in the fight to get people to stop smoking?

Humza Yousaf: I am pleased that we have a good record on smoking cessation in Scotland. Of course, we have taken important and bold measures in this Parliament, under this Government, to help with that.

Sandesh Gulhane is, of course, right that smoking is one of the biggest causes of preventable illness and death. I am happy to get more detail and to write to him about the extensive measures that we are taking. I hope that we can, in turn, count on his support when we ask his party in the United Kingdom Government to reverse the unforgivable and damaging cut to universal credit.

The Deputy Presiding Officer: Question 5 was not lodged.

General Practitioner Out-of-hours Service (Inverclyde)

6. Stuart McMillan (Greenock and Inverclyde) (SNP): To ask the Scottish Government whether it will provide an update on any plans to reintroduce a full general practitioner out-of-hours service in Inverclyde. (S6O-00206)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): As the member is aware, in February 2020, Greater Glasgow and Clyde NHS Board made the necessary decision to implement business continuity measures for its out-of-hours service to ensure a safe and sustainable service for patients and staff.

Since May, the board has reinstated a part-time Saturday service at Inverclyde with the support of local GPs and approved medical practitioners. The board is due to submit an update paper on the future of the whole service later this year. That will be subject to consideration by my officials, on

receipt of it, in terms of supporting the service moving forward, including the future of the service in Inverclyde.

Stuart McMillan: Although I welcome the reintroduction of the Saturday GP out-of-hours service at the Inverclyde royal hospital, until that service is extended to other days of the week, many of my constituents will continue to be sent to the Royal Alexandra hospital in Paisley and the Vale of Leven district general hospital for that service. I have heard of constituents being sent to the Vale of Leven out-of-hours service just to be sent back to the RAH. Does the cabinet secretary agree that plans to reintroduce a fully operational GP out-of-hours service in Inverclyde must be accelerated and that that would have the added benefit of supporting the national health service recovery ahead of winter?

Humza Yousaf: Yes, of course I agree. No one is sitting idly by. I give Stuart McMillan an absolute assurance that, when I speak to NHS Greater Glasgow and Clyde, I am told that it is working at pace on the matter. Although I said that we expect to receive an update paper later this year, I will go back to the board to ask whether that can be sped up.

The member will understand the enormous pressure that we are under. However, he is, of course, right in saying that an out-of-hours service would help with some of that pressure. I am happy to see whether that can be accelerated in any way, shape or form.

Craig Hoy (South Scotland) (Con): The cabinet secretary said recently that the Government is on track to meet its target of recruiting 800 additional GPs by 2027. Given that one third of GPs say that they are considering early retirement, what number of GPs does the Government expect to leave the service between now and 2027? What number of new practitioners does the Government plan to recruit into GP practices over the same period? Will the 800 additional GPs be full-time equivalent posts?

Humza Yousaf: We are not simply looking at forecasts of how many GPs might leave the profession and not doing anything about that. We are keen to work with the likes of the British Medical Association and with the United Kingdom Government on issues such as pension disincentives, to see what we can do to prevent our losing those GPs. I recently had a good discussion with the BMA, the Royal College of General Practitioners and the Academy of Medical Royal Colleges and Faculties in Scotland about the measures that the Scottish Government could introduce that would be helpful in retaining GPs.

In fairness to the UK Government, when I brought up the issue with Sajid Javid, the

Secretary of State for Health and Social Care, he said that he would go away and look at the matter again.

Yes, we will invest in an additional 800 GPs, but we will also work to retain the current workforce as best we possibly can.

General Practitioner Recruitment (Borders)

7. Rachael Hamilton (Etrick, Roxburgh and Berwickshire) (Con): To ask the Scottish Government what action it is taking to recruit general practitioners in the Borders. (S6O-00207)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): Since 2015, the number of GPs in the Borders has increased and is above the Scottish average for the population size.

Since the GP contract was introduced, in 2018, we have invested £7.3 million in developing multidisciplinary teams in the Borders to make being a GP there—and across Scotland—more attractive and sustainable.

We are also implementing Sir Lewis Ritchie's report on rural general practice, which sets out wide-ranging recommendations to bolster the stability of rural general practice. That will be vital in achieving our commitment to increase our GP workforce by 800 by 2027.

Rachael Hamilton: Coldingham GP practice in my constituency recently closed because of a lack of rural GPs. The Scottish Government is failing people who live in rural areas because of its lack of workplace planning and an inability to recruit GPs to local areas. Can the cabinet secretary tell me how many of the 230 GPs who have already been recruited, out of the target 800 GPs to be recruited by 2027, have taken up rural posts?

Humza Yousaf: I will get Rachael Hamilton that information on the distribution of the additional GPs who have been recruited. As I said to her a moment ago—and as I have said on previous occasions—we are on track to meet that target of 800.

I am aware of the issues around Coldingham surgery. The NHS Borders chief executive has made remarks, which I hope gave some reassurance to the many patients who have been affected, on the alternative arrangements that are in place whereby services are being provided by Eyemouth surgery. That is a matter for the local national health service board.

As I said in my first answer, we are implementing the recommendations of Sir Lewis Ritchie's report and review of rural general practice, and I am happy to provide in writing the specific details that Ms Hamilton has asked for.

District Nurse Roles (NHS Tayside)

8. Joe FitzPatrick (Dundee City West) (SNP): To ask the Scottish Government what discussions it has had with NHS Tayside regarding the grading of district nurse roles. (S6O-00208)

The Cabinet Secretary for Health and Social Care (Humza Yousaf): I am aware of the dispute in NHS Tayside around district nurse banding. Like all such disputes, it needs to be resolved through the well-established nationally agreed procedures. Those procedures have been agreed in partnership with NHS trade unions, and it is important that they are followed in all cases, to ensure a fair and consistent approach that all parties can have faith in.

Scottish Government officials have been in touch with NHS Tayside with a view to ensuring that that is being taken forward in accordance with those procedures and in such a way that a robust banding outcome can be arrived at for that staff group.

Joe FitzPatrick: The cabinet secretary will be aware of the hugely valuable role of district nurses, who are absolutely crucial in the provision of community-based care. The district nurses campaign in Dundee has secured the support of almost 5,000 signatures. Will the cabinet secretary take it upon himself once more to press NHS Tayside to get on with the process of job evaluation, so that our district nurses in Tayside can get the recognition that the public gives them and that they absolutely deserve?

Humza Yousaf: I will press NHS Tayside on that. As the member is aware, it is hugely important that those nationally agreed procedures are followed. Nevertheless, I agree that there should be some pace to that.

As he also knows, because he was copied in, I responded to the original correspondence to me from Ms Jacqueline Finnegan, who had written to pursue the matter on behalf of district nurses. There is a lot of support for the campaign within and outwith the nursing community. I thank both Mr FitzPatrick and Shona Robison for writing to me on the issue, and I thank Mr FitzPatrick for raising it again in Parliament.

Michael Marra (North East Scotland) (Lab): I have in my hands a copy of the process that was meant to be followed. In June 2018, in April 2019 and on 1 September this year, district nurses were told in a phone conversation that the award would be made. Yesterday, they were told that the process is now being changed from a group negotiation to an individual process.

I agree with Mr FitzPatrick that the award has to be delivered, but the process is not being followed properly. Will the cabinet secretary meet me and

Mr FitzPatrick to get the issue resolved, and will he insist that the process is followed properly and that the award is made now?

Humza Yousaf: First and foremost, I do not disagree with Mr Marra's characterisation that there was a flaw in the process initially, in 2018. That was uncovered after a freedom of information request either earlier this year or at the tail-end of last year. He is right to say that there was a flaw in the process, and NHS Tayside has acknowledged that.

I am always happy to meet members, but I would give him an assurance and absolute comfort that, according to my discussions with NHS Tayside, it is progressing the matter. He and Mr FitzPatrick are right in saying that it should be progressed at pace, because it is, understandably, causing consternation to the district nurses involved.

The Deputy Presiding Officer: That concludes portfolio questions on health and social care. Before we move on, I will allow a short pause to facilitate Government ministers moving to the front bench.

Social Justice, Housing and Local Government

The Deputy Presiding Officer: We move on to questions on social justice, housing and local government. I remind members that questions 5, 7 and 8 are grouped, and that I will take any supplementaries after all of them have been answered. If a member wishes to request a supplementary question, they should press their request-to-speak button or indicate so in the chat function by entering the letter R during the relevant question.

I again ask all members to please ask short and succinct questions, which I hope will be matched by short and succinct answers.

Housing (Shortages and Costs)

1. **Beatrice Wishart (Shetland Islands) (LD):** To ask the Scottish Government what action it is taking to mitigate housing shortages and rising housing costs. (S6O-00209)

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): The Government has delivered more than 103,000 affordable homes since 2007 and is committed to delivering 110,000 more affordable homes by 2032, of which 70 per cent will be available for social rent and 10 per cent will be in our remote, rural and island communities.

In certain areas, short-term lets can make it harder for people to find housing, which is why regulation of short-term lets is vital in balancing

the needs and concerns of residents and communities alongside wider economic and tourism interests. We are aware of the concerns around price increases and supply shortages of construction materials. We are working through the Scottish Construction Leadership Forum to fully understand the current supply chain issues and, where possible, to put in place mitigating actions.

Beatrice Wishart: Shetland is facing the perfect storm: increases in the cost of building materials; shortages; the fact that we are at the end of the supply chain; and a heated housing market alongside a lack of affordable homes and social housing. The situation is mirrored across different parts of Scotland, and it impacts particularly on young people and on efforts to keep them within rural and island areas. Is the Scottish Government's house-building programme ambitious enough to meet Scotland's current and future housing needs?

Shona Robison: I think that it is ambitious enough. As I said, we have increased our target to 110,000 more affordable homes, 10 per cent of which will be in our remote, rural and island communities. Beatrice Wishart might be aware that we have committed to developing a housing plan specifically for remote, rural and island communities. I want to ensure that all communities have the opportunity to be part of the consultation on that, because we understand that bespoke solutions are sometimes required for local communities, and we want to support community-led housing solutions.

Beatrice Wishart might also be aware that I recently met the chief executive and leader of Shetland Islands Council. We had very productive discussions, particularly on how we can work together to address the affordable housing needs of the Shetland area.

The Deputy Presiding Officer: I will take several supplementary questions.

Dr Alasdair Allan (Na h-Eileanan an Iar) (SNP): In recent years, the Scottish Government has made substantial investment in affordable housing in the Western Isles. What can the Scottish Government do to encourage local delivery partners to ensure that rural areas in all local authorities are not left behind in relation to future building projects?

Shona Robison: Although it is for local councils, together with delivery partners and communities, to determine the local priorities for affordable housing delivery, the Scottish Government's ambitions for affordable housing are clear, and we expect appropriate delivery in remote rural and island communities. As I said, we are developing a new plan specifically for that.

The Scottish Government provides funding through the mainstream affordable housing programme and our rural and islands housing funds. A detailed rural housing needs assessment has recently been completed by the Hebridean Housing Partnership, which we expect to inform the forthcoming local authority strategic housing investment plan. Affordable housing developments are currently on site in Harris, North and South Uist, Barra and Lewis. The Scottish Government will continue to work closely with the local authority to enable future opportunities across the islands.

Miles Briggs (Lothian) (Con): Since 2013, more than £6.19 million has been received from developers by the City of Edinburgh Council alone as a result of exceptional reasons for not building affordable homes as part of developments. Can the cabinet secretary outline what those exceptional circumstances are? Has she spoken to all councils to find out whether the money is actually being used for affordable housing?

Shona Robison: I will speak to all councils in due course. I had a good discussion with Kate Campbell, the convener of the City of Edinburgh Council's housing, homelessness and fair work committee—[*Interruption.*] The member should let me finish instead of interrupting from a sedentary position. I had a very good discussion with Kate Campbell about local needs in Edinburgh. I recognise that some of our national policies are sometimes quite challenging in local housing markets such as that in Edinburgh. All those things will remain under consideration.

However, the situation is not helped by the United Kingdom Government's 66.5 per cent cut to the Scottish Government's financial transactions budget in 2021-22, which arose from the UK Government's spending review. That will curtail the initiatives that we would like to continue to see, so Miles Briggs might want to speak to his UK Government counterparts to ensure that the cut is reversed.

Emma Roddick (Highlands and Islands) (SNP): Will the cabinet secretary provide an update on any discussions that the Scottish Government has had with local authorities on buying existing homes, particularly those that were sold off under the right to buy scheme?

Shona Robison: The Conservatives were responsible for the right to buy, and our housing policy is now trying to pick up the pieces from that scheme. As part of that, there are a number of initiatives that local authorities can take forward, including the purchase of right to buy properties, which we would encourage. For some years, we have been supporting local authorities to purchase existing properties if doing so can clearly be seen to support the achievement of the priorities and

objectives that are set out in their local housing strategy, and we will continue to do so.

Local Authority Services (Major Events)

2. Jamie Greene (West Scotland) (Con): To ask the Scottish Government what engagement it has with local government regarding additional support that it can provide in order to maintain local authority services in areas that are required to host or are affected by planned major events. (S6O-00210)

The Minister for Social Security and Local Government (Ben Macpherson): Scottish Government officials engage regularly with local authorities on major events, including through the events industry advisory group and as part of the gateway review process for flagship events. The Minister for Culture, Europe and International Development has regular meetings with the chair of the events industry advisory group, and ministers have engaged across sectors with partners, including local authorities, throughout the pandemic.

Jamie Greene: It is not only cities such as Glasgow that are affected by major events such as the 26th United Nations climate change conference of the parties; neighbouring communities in North Ayrshire and Inverclyde have expressed concerns about the potential impact of such events. Issues include the influx of tourists and visitors, traffic, disruption to travel and the lack of suitable public amenities. What additional support will the Scottish Government give to councils to help them to manage the impact of events such as COP26, given that services are already under huge pressure and that there have been local government budget cuts?

Ben Macpherson: I thank Jamie Greene for raising the issue on behalf of the local authorities in the region that he represents. I am sure that he will appreciate that, although COP26 is being led by the United Kingdom Government, there is a responsibility for people at all levels of government, including local authorities, the Scottish Government and the UK Government, to work together towards a successful event and to ensure regular engagement. Mr Matheson leads on that.

If Jamie Greene would like to raise with ministers specific pressures on behalf of the region that he represents, we would welcome correspondence on that. I am sure that he appreciates that the issue covers a variety of ministerial portfolios, but if he directs his correspondence to me, I will be happy to receive it.

Mark Griffin (Central Scotland) (Lab): Council workers have been heroic over the pandemic, and

they will be again during the large events that Jamie Greene mentioned. Given that they are key workers, just as national health service staff are, will the minister lobby the Cabinet Secretary for Finance and the Economy—in the same way that the Cabinet Secretary for Social Justice, Housing and Local Government invited Miles Briggs to intervene and lobby his UK Government colleagues—to fund the pay deal that local government staff deserve, which should be on a par with that for NHS staff, in order to avoid potential strike action and the disruption that that would cause in our schools?

Ben Macpherson: I appreciate the importance of the issues that Mr Griffin has raised. I note the points that he has made, but I hope that he will appreciate that such matters are under consideration by ministers, particularly the finance secretary, and that there is an on-going process.

The Deputy Presiding Officer: Question 3 was not lodged.

Homelessness Services (Funding)

4. Martin Whitfield (South Scotland) (Lab): To ask the Scottish Government whether the recent funding announcement of £50 million for homeless services will be new money or funds previously allocated to existing budgets. (S6O-00212)

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): In the programme for government 2021-22, we announced an additional £50 million to tackle homelessness and rough sleeping, taking forward our ending homelessness together action plan. The action plan includes specific work to scale up housing first more rapidly; end the use of communal night shelters; advance legislative protections for people who experience domestic abuse; and explore alternative ways to reduce migrant homelessness.

That £50 million of new resource will be invested over this parliamentary session and is in addition to the £50 million multiyear funding that was announced in 2017.

Martin Whitfield: I am grateful for the cabinet secretary's answer; I am sure that Miles Briggs will be as well, given that he asked about the issue last week. On the homelessness crisis, we moved people off the streets in response to a pandemic, but we just moved them on. What are the Government's specific intentions in relation to putting the homeless at the centre of the solutions to homelessness in Scotland?

Shona Robison: We want to take forward what I think has been described as world-leading legislation and policy around homelessness. There is always more to do, so we are of course considering the prevention duty, which Martin

Whitfield will be aware of and which could help us to enhance already robust homelessness legislation. In fact, I met officials only this morning to talk about the timeframe and the details of how we will take that work forward, and I am happy to keep him apprised of the detail.

Siobhian Brown (Ayr) (SNP): What support is in place for homeless people with mental health issues who might be unable to live in communal spaces?

Shona Robison: The housing first programme ensures that people with multiple and complex needs are allocated settled accommodation, with the individually tailored support that they need, in mainstream tenancies in the community, rather than in larger-scale communal settings.

We promote a no wrong door approach to improve joint working between health, homelessness and front-line services in recognition of the challenges that people with multiple and complex needs have in accessing housing. We are seeking views on practical options for improving access to mental health support and services for people who experience homelessness.

Siobhian Brown might be interested in the analysis that Crisis put out today, which shows that

“the proportion of people suffering from the worst forms of homelessness in Scotland is about half as high as in England”.

Campaigners have said that that is due to the policies of the Scottish Government.

There is always more to do, and we are determined to do it.

Miles Briggs (Lothian) (Con): Further to the cabinet secretary's answer to Martin Whitfield, if the £50 million announced in the programme for government is additional money, how much has still not been allocated under the £50 million that was announced in 2017?

Shona Robison: I can write to Miles Briggs with the specific details, but he will see from the extent of the on-going work on homelessness that a lot of effort and resource is going in, not least during the pandemic. I can update the relevant committee on whether every penny of that £50 million has been allocated.

However, surely it is a good-news story that a further £50 million has been allocated to tackle homelessness. I hope that Miles Briggs will be able to welcome the comment from Crisis that

“the proportion of people suffering from the worst forms of homelessness in Scotland is about half as high as in England”.

because of the policies of the Scottish Government. Surely even he can recognise when the Scottish Government actually gets things right, with policies that leading homelessness charities such as Crisis praise.

Universal Credit (Discussions with United Kingdom Government)

5. Gordon MacDonald (Edinburgh Pentlands) (SNP): To ask the Scottish Government whether it will provide an update on the discussions it has had with the United Kingdom Government regarding the £20 reduction to universal credit. (S6O-00213)

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): The Scottish Government has written to the UK Government on eight separate occasions since March 2020 to ask it to retain the much-needed £20 uplift. On 30 August, I joined colleagues from Wales and Northern Ireland to write to the UK Government to urge it to retain the uplift. We have not received a response so far. There is broad cross-party opposition to the cut and, only yesterday, parties across the chamber, with the exception of the Conservatives, voted overwhelmingly in favour of the UK Government reversing the cut. It is time for the UK Government to listen and do the right thing.

Gordon MacDonald: Around 8,000 families and individuals in my constituency are on universal credit and they were already struggling before the pandemic. With the end of the furlough scheme looming, price increases across the retail sector and massive energy price hikes, cutting the £20 uplift in universal credit without carrying out an impact assessment is a complete dereliction of duty. Will the cabinet secretary continue to push the UK Government on that matter and seek a reversal of such a punitive decision?

Shona Robison: Absolutely. We will continue to call on the UK Government to provide support to the poorest in society, not to take it away. As the member points out, people in Scotland are facing a perfect storm of hardship this winter. As food and energy prices soar, support from the UK Government in the form of the universal credit uplift, the self-employment scheme and the furlough scheme, are being withdrawn all at the same time. At its meeting yesterday, the Scottish Parliament showed the broad cross-party unity for reversing those cuts to avoid the immense hardship that they will cause. The UK Government should listen to those cross-party calls.

Universal Credit (Kilmarnock and Irvine Valley)

7. Willie Coffey (Kilmarnock and Irvine Valley) (SNP): To ask the Scottish Government what assessment it has made of the impact that

the £20 reduction to universal credit could have on households in Kilmarnock and Irvine Valley. (S6O-00215)

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): Scottish Government analysis indicates that as many as 6,614 households in Kilmarnock and Irvine Valley could lose out as a result of the United Kingdom Government's decision to cut universal credit from the start of October. The cut could remove more than £460 million in social security spending from Scotland by 2023-24. The Scottish Government is doing what it can, but that level of mitigation is not sustainable. The UK Government must reverse the cut immediately to avoid a weakened universal credit compounding the harms caused by the perfect storm of rising energy and food price increases and a national insurance increase.

Willie Coffey: The impact of the cut on my constituents will be far reaching, with more than 6,000 people being directly affected, as the cabinet secretary said. Does the cabinet secretary agree that plunging so many more people into poverty is hardly the way to encourage people back into work, and that it is an attack by the Tories on the poorest people in our society?

Shona Robison: Yes, I agree with that. As we know, many of the people who are on universal credit are already in work. A number of members set out yesterday that the cut will do nothing to motivate people to get into work. If the UK Government had any confidence in its workforce plans and its plan to support people into work, it would not be going ahead with the cut. Again, I implore the UK Government to change its mind.

The Deputy Presiding Officer: I remind members that questions 5, 7 and 8 are grouped together, and that any member seeking to ask a supplementary question should press their request-to-speak button or type R in the chat function during question 8, which I am about to call.

Universal Credit (Child Poverty)

8. Carol Mochan (South Scotland) (Lab): To ask the Scottish Government what measures it has taken to address the consequences of the reduction of universal credit and any potential impact on child poverty. (S6O-00216)

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): It cannot always be for this Government, with its limited powers and budget, to mitigate the impacts of another Government's actions. The extent of the consequences for people who are already struggling was laid out clearly in yesterday's debate. The Scottish

Government, the Scottish Parliament and many others are urging the United Kingdom Government to do the right thing and reverse the cut.

The impact of the cut on 6 million households across the UK will be harsh and it is likely to negate the positive progressive actions that the Scottish Government is taking to tackle child poverty head on, including through the Scottish child payment and bridging payments, which are benefiting thousands of children and young people, and which will put more than £130 million in the pockets of families this year.

Carol Mochan: As the cabinet secretary stated, all parliamentary parties, except the Tories, agree that this cut is shameful and it must be reversed. However, we must also recognise that, here in Scotland, we can mitigate the worst of the effects and help to tackle child poverty in particular. Will she therefore immediately use the powers that we have in Scotland to double the Scottish child payment, and will she commit to investigating doubling it again to meet the desperate need that we have in my region of South Scotland and across Scotland before we see instances of child poverty reaching desperate levels?

Shona Robison: I say to the member that it would simply not be sustainable, on a fixed budget, for the Scottish Parliament to mitigate every action that the United Kingdom Government takes, as we would have to cut into huge swathes of the health budget or the budgets that go to local government. We simply cannot do that. We have to target our efforts on where we can make the biggest impact. There is no doubt about the Scottish Government's intention to double the Scottish child payment. We have said that we will do that as part of the budget process, which is fast approaching. As I have said previously in the chamber, we will look at what else we can do to support the most affected families, and we are currently looking at what else can be done to support families through what will be a very difficult winter.

Time and again, the member and her party call for mitigation of policies that have been made in a different place, yet they do not support this Parliament having the powers to set the policies here, which would avoid us having to mitigate in the first place. I ask them to please join us in making sure that we get those powers here in this Parliament.

Collette Stevenson (East Kilbride) (SNP): The Children and Young People's Commissioner Scotland has noted that the UK Government's plans to cut universal credit could have the effect of knocking out the benefit that the Scottish child payment brings to families. Does the cabinet secretary agree that that demonstrates why Scotland needs full social security powers if we

are to successfully tackle poverty without having our efforts undermined by Westminster?

Shona Robison: I agree that, as I said in my previous answer, prevention is better than cure. If we had the powers here, we would not have to mitigate policies that are made elsewhere that undermine efforts to tackle poverty.

The Scottish Government is taking and has taken ambitious steps to tackle child poverty, to promote social justice and to level the playing field for young people from low-income backgrounds. That is why, in 2020-21, we have invested around £2.5 billion of our fixed budget in supporting low-income households, including nearly £1 billion to directly support children. The Scottish Government has taken such decisions in order to support those families in the best way we can, but that work is seriously undermined if there are policies elsewhere that go in the opposite direction.

The Deputy Presiding Officer: That concludes portfolio question time. There will be a short pause before we move to the next item of business, to allow front-bench Government and Opposition members to take their places.

Covid-19 Vaccination Certification Scheme

The Deputy Presiding Officer (Liam McArthur): The next item of business is a debate on motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccination certification scheme. I invite members who wish to participate in the debate to press their request-to-speak buttons now or as soon as possible or, if they are joining us remotely, to put R in the chat function.

14:49

Douglas Ross (Highlands and Islands) (Con): I move the motion in my name, which is a single-sentence motion that calls on the Parliament not to proceed with the plans that were decided on and determined by the Scottish National Party coalition Government to introduce vaccination passports in a little under 48 hours' time. This is a final opportunity for the Parliament to have its say. It is not the first opportunity that we have had to do so—we had a vote on the issue on 9 September. Then, the Conservatives led the opposition to the proposal and we were joined by the Labour Party and the Liberal Democrats.

In that debate, the real subject matter that many members focused on was the definition of a nightclub. If we thought back then, earlier this month, that the definition of a nightclub would be the only issue to come out of the proposals, we were wrong; so many other issues have now been raised.

I will focus on the definition of a nightclub, because—

John Mason (Glasgow Shettleston) (SNP): Will the member give way?

Douglas Ross: I will in one moment, Mr Mason.

At that time, John Swinney, as the member responsible for the legislation, could not define a nightclub. In the same debate, his MSPs were googling the definition of a nightclub. Now that it has been established what the Scottish Government believes a nightclub to be in terms of this legislation, we know from the hospitality industry that the impact will be far more wide ranging than anyone expected. Indeed, thousands of additional premises will now be subject to the legislation, if it is passed by the Parliament.

John Mason: Does Douglas Ross accept that, over those weeks, a very sensible agreement and definition have been reached? Rather than using the word “nightclub”, it is a time-based definition.

Douglas Ross: No. I do not agree with that one bit. I also do not agree that the Government has

used that time to constructively listen to the concerns of businesses. The First Minister said yesterday that she is listening to the concerns of the industries and businesses. However, you do not listen if you do not take on board their legitimate concerns. Those industries are taking the Deputy First Minister and this SNP-Green coalition Government to court at the end of this week to try and stop these proposals, such is the damage that they are expected to cause.

Countless people, such as Gavin Stevenson from the Night Time Industries Association, have warned that the nightclub definition—which John Mason now wants us to celebrate—will affect thousands of additional properties. Colin Wilkinson, managing director of the Scottish Licensed Trade Association, said that the proposals are:

“a most unwelcome development for the licensed trade in general.”

The Scottish Beer and Pub Association said that:

“It goes far beyond what any reasonable person would consider to be a nightclub and could capture many pubs and bars.”

It is not just the industries affected who are raising concerns; it is also Judith Robertson from the Scottish Human Rights Commission. She said that the case for vaccination passports has not been made. She said that to the COVID-19 Recovery Committee of this Parliament less than a week ago. She is urging ministers to listen to the Scottish Human Rights Commission when it says that the case for vaccination passports has not been made.

If ministers will not listen to business, the sectors affected, or the Scottish Human Rights Commission, will they listen to themselves? Will they listen to Humza Yousaf, who admitted that he had

“ethical, clinical and human rights concerns”—[*Official Report*, 26 May 2021; c 7.]

about vaccination passports and who said that he was “instinctively quite sceptical” about the use of vaccination passports for clubs?

Will they listen to John Swinney, who previously said that he was against the use of Covid passports to deal with the situation that we have in front of us, or to their coalition partners such as Patrick Harvie, who said that the lack of detail and confusion over vaccination passports could spread misinformation and further the anti-vaxxer cause? That is the same Patrick Harvie who said that the vaccination passport scheme raises concerns about equality issues. Why are the SNP and the Greens refusing to listen to anyone who takes the counter view?

The Cabinet Secretary for Health and Social Care (Humza Yousaf) rose—

Douglas Ross: I will give way to the Cabinet Secretary for Health and Social Care if he can explain why he previously felt that the proposals were surrounded by

“ethical, clinical and human rights concerns”—[*Official Report*, 26 May 2021; c 7].

and why, if he was “instinctively quite sceptical” of these plans, he is no longer so.

Humza Yousaf: I am happy to. As I will say in my remarks, it is because we have managed a workaround in relation to some of those ethical considerations.

I wonder whether the one group in society that Douglas Ross has not mentioned—and to whom he is not listening—is listening to him. Those are the public health experts: the same public health experts who are no doubt informing the United Kingdom Government, which has a Covid certification scheme in its winter contingency plan. What does he say to those public health experts who say that this scheme can help to reduce transmission?

Douglas Ross: Of course, the public health experts are not unanimous on that. Stephen Reicher, who is often quoted by the SNP—

Humza Yousaf: What about the clinicians?

Douglas Ross: I am sorry, Presiding Officer, but if the Cabinet Secretary for Health and Social Care in an SNP Government does not want to listen to what Professor Stephen Reicher is saying, he should tell the First Minister, because she often quotes him.

Of course, they cannot quote him when he is taking an opposing view from that of this SNP Government. They do not want to hear that opposition—they do not want to listen. They know that they have votes sewn up in the chamber. They can ignore the Scottish Parliament and this debating chamber, but they cannot ignore the voices of business and the voices of the public, who are raising serious concerns about these issues.

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney): Mr Ross said that we were ignoring the wishes of the Scottish Parliament. The Scottish Parliament has voted for the scheme—he said that himself a minute ago.

Douglas Ross: I was saying that they can ignore whatever this Parliament says. [Interruption.] I will explain. This Parliament is not just the SNP and the Greens. Scotland is not just the SNP and the Greens. There are 129 voices in this chamber.

John Swinney rose—

Douglas Ross: No, sit down, please, Mr Swinney. [Interruption.] Mr Swinney! Sit down and I will give way.

Although the SNP does not want to hear the voices of the Conservatives, Labour or the Liberal Democrats, it cannot ignore the voices of many people across Scotland who have said that their plans are deeply flawed.

If I can have another minute, I will give way to the Deputy First Minister.

The Deputy Presiding Officer: You can.

John Swinney: I am grateful to Mr Ross for giving way a second time. He obviously believes in the principle of parliamentary majorities being able to determine the outcome of parliamentary votes, because he has used his vote in the House of Commons to ensure that there is a cut in universal credit for the most vulnerable families in our country. That is what Mr Ross uses his majority to deliver for the poor in our country.

Douglas Ross: I will work through those points. First, there has not been a vote on the universal credit issue. If John Swinney is aware of it, he should perhaps look at *Hansard*, from which he will find that there has never been a vote on that issue in the UK Parliament. Secondly, we are discussing vaccination passports. What does it say about the SNP member in charge of the legislation that he does not want to look at its difficulties or flaws but wants to talk about universal credit? We had a long debate about that yesterday.

Let us have a debate about what his party is doing to the night-time industry, the hospitality industry and the people across Scotland by introducing the scheme, which is ill thought out and will be in force, but not enforced. It is a shambolic scheme—[Interruption.] No, I am in my final minute. To use that great Scottish word, it is a bourach, and the hands of the Deputy First Minister and the First Minister are all over it.

We know that in the next few days, after the scheme is implemented at 5 am on Friday, there will be countless problems. I do not celebrate that, but the Government has been warned about it. I hope that on this final opportunity today, some SNP and Green members might see the light and see the difficulty that their scheme is going to cause, and vote against it. Certainly, by supporting the Conservative motion today, we can stop this shambles of a scheme coming into effect in a little under 48 hours' time.

The Deputy Presiding Officer: I do not think that you have moved the motion.

Douglas Ross: In fairness, I moved it in my first sentence, but belt and braces.

I move,

That the Parliament calls on the Scottish Government not to proceed with its plans to introduce a COVID-19 vaccine certification scheme.

The Deputy Presiding Officer: Excellent. Belt and braces are always good.

I call Humza Yousaf to speak to and move amendment S6M-01415.2.

14:58

The Cabinet Secretary for Health and Social Care (Humza Yousaf): The Scottish Government opposes the motion in the name of Douglas Ross. As the First Minister said yesterday, the Scottish Government maintains the position that the implementation of a mandatory domestic certification scheme is proportionate and appropriate at this point in the pandemic. That is not just our view; it is the view of the Labour-led Government in Wales, and the certification scheme is, of course, part of the UK Government's contingency planning.

Recent data has been a stark reminder of the challenges that we face as a nation. Although parties will have disagreements about the certification scheme, all of us can agree that we have a challenging number of weeks ahead and that we continue to face challenges despite the positive uptake rates in the vaccination process. A particular challenge is the number of deaths and the impact that the virus has had on many families across the country—something that I know weighs heavily on the minds of the Government, as I suspect it does for every member in the chamber. Although case numbers are declining, they are still at a high level and the pressure on our health and care system remains significant.

We cannot be complacent. In September, we have reported that 461 people who tested positive for Covid-19 have lost their lives. That is 461 families and their communities completely devastated by the virus in the past month alone. However, that also highlights the importance of the vaccine to how we progress through the pandemic. We continue to see exceptionally high uptake of the vaccine, and the downward trajectory of cases points to the vaccine having an impact.

Alex Cole-Hamilton (Edinburgh Western) (LD): I absolutely agree that vaccination is our route out of this, but vaccination passports are not. Does the cabinet secretary acknowledge that, at a festival in Cornwall at which vaccination passports were required on entry, 5,000 people still caught

Covid-19? Passports are not a barrier to transmission.

Humza Yousaf: As the First Minister said in response to the exact same question from Alex Cole-Hamilton yesterday, I think, we are not saying that vaccination completely severs the link between positive cases and hospitalisation but that it reduces that link. It also reduces the likelihood of transmission of the virus.

Daniel Johnson (Edinburgh Southern) (Lab): Does the cabinet secretary accept that there is a difference between the effect of vaccination at the population level and its impact in a venue or at an event? The dynamics are very different.

Humza Yousaf: Yes, but I will come on to why we think that a certification scheme can have a positive impact in particularly high-risk settings. My remarks support what Daniel Johnson said: vaccination remains the single most important thing that any of us can do to help to keep cases under control.

That is why we hope that the introduction of the certification scheme will help to increase vaccination uptake. Although daily vaccination figures fluctuate, we saw—[*Interruption.*] I ask the member to give me a moment to make a little progress.

Although daily vaccination figures are variable, in the first five days after the announcement of the certification scheme there was an increase in the uptake of first doses, which peaked on day 4 with an 80 per cent increase compared with the uptake on the day of the announcement. Significant uptake of a first dose of the vaccine was also noted in the 16 to 17-year-old age group immediately after we announced our intention to introduce such a scheme.

Brian Whittle (South Scotland) (Con): Three weeks ago, John Swinney told the COVID-19 Recovery Committee that he would provide the evidence behind the introduction of vaccination passports. Last week, the First Minister said that she would deliver the evidence within a couple of days. The committee's evidence suggests that the lowest uptake of Covid vaccination is among ethnic minorities and in the lowest Scottish index of multiple deprivation areas. What evidence has the Scottish Government considered that suggests that the passport scheme will make an impact on vaccination uptake in those groups?

Humza Yousaf: Even before the announcement of a certification scheme, we were working hard with organisations such as BEMIS Scotland and the Council of Ethnic Minority Voluntary Sector Organisations, as well as with faith groups and leaders, to increase uptake in ethnic minority groups. We know that vaccination uptake rates are lowest in our Polish and African communities, so

there has been proactive engagement and initiatives to ensure that their uptake rates increase.

There have been considerable efforts on the part of businesses and individuals to step up compliance with the mitigation measures that remain in place. *[Interruption.]* I will not take another intervention. I hope that the member will forgive me, but I want to make progress. I have taken four or five interventions, and I suspect that I do not have much time left.

In line with our strategic intent to suppress the virus to a level that is consistent with alleviating its harms while we recover and rebuild for a better future—that is our stated intent—the Covid vaccination certification scheme will allow us to meet the following aims. It will reduce the risk of transmission. It will reduce the risk of serious illness and death and, in so doing, alleviate pressure on our healthcare system. It will allow high-risk settings to continue to operate, as an alternative to closure or more restrictive measures. It will also, we hope, increase vaccination uptake. *[Interruption.]* If the member will forgive me, I want to make a little more progress.

Brian Whittle mentioned research. The vaccine effectiveness expert panel—VEEP—which fed its consensus view into the scientific advisory group for emergencies on 9 September, considered a wide range of domestic and international data and found that vaccines are around 65 to 85 per cent effective against infection. As a result, certification provides a targeted and proportionate means of reducing risk while maximising our ability to keep open certain settings and events at which there is a higher risk of transmission. *[Interruption.]* A number of members are grumbling, but that is the scientific evidence that is feeding into SAGE. *[Interruption.]* If the member will forgive me, I probably have only about a minute left.

The Deputy Presiding Officer: Cabinet secretary, you must come to a conclusion.

Humza Yousaf: We have listened to a range of stakeholders—in closing, my colleague the Deputy First Minister will, no doubt, give further detail in that regard. Indeed, following the announcement that was made by the First Minister yesterday, the fact that we will implement the scheme on Friday but will not seek to enforce the measures until 18 October is an example of a Government having listened to and engaged with business.

Regarding the parliamentary vote on the issue, it sometimes suits the Opposition to claim that the Government does not listen to the Parliament, but, when we do listen to the Parliament, Opposition members suddenly seem to be on the other side of the fence.

We have come a long way in recent months. Our economy is open, restrictions have been lifted, by and large, and there is a relative return to normality. Partnership has been key to that, and I ask businesses and individuals to continue with this endeavour in the coming weeks to ensure that we do everything we absolutely can collectively to recover from the ill effects of the pandemic.

In the face of the delta variant, which we know is far more transmissible than other variants, we cannot afford to sit still. This Government will always take the right decisions, even if they are the tough ones—backed by clinical and public health advice—in order to keep the people of Scotland safe.

I move amendment S6M-01415.2, in the name of the Deputy First Minister, to leave out from “calls” to end and insert:

“commends the extraordinary effort of vaccination teams throughout Scotland, which means that, as of 24 September 2021, 86% of eligible over-18-year-olds were double-vaccinated against COVID-19; recognises that case numbers remain too high and that action is needed from all sectors to ensure that baseline COVID-19 measures are rigorously implemented; acknowledges that a number of other countries have introduced COVID-19 certification schemes, that the Welsh Government has plans to introduce a vaccine certification scheme in Wales, and that it is part of winter contingency planning by the UK Government for England; believes that, in line with the Scottish Government’s strategic intent, a COVID-19 vaccine certification scheme can provide a targeted means to maximise Scotland’s ability to keep certain higher-risk settings open, while reducing the impact of transmission and encouraging the remaining sections of the population, including those who may be vaccine hesitant, to get vaccinated; recognises that the Parliament has already endorsed a certification scheme; supports the implementation of a COVID-19 vaccine certification scheme; agrees that the scheme will apply to late night venues between the hours of 00:00 and 05:00 with music, alcohol and dancing, indoor unseated live events with 500 or more attendees, outdoor unseated live events with 4,000 or more attendees, and all events with 10,000 or more attendees; notes that measures are being taken to ensure digital inclusivity and to ensure that disabled people are not disproportionately impacted, and agrees that this scheme will be kept under review.”

The Deputy Presiding Officer: I advise members that we have very little time in hand—in fact, no time at all—so any interventions will have to be accommodated within the allocated speech times.

15:06

Daniel Johnson (Edinburgh Southern) (Lab): Let us be clear. Yesterday’s announcement by the First Minister was an admission that the Scottish Government’s vaccination passport policy is flawed, rushed and potentially damaging to jobs and businesses. You do not announce a delay to a law 72 hours before it comes into force when it is well prepared and thought through. You do not

delay it because it is straightforward to implement. You do not push it back when those who are tasked with enforcing it are well prepared.

The vaccination certification plan is being delayed because it is flawed, and it is flawed because it is lacking in three key ways. First, the evidence base is lacking:

“the impact ... on ... transmission is uncertain”.

That is stated in the first line of our amendment, and those are not my words but the words of SAGE. The Cabinet Secretary for Health and Social Care should be very careful in citing scientific evidence at population-level efficacy and applying it to high-contact venues and situations. The dynamics are very different, and it is a very dangerous thing to do.

Brian Whittle: Does the member agree with me that the inability of the Deputy First Minister and the First Minister to bring evidence into the public domain shows that they are now scrambling around to get some evidence after the fact?

Daniel Johnson: I completely agree, and I thank the member for that intervention.

The second issue is that the detail is lacking. The Government singled out nightclubs but then realised that it had no way of identifying them legally. The definition that has been cobbled together means that any pub or restaurant that is open at 1 minute past midnight suddenly becomes a nightclub if patrons start to dance. The answer, according to the official guidance, which was published yesterday, is that those venues should switch their music off. With a flick of a switch, a venue turns from a nightclub back into a pub. I hope that someone tells the virus that it is allowed to transmit itself in a busy bar only when the music is playing. *[Interruption.]* The cabinet secretary says, from a sedentary position, that that is a ridiculous suggestion, but that is exactly the effect of what the guidance says. If staff switch the music off, they no longer have to check people's vaccination status. That is what the Government's own advice says.

Thirdly, communication is lacking. Bar, restaurant and club owners feel ambushed. For months, the Government was saying that it had no plans to introduce vaccination passports. In July, Humza Yousaf said that he was “sceptical”, and John Swinney described them as the “wrong way” to go. In the space of four weeks, the Government has gone from not having plans for vaccination passports to rushing them through and then having to delay their start because of the inevitable backlash, because they are unworkable. The situation is a mess. Is it any wonder that those in the hospitality sector feel dismayed?

Ministers claim that they have been consulting, but appearing on a Zoom call is not consultation, and speaking to people and telling them what is going to happen is not consultation. Carrying on regardless and not listening to issues, suggestions, questions or concerns is not consultation. Consultation is not a one-way street. If it had been done at all, the Government would not be in the mess that it is in today. Ministers have to listen.

I have been listening to people in the sector, and they feel angry and betrayed. This is what I have heard:

“This wouldn't matter whether it was being implemented this Friday or Good Friday, because unless we solve the issues around recruitment this is an absolute non-starter at any time or date.”

“This scheme will result in business failures and bankruptcies.”

“As an experienced operator, I like to think of myself as a fairly sharp guy, but there is sheer confusion with this plan and there's been no engagement with the sector. If there is a mist in the pulpit, then there will be fog in the pews.”

“The cost of hiring door staff, which are in massive short supply anyway, to enforce this will be more than the pre-Covid profits for many businesses.”

Those are not my words but those of business owners and those who represent the sector. They were speaking to me today on a Zoom call because I wanted to hear their point of view. They just want ministers to listen, too. *[Interruption.]*

The Deputy Presiding Officer: Could those on the front benches stop yelling at each other, please?

Daniel Johnson: The last time I checked, consultation required listening. All that I am saying is that the Government should listen to those points of view, because it is quite clear, according to its own plans, that it has not been doing that.

When it comes to suppressing the virus, we know what works: testing, contact tracing and getting people vaccinated. The Scottish Government has to redouble its efforts and improve the systems that it has already, not invent new ones. We should resource test and protect properly so that it meets World Health Organization standards. We need to chase down the groups that remain to get vaccinated by making it as easy as possible, through measures such as mobile vaccination centres, providing people absolutely no reason not to get vaccinated.

If ministers were being honest, they would acknowledge that the policy has been rushed. If they were being frank, they would acknowledge that it lacks the rationale, planning or communication to be effective.

The Deputy Presiding Officer: You need to wind up now, Mr Johnson.

Daniel Johnson: Ministers know that this is a knee-jerk response that they have been sent down from the ministerial tower by the First Minister to implement and try to justify. It has been botched, and that is why it should be scrapped.

I move amendment S6M-01415.1, to insert at end:

“; recognises that the impact of certification on behaviours that reduce transmission is uncertain according to SAGE; notes that the scheme does not include proof of a negative test as an alternative to certification; raises concern about the inadequate consultation, published detail or lack of support for the sectors impacted by the introduction of vaccine certification; regrets that contact tracing in Scotland has repeatedly missed the World Health Organization’s standard of tracing 80% of close contacts within 72 hours, and calls on the Scottish Government to focus on urgently resourcing Test and Protect and increasing vaccine uptake by improving access to vaccination clinics.”

15:11

Alex Cole-Hamilton (Edinburgh Western) (LD): I thank the Scottish Conservative Party for lodging the motion. It will come as no surprise to colleagues that I and my party will vote this evening to abandon the Covid vaccination certification scheme. My party’s misgivings about the prospect of Covid identification cards—which they are, in all but name—are a matter of public record, and we are being proved right every passing day. They are illiberal, they are discriminatory and they might even breach people’s human rights.

On top of all that, they are utterly ineffective at protecting people from virus transmission. The evidence from the Boardmasters festival in Cornwall is testament to that. After showing proof of vaccination as a requirement for entry, 10 per cent of attendees at that event—5,000 people—contracted Covid 19. That offers proof, if any were needed, that the scheme offers no barrier to the spread of coronavirus.

Jim Fairlie (Perthshire South and Kinross-shire) (SNP): There were 5,000 people who were infected after having been double vaccinated and after having passed a lateral flow test. If 2,500 of them had not been vaccinated, how many would have ended up in hospital with long Covid, or even worse, dead?

Alex Cole-Hamilton: I absolutely agree that the vaccine is our route out of the pandemic, but complex arithmetic from Mr Fairlie will not get around the fact that the scheme is utterly illiberal and shows no efficacy in stopping spread of the virus.

We have from the outset made clear our opposition to the scheme. I am proud that the Liberal Democrats are the only party in the United Kingdom that has consistently and stubbornly opposed the assault on the right to medical privacy that Covid 19 ID cards represent. People are worried about what the scheme will mean for Scotland in principle and in practice. As we have heard, the night-time industry is in uproar, and rightly so. It is being treated with contempt by this Government, so its decision to launch legal action against the Government should come as no surprise.

However, that is not the only challenge that the Government has failed to address. Last week, I wrote to the Scottish Human Rights Commission asking it to begin a statutory inquiry into whether the plans intrude on people’s human rights. The commissioner of that body, Judith Robertson, told Parliament’s COVID-19 Recovery Committee that human rights that are defined in law can be set aside only if doing so is a direct means of addressing a pressing social need. However, the Government has singularly failed to provide an evidential base for meeting that test, so concerns remain. The fact that the SNP and the Greens plan to push on regardless shows disregard for the rights-based approach that should characterise everything that we do in Parliament.

The illiberal Covid ID cards will lead to a disproportionate number of ethnic minority Scots, young people and people from the most deprived areas being systematically excluded from public events and spaces.

I know that the Government will not admit defeat on the scheme because it is now in too deep, but the Scottish Green Party might not be, so I urge its members when they vote today to think again about those human rights concerns. The Scottish Greens have the power to act as midwife or executioner for the policy, this afternoon. They can do the right thing, and prove that they are still a party of dependable principles, or they can surrender those principles as part payment for the scraps from the Cabinet table. I say that to the Greens as somebody who has watched his party learn the hard way that voting against the principles on which it was elected does not end well.

In May this year, the Scottish Green Party asked voters this question: do you want more of the same, or will you vote as though your future depends on it? This afternoon, I put the same question to the Greens. Will they fall into line with a Government whip that will redraw the lines of personal liberty in this country, perhaps irreversibly, or will they vote as though the future of personal liberty depends on it?

There is no guaranteed end date for the Covid ID card scheme—it is wide open to extension. There is no guarantee that in five months members will not all need to present a Covid ID card just to enter the chamber, and there is no evidence that it will do anything to reduce the inequality that some of the country's most vulnerable groups already face. For those reasons, and more besides, the Liberal Democrats will proudly back the motion tonight.

15:16

Liz Smith (Mid Scotland and Fife) (Con): I begin by acknowledging the very difficult job that confronts the Government on the issue—first, because it is often necessary to take quick decisions in response to a virus that shows absolutely no concern whatsoever for the pressures that are placed on the economy or on society, and secondly, because it is not easy to balance health concerns against the needs of the economy and society's wellbeing. However, what is absolutely crucial, whatever is decided, is the need to earn public trust, and therefore consent, when it comes to ensuring that the public will adhere to the necessary guidelines with a responsible approach.

I will reflect on that, given what the business community has been saying. The First Minister reminded us yesterday that we should all be united in our aim to tackle this awful disease and to minimise the risks that are associated with it by controlling situations in which there is likely to be a risk of increased transmission.

Businesses agree with that, but they make the point—quite rightly—that the precise aims of measures must be clear. In the case of vaccination passports, there would have to be supportive and compelling evidence that their introduction would, first, be clearly understood; that it would, secondly, be accepted by the public as the right measure; and that it would, thirdly, be backed up with the necessary resources to secure effective implementation.

Those are perfectly fair questions to ask—most especially of an SNP Government that yesterday shifted the goalposts again. The First Minister claimed that that shift, to allow for a grace period up to 18 October, was made precisely because the Scottish Government had been listening to business. However, the fact of the matter is that the business community is saying exactly the same now as it has been saying for weeks, which is that vaccination passports are not the answer.

Scrutiny of proposals is critical not only in order to foster public awareness and understanding but—which is most important—to produce a

cogent case with evidence for how an initiative will work.

John Mason (Glasgow Shettleston) (SNP): Will the member give way?

Liz Smith: If Mr Mason does not mind, I will not give way on this occasion.

On vaccination passports, however, which we debated earlier in the month, there was no time whatsoever for adequate scrutiny—not least because the Scottish Government admitted that it was still in the process of collecting the necessary evidence, which was a concern that the Delegated Powers and Law Reform Committee raised. In that debate, on 9 September, my colleague Murdo Fraser rightly set out that, although some parties in the chamber have—as Mr Cole-Hamilton just said—a long-standing opposition to any form of ID policy, the Scottish Conservatives could, on a pragmatic basis, say that there might be a case for vaccination passports on a very short-term basis, but only if there was proven evidence that they could be beneficial in the war against Covid. That case has never been made, however, and worse still is that it has never been scrutinised.

That is why the business community has been so quick to express its concerns about several key issues, including how QR codes would be read, policing costs, whether vaccination passports work better than negative lateral flow tests, for how long vaccination passports would be necessary and whether they would perpetuate inequalities.

There is a legal challenge because of all the unanswered questions. Two members have outlined what the hospitality and night-time industries are saying about that. It is absolutely imperative that we listen, because there are serious concerns—not just about workability, but about the potential legal challenge. Of course, yesterday, the First Minister had finally to acknowledge the deep-seated concerns, but all she has done is muddy the waters even more.

The real problems are the policy inconsistencies, the legal issues and the lack of on-going evidence, so we call on the SNP-Green coalition—half of which is fundamentally opposed to vaccination passports—to halt the programme.

15:20

Michelle Thomson (Falkirk East) (SNP): We are all clear that any Government has a duty to act in the general public health interest. That invariably means balancing seemingly conflicting interests for the greater good. The entire pandemic has been characterised by that challenge, and we have all accepted, in recognition of our obligations, temporary abeyance

of some of our rights. It appears that there is, after all, such a thing as society.

The wonder that is vaccination has been a success that has led to fewer deaths and limited poor health outcomes. Its efficacy is better than it was originally thought it would be, and the booster programme is now being rolled out. Take-up is high; I am pleased to say that the level of take-up among younger people is encouraging. It is true that vaccination certificates might affect younger people more, but the vaccination certification approach might encourage take-up among them, as they realise that their desire to go clubbing outweighs their hesitancy.

Alex Cole-Hamilton: I am grateful to Michelle Thomson for giving way.

At the start of her remarks, Michelle Thomson said that “abeyance of ... rights” is necessary at a time of emergency. Does she recognise that that is acceptable only when an evidential base is presented for why that is necessary? Does she recognise such a base has not been presented?

Michelle Thomson: Thank you. I will come to the matter of rights at the end of my speech.

Many of us are pandemic weary, yet we recognise that proportionate actions based on assessment of risk can allow resumption of some activities. Nobody today so far has mentioned the number of Governments around the world that have developed similar schemes—the entire European Union, with its Covid digital certification, Switzerland, Iceland, Norway and Liechtenstein. Such schemes are in widespread use in Austria, France, Germany, Israel, Italy and so on. Northern Ireland and Wales are considering a similar move, and even the United Kingdom Prime Minister has stated that it is not sensible to rule out the option now, when we must face the fact that it might make the difference between businesses being open at full capacity and not being open at full capacity. *[Interruption.]* I will be very interested to see how Douglas Ross will vote if the issue comes to his other chamber. *[Interruption.]* I will carry on, because I am limited in time.

Last night new guidance was published that allows for a staged approach.

Douglas Ross: Will the member give way?

Michelle Thomson: I will happily give way. Will Douglas Ross vote against any such scheme when his Tory masters bring it forward in Westminster?

Douglas Ross: I am grateful to Michelle Thomson for finally giving way. I have been very clear that I am against Covid vaccination passports. That cannot be clearer.

The member just mentioned all the countries that have introduced vaccination passports and the experience from those countries, so why did it take her Government so long to define “nightclub”? Why, for many people, is the definition so confusing that it will take in many extra premises?

The Deputy Presiding Officer: Be brief, Mr Ross.

Douglas Ross: Why are we in the situation in which the scheme cannot be enforced for another two weeks?

Michelle Thomson: Douglas Ross is confusing two things. There might be a case to make for policies evolving, but we are talking about the principle of vaccination certification, so I asked him how he will vote. *[Interruption.]* I must make progress.

Business has been listened to, so more time has been allowed in the form of a grace period. That has to be recognised. The scheme will not take legal effect until 18 October, which will allow businesses and other key stakeholders time to plan. To suggest that business cannot fathom a way out of a set of circumstances that it has continually managed to work its way through, when doing so has been very difficult, is utterly patronising to business.

Flexible adaptation is the key. If we have learned one thing through the course of the pandemic, it is that what science suggests is the best solution at the time often requires to be rethought. Knowing that there will inevitably be change is not a rational reason to do nothing.

Balancing protection with a resumption of public life and a secure trading environment for business is what certification will bring.

I will leave members with a few final thoughts.

The Deputy Presiding Officer: Very few, please.

Michelle Thomson: The first relates to the tension between our personal privacy and our civic duty, combined with general concerns about use of data, which the pandemic will accentuate. Perceptions of how data will be managed are based on the level of trust between citizens and Government. The level of trust in the Scottish Government and the First Minister is extremely high, whereas trust in the UK Prime Minister is extremely low.

15:25

Jamie Halcro Johnston (Highlands and Islands) (Con): Yesterday, the First Minister accepted what everybody already knew but she had steadfastly refused to accept. Having

announced that the vaccination certification scheme policy would begin this week, the Scottish Government was completely unprepared for its implementation. Such an outcome was a long time in the making due to the culmination of a lack of meaningful engagement, the design of a policy without reference to those who would have to enforce it on the ground, and an arrogant dismissal of genuine concerns.

If it seems as though there is a lack of joined-up thinking in the Scottish Government's approach, that is because there is. First, we had the hasty reversal of the Deputy First Minister's position that vaccination passports were

"the wrong way to go".

We had a policy announcement that was so confused that it led members in the chamber to resort to googling the definition of a nightclub on their mobile phones. Indications that certification would roll out with new age demographics—16 and 17-year-olds and potentially 12 to 15-year-olds—were reversed. We have now ended up with a situation in which guidance for businesses was only issued on Tuesday evening for a policy that they are supposed to put in place on Friday. Guidance for the general public and a marketing campaign to raise awareness are, it seems, still in the works.

If the SNP's U-turns are not enough, we need only look to its partners, the Greens. Patrick Harvie once told us:

"the more I think about this notion of vaccine passports or vaccine certificates, the more concerned I am about it".

It appears that thinking ends where ministerial office begins.

Over the past 18 months, the Scottish people have endured a number of restrictions to their lives. With remarkable generosity, they have faced contradictions and inconsistencies in this Government's response. However, the scheme that ministers have outlined is categorically different from what has gone before. It should have been introduced only with detailed thought and sober reflection. Sadly, we have had none of that.

The First Minister has continually presented the alternative to vaccination certification as being the threat of businesses having to close again. We are currently in a period in which cases are dropping. Can businesses and other organisations have any confidence that, should that trend reverse, they will not be met with closure anyway?

That is not the only question that ministers have to answer, and I hope that the cabinet secretary will also address the following issues when he sums up. The Scottish Government is developing an approval process for medical exemption, which

will apparently be published ahead of implementation on Friday. Has it developed that process? What guidance have businesses been given on that? Will the exemption be included on the NHS app?

Can the Scottish Government say with confidence that problems for individuals—for example, for those who received their first vaccination in one jurisdiction and their second in another—have been resolved? Can the Scottish Government point to any evidence that venues with people dancing and alcohol that close at midnight will have less effect on the spread of the airborne virus than those that are open for an additional hour? Finally, can ministers truthfully say, as their guidance states, that a large-scale events business will be able to

"refresh policies and organise training for staff"

before Friday based on guidance that was issued only on Tuesday afternoon?

There are many, many more problems with the proposals than those that I have set out. For one thing, the Scottish Government's amendment mentions tackling vaccine hesitancy, despite the First Minister telling Parliament that

"Uptake rates across all groups in society are high—much higher than we anticipated at the start of the programme."—[*Official Report*, 21 September 2021; c 23.]

I draw members' attention to the words of Professor Sir Jonathan Montgomery, who told a committee of this Parliament that the same groups

"might respond with increasing distrust of the vaccine programme, and Government advice, because they feel that they have been coerced."—[*Official Report*, COVID-19 Recovery Committee, 23 September 2021; c 7.]

The reality is precisely that it is a gamble—*[Interruption.]*

The Deputy Presiding Officer: The member cannot take an intervention, because he is winding up.

Jamie Halcro Johnston: The reality is precisely that it is a gamble, and one that might put vaccination efforts further back.

As was the case before the levels system, the Scottish Government is applying a blanket policy across Scotland regardless of local circumstances and prevalence of the virus. Despite its U-turns, it is implementing an impractical and ill-considered set of proposals that may have negative effects—

The Deputy Presiding Officer: You need to finish, Mr Halcro Johnston.

Jamie Halcro Johnston: The proposals are in themselves dangerous to public health and a threat to business. I urge the Government to go further than it did yesterday and drop the plans.

The Deputy Presiding Officer: I call Martin Whitfield, to be followed by Paul McLennan. You have a tight four minutes.

15:29

Martin Whitfield (South Scotland) (Lab): It is a pleasure to speak in this debate on the important matter of vaccination passports or certificates. It is interesting that the Scottish Government has admitted on a number of occasions that one of the purposes of the scheme is to drive up the vaccination rate. Presumably, it is intended to do that in a certain group of people. It is important that we win the argument on vaccination, but vaccines should be taken because they protect people and those around them, not to allow people to get into a nightclub. It is important that we do not entrench hesitancy, which is what I fear vaccination passports will result in.

We have seen the stick if people do not get the vaccine, but where is the carrot from this Government? Where is the improved roll-out of places to get vaccinated? Where is the reaching out into our schools, universities and areas with higher poverty rates to try to extend uptake? That should have been done first and it should have been heralded and really pushed. It is important because, if we can achieve that, the bit of paper or the app—both of which Covid will ignore—will not be necessary.

Humza Yousaf: Scotland has the highest level of first-dose uptake in the UK, and we are a percentage point behind Wales, but ahead of Northern Ireland and England, on the uptake of second doses. Does that not confirm that we are doing everything that Martin Whitfield asks us to do in relation to schools, universities and so on? However, in the fight against a highly transmissible variant, we must do more—

The Deputy Presiding Officer: I call Mr Whitfield.

Humza Yousaf: —and that is why certification is important.

Martin Whitfield: Then why do we need vaccination passports?

Humza Yousaf: To do more.

Martin Whitfield: Oh—to do more.

My second point is about those who cannot get vaccinated. I am grateful to the Cabinet Secretary for Health and Social Care for talking this morning about support for those who fear the vaccine and those who have had negative experiences, and how they might get a second dose safely. However, I ask the cabinet secretary—I am happy to take an intervention from him and for that to come out of my speaking time, Presiding Officer—

whether anaphylactic shock is a good medical reason for someone not to be vaccinated by Friday. I hope that I can get a yes or no response.

Humza Yousaf: As I referenced earlier in my answers during portfolio questions on health and social care, some people who have suffered anaphylactic shock after their first dose are able to safely complete their second dose. Those people who the health board has identified as unable to complete the vaccination process safely will receive an exemption letter by Friday.

Martin Whitfield: I am grateful for that—indeed, it answers my next question, which was about what form such notification would take. I note that those people will receive a letter on Friday morning that will allow them to go to a birthday party in a nightclub that evening. However, will the notification appear on the app? Most night-time institutions seem to be organising themselves around the app, rather than the paper version.

My next question is on a matter that I was asked about just a few minutes ago. Could a breach by a licensee before 18 October be used as evidence with regard to their drinks licence even though the measure will not become enforceable until 18 October?

My final question is about the many people in society with disabilities. Where is the equality impact assessment of the scheme? That was promised by 23 September, but it has still not been published. It is vital to those people who are struggling mentally with regard to going out and rejoining society. More important, where is the work that has been done to show how the scheme will affect some of the most vulnerable people in our society?

15:33

Paul McLennan (East Lothian) (SNP): As of today, we are still averaging 2,500 to 3,000 cases of Covid per day, which is 15,000 to 20,000 cases per week. As the First Minister said yesterday, that is still too high for comfort. As the vaccination effort continues, we must balance the interests of public health and the need to keep businesses open. This is not just about the here and now; it is about preparing for the long nights of winter. As of today, we have 1,020 people in hospital, with 71 in intensive care. In the past seven days, we have seen 183 deaths. We have seen on several occasions that the virus can grow exponentially if it is given the opportunity to do so.

I could understand the Opposition parties' arguments if Scotland was engaging in a process that had not been implemented throughout most of Europe, as Michelle Thomson mentioned. However, Covid certification has been introduced by several Governments of different political

persuasions in countries across Europe, and the measures that many of them have taken go much further than those that are proposed by the Scottish Government.

Stephen Kerr (Central Scotland) (Con): First, I say to the member that they did not introduce them in the way that the SNP is introducing them in Scotland. Secondly, what is the assessed economic impact on the businesses that will be most directly impacted by the measure?

Paul McLennan: Each country has brought in certificate schemes that suit its circumstances, and that is what the Scottish Government is doing.

The Netherlands relaxed social distancing rules for nightclubs on 26 June, and they had to close. They are now being reopened with certification. In Austria, Belgium, Denmark and France, certification is required when attendance at an event reaches a certain threshold. In Israel, Norway and the Netherlands, capacity limits are in place for events with certification. Is the Opposition seriously telling us that most of Europe is getting its approach wrong?

Alex Cole-Hamilton: The member listed a range of countries that have had ID cards in their societies for a long time, as well as constitutional protections around their use. Does he recognise that we have no such protections?

Paul McLennan: We are not talking about ID cards. I respect the member's view on that issue, but this is not about ID cards.

The schemes in Europe have seen increases in the take-up of vaccination, including by those who might be vaccine hesitant. We have seen examples of that—[*Interruption.*]

I will not take another intervention. I have already taken two and I have only four minutes.

The Welsh Government will be implementing a vaccination certification scheme in Wales. Is that wrong, too? We also know that the UK Government has not discounted such a scheme as part of its winter contingency plan.

On 9 September, this Parliament voted for the Covid passport scheme. The Tories said at the time that the Scottish Government was not listening to business. Three weeks later, the Tories are trying to disregard a vote that was taken only 20 days ago—[*Interruption.*]

I will not give way. I have accepted two interventions and I am in my final minute.

The Scottish Government has used that time to engage with business and produce updated guidelines. It is being pragmatic in its implementation, and that engagement will continue. The new, staged approach that the Scottish Government proposes is designed to help

businesses to adapt to the requirements that the scheme will place on them and to give them a period in which they can operationalise and test their arrangements in practice.

A prime example of that engagement was with the Scottish Professional Football League, which was raised in the debate three weeks ago. The SPFL has said:

“We warmly welcome the indications from the First Minister ... that spot checks look likely to form the basis of vaccine certification at major events ... There remain a number of aspects which require to be finalised but we are hopeful that our positive talks will bear fruit and that Scottish football will continue to play a prominent role in reducing the impact of the virus.”

A Covid-19 vaccination certification scheme will provide a targeted, proportionate means to ensure that Scotland can keep higher-risk settings open. The Scottish Government has said that the approach will be under constant review, and it will reduce the impact of transmission. The Scottish Government's approach strikes the right balance. It meets public health objectives through a suite of measures that will allow business to stay open. I ask members to support the Government's amendment.

15:37

Gillian Mackay (Central Scotland) (Green): In the previous debate on the vaccination certification scheme, I made the point that, with Covid cases still too high and vaccination rates among some age groups slowing, we needed to take action. Although cases have fallen recently, the fact remains that our health and social care services are under enormous strain, and while the virus circulates at such high levels in a partially vaccinated population, the risks of variants and long Covid loom large.

We need to urgently drive up vaccination rates and suppress the virus but, with furlough ending, our options are limited. A return to lockdown measures would mean job losses and economic turmoil. The scheme offers a solution to that problem by allowing us to take proportionate action without reintroducing restrictions.

I recognise that the scheme cannot work in isolation and that it must be part of a wider strategy. It is important that there are continued efforts to address vaccine hesitancy. There have been many harmful comments on social media about unvaccinated people being selfish or conspiracy theorists. We all know that there are some who maliciously spread misinformation about the vaccine, and they should rightly be condemned, as what they are doing is dangerous. However, we will get nowhere by similarly condemning or dismissing people who are anxious or frightened, or who just do not realise the danger

posed to them by Covid because of the perpetuating narrative that only those who are older or have underlying health conditions get sick. People rarely respond well when they are shamed or browbeaten. We need to reassure and persuade those who are hesitant that the vaccine is safe and effective, and that it presents the way out of the pandemic.

I do not want to dismiss the moral and ethical concerns that members have raised about the certification scheme. I have said before in the chamber that I respect their position, and we should of course continue to pay close attention to those concerns. I know that the Government has worked hard to address issues such as digital exclusion. We must ensure that any actions that we take to tackle Covid are proportionate, and it is right that the scheme will be kept under review.

It has been pointed out that Scotland is not an outlier on the issue. The Government amendment refers to the recent announcement from the Welsh Government that, from 11 October, anyone over 18 will have to show either an NHS Covid pass to prove their vaccination status or a negative test result in order to enter nightclubs and attend certain events. As we heard from Paul McLennan, many other countries have introduced similar schemes. I recognise the point about adding a requirement to show a negative test, but I appreciate the current practical issues with that, which the Government has laid out. A vaccination certification scheme is part of the Conservative UK Government's winter contingency planning.

The Tories' hypocrisy on the issue is not surprising. Their obsession with putting economic growth before lives is apparent in this debate and in their complacent attitude towards other mitigations such as mask wearing. The Tory approach to tackling the pandemic has seen a removal of furlough, a cut to benefits and the opening up of international travel, when importing new variants could pose a risk to Scotland's recovery from Covid.

In Scotland, we have to mitigate that recklessness by using the limited powers that we have, and now the Tories want to remove the safeguards that we can put in place. Any responsible Government has to do what it can to limit the spread of the virus using the powers that it has—[*Interruption.*] I am in my last minute.

It is clear that the Conservatives have no interest in such responsibilities. I therefore say to the Tories: instead of coming to the chamber with a one-line motion that seeks to put a halt to one of the few options that are open to us to drive up vaccination and lower transmission, why not come with suggestions for how, after the UK Government's decision to end furlough, we suppress the virus? I challenge the Tories to go

back to their colleagues at Westminster and argue for the extension to furlough to give us more options. The least they could do is attempt to offer some solutions.

The Deputy Presiding Officer: You need to wind up now, Ms Mackay.

Gillian Mackay: Sorry.

The reason why the Tories decide not to offer solutions is that they simply do not have any.

15:42

John Mason (Glasgow Shettleston) (SNP): I am happy to speak in favour of the Government amendment. Frankly, a lot of nonsense has been talked by members of Opposition parties about vaccination certificates. Most of those members have colleagues in similar parties across Europe—on the left, on the right and in the centre—who support such schemes. Scotland is very much in the European main stream in having such certificates. In many ways, the odd one out is England but, once again, we see a great fear among the Conservatives in the Scottish Parliament of being different from our neighbour.

It has been claimed that the measure is being introduced too quickly, yet the reality is that most other measures to do with Covid came in with just two or three days' notice. This time, we have had several weeks, including two debates in Parliament so, compared to other restrictions in the past 18 months, the one that we are discussing today has been one of the slowest to be implemented and one of the most consulted on.

Murdo Fraser: Like me, Mr Mason is a member of the COVID-19 Recovery Committee. The measure is due to come in a day and a half from now. Has he seen the regulations yet that will bring in the detail of the policy, because I have not?

John Mason: We have seen more detail on the policy and had more discussion on it than has been the case with any other restriction that has been put in place.

Tuesday's figure of 1,027 people in hospital with Covid shows how serious the pandemic continues to be. It means that there are hundreds of extra patients in hospital and that hundreds of other people who should be in hospital for operations or whatever are being kept out by Covid.

Therefore, it seems clear that we cannot sit on our hands and do nothing; we have to take action. I suspect that we would be heavily criticised if we did nothing. Therefore, the key question is the one that Ms Mackay just asked. If we are not to have vaccination certificates, what action should we take? We have not heard many suggestions from

Opposition parties this afternoon. *[Interruption.]* No, I will not give way—I will keep going just now.

Perhaps we should have a midnight curfew for all pubs and nightclubs. Perhaps that is what the Tories want. Maybe we should limit crowds at all events, including football matches, to 10,000 people. Those are the kind of measures that we would have to take if we were not to introduce certification. I accept that such restrictions across the board might be simpler and more straightforward to implement. Some might even say that that route would be fairer, as everyone would be treated the same—vaccinated or not. However, surely having blanket closures once again would be harsher, would damage more businesses more seriously and would spoil the lives of many people.

Brian Whittle: John Mason and I are members of the COVID-19 Recovery Committee, so we know the sections of society that are reluctant to get vaccinated. Does he not agree that the solution is to target those groups?

John Mason: We need to encourage people who are reluctant to get vaccinated, but it appears that the majority of unvaccinated people have not been bothered or have not got round to getting vaccinated; they are not against the vaccine. We need to encourage those people, and the scheme is a carrot to do that.

We should learn from other countries' experiences. At the end of May, Greece announced that a certification scheme would be implemented in July, and vaccination uptake jumped in June. After France announced that health passes would be introduced, 4 million people got their first jab and 6 million people made an appointment to get one. In Canada, the number of appointments for vaccination in Ontario and Quebec doubled after the Government's passport announcement. Therefore, if one of the key aims of certification is to encourage uptake of jabs, other countries' experiences seem to be very encouraging.

Vaccines have been around for hundreds of years and are extremely safe. I have lost count of the number of vaccinations that I have had throughout my life, and I am very grateful for every one of them.

15:46

Colin Smyth (South Scotland) (Lab): This debate has shown that, although vaccination passports will be rolled out—or, rather, stuttered out—for large events and venues in Scotland in two days, Scotland is certainly not two days away from being ready.

Labour's concerns have always been practical. They have always been about whether the scheme is the best measure to drive down the virus, or whether it will simply drive up the negative impact on sectors that have already been hammered, such as hospitality and events.

All of us support vaccination. Martin Whitfield stressed that point. We know that vaccination reduces the impact of the virus on our health and, therefore, the impact on our health service, but we also know that it does not stop people from getting the virus or passing it on to others. It is a fact that someone who is vaccinated and has a vaccination certificate could still be carrying Covid, could still be allowed into a late-night venue or large event and, therefore, could still be able to infect everyone else.

The Government's emphasis on vaccination certification only is in danger of giving people a false sense of confidence. It is in danger of undermining the message that our best weapon against the spread of the virus, as the World Health Organization said 18 months ago, is to "test, test, test". Sadly, the Government's approach has never fully embraced the point that testing is the key, whether it was the shameful failure to roll out testing to social care staff earlier, the irresponsible rejection time and again of Labour's calls to introduce testing at our airports to stop the import of the virus, or the fact that Scotland has repeatedly missed the WHO's standard of tracing 80 per cent of close contacts within 72 hours. It has not been a case of test, test, test from the Government; it has been fail, fail, fail.

The failure to recognise testing can be seen in the SNP's amendment and in the health secretary's claim that the process is being replicated in Wales. That is simply not true. The First Minister of Wales, Mark Drakeford, has consistently criticised the ethical, equality and practical problems of a proof of vaccination-only approach. To be frank, the health secretary used to believe that, too. Mark Drakeford has said that the Covid pass scheme

"is different from vaccine certification",

because it allows proof of a negative Covid test for entry. That is very different from the vaccination certification scheme that the Scottish Government is proposing. If we are going to compare policies with those in other parts of the UK, let us have some honesty about what those policies are.

Let us also have some honesty from the Government when it comes to the economic impact on businesses. Time and again, ministers have promised that, when they introduce what they say are public health measures that hit businesses, they will provide extra support. Is the

Government really saying that a vaccination passport scheme in which venues will need to not only check everyone who enters the premises from midnight but either check everyone who is already in the venue at that time or kick them out and tell them to queue up again will not have a negative impact on business?

The scheme will not affect only the 100 nightclubs in Scotland based on the Google definition of a back-bench SNP MSP; it will affect thousands and thousands of pubs and clubs—

Pam Gosal (West Scotland) (Con): Does the member agree that businesses have suffered over the past 18 months and that the SNP is knocking them back down again with this scheme?

Colin Smyth: I agree with that point.

It is important to stress that thousands of pubs and clubs are open after midnight, many of which do not have door staff to enforce this policy, so they might close by stealth, and the public has no idea of the number of venues that the policy will affect.

Where is the promised extra support from the Government? The health secretary said several times that he is listening to the concerns of the business community. Is he listening to Liz Cameron, chief executive of Scottish Chamber of Commerce, who said:

“it is becoming clear that the Scottish Government expect businesses to bear the burden of implementation costs, without any financial support whatsoever”?

Is he listening to Stephen Montgomery of the Scottish hospitality group, who said that the policy was shambolic, and that

“any rushed policy is a bad policy”?

Is he listening to the Scottish Licensed Trade Association? If he were, he might have noticed that it is taking him to court, which is hardly a ringing endorsement. As Daniel Johnson said,

“the situation is a mess, and is it any wonder that those in the hospitality sector feel dismayed?”

This is a bad plan being badly implemented. If the Government were listening, it would put this policy, and not just its enforcement, on hold, and it would think again.

15:50

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney): Both Liz Smith and Michelle Thomson highlighted the fundamentally difficult issue, with which the Government has wrestled for the past 18 months, of balancing the significant impact of the virus on public health with its impact on other aspects of the economic and social life of individuals in our country.

As members know, I have been at the centre of decision making on those difficult choices, and developed the four harms framework, on which basis we have exited lockdown over the course of the past 12 months. The issue of balancing public health questions with economic and social ones is incredibly difficult. Paul McLennan’s speech, therefore, was important; it reminded Parliament that there are on average 2,500 Covid cases a day now, and that more than 1,000 people are hospitalised due to Covid today.

Mitigating factors also exist, such as the fact that substantial levels of vaccination have been undertaken across the country, and I pay due credit to those who have executed the vaccination programme.

Alex Cole-Hamilton: Will the Deputy First Minister take an intervention?

John Swinney: Will Mr Cole-Hamilton let me develop my point?

At previous stages in the pandemic, 2,500 cases a day would have meant that vast sectors of our economy would have had to close to protect the public. With 1,000 or more hospitalisation cases, our national health service is wrestling with significant and acute strain in its operation.

Alex Cole-Hamilton: Those decisions are important. However, does the Deputy First Minister recognise that they demand parliamentary scrutiny, and that this one-hour Opposition debate is practically the only proper scrutiny that those policies have had? Right now, in the Court of Session, Government lawyers are pointing to this debate as evidence of scrutiny in the chamber, and that is not good enough.

John Swinney: The member will forgive me, but a Government debate on the subject took place a couple of weeks ago. I was in front of the committee, which took evidence on the subject, and I will be in front of it again tomorrow, so a significant amount of parliamentary scrutiny is taking place.

Murdo Fraser: Will the Deputy First Minister give way?

John Swinney: Can Mr Fraser forgive me for a second? I want to develop the point that John Mason made: because of the nature of the pandemic and a virus that presents a significant threat to human health and wellbeing, decisions have had to be taken and implemented at pace, most of them an awful lot faster than this particular proposal. That pace is necessary because of the pandemic, but also because of its acute driver—the delta variant.

Murdo Fraser: I asked Mr Mason a question earlier about when we would see the regulations that are being introduced. According to Philip Sim,

the BBC reporter, the Scottish Government's QC told the Court of Session this afternoon that the COVID-19 Recovery Committee would scrutinise those regulations tomorrow. I am the deputy convener of that committee, and I have not seen them—they are not on the agenda for tomorrow. Has the Government's QC just misled the Court of Session?

John Swinney: No. As I understand it, the material will be available to the committee later this afternoon. There is the answer to the question.

Daniel Johnson knows that I have a high regard for him, but I felt that his speech was awfully confused, particularly about the advisability of Zoom calls. Mr Johnson said that

"Carrying on regardless ... is not consultation"

but the Government is not carrying on regardless; the Government has listened and delayed the enforcement of the provisions. Indeed, on the radio this morning, Leon Thompson, the executive director of UKHospitality in Scotland said:

"it is certainly the right decision to delay enforcement. That's something that we've been calling for".

He also said:

"That's certainly welcome news"

and

"This does alleviate some of the pressures and burdens on us which we have been highlighting over the last few weeks."

I am pleased that Mr Thompson was able to put that on the record, because Mr Smyth does not have it in him to say anything decent about this particular issue.

Daniel Johnson: I am afraid that I am still confused and I would be grateful for clarification from the Deputy First Minister. What, apart from delaying the measures, has the Government done to alter them one iota? I have not spotted anything.

John Swinney: If Mr Johnson were to look at the guidance that we have issued, he would see that we have taken a pragmatic approach to the way in which businesses will be expected to implement the regulations. We have set out the various steps that businesses will have to take to make sure that they are in a position to implement the regulations effectively.

Colin Smyth: Will the member take an intervention?

John Swinney: I will have to wind up my remarks, but Mr Smyth can keep persisting from his sedentary position. It is something of a speciality of his.

The Deputy Presiding Officer: No, he cannot.

John Swinney: The Government believes that these are the right measures to be taken to tackle the pandemic, and I look forward to members supporting our amendment at 5 o'clock tonight.

15:56

Murdo Fraser (Mid Scotland and Fife) (Con): I will start by addressing the issue of parliamentary scrutiny. We are having this debate only because the Opposition called it, otherwise it would not be taking place at all.

John Swinney: Mr Fraser seems to have the same amnesia as Mr Cole-Hamilton. The Government brought the issue to a debate a couple of weeks ago. Has he forgotten how badly he performed in that debate?

Murdo Fraser: I recall that debate because I spoke in it, but Mr Swinney could not answer any of the questions that we asked about the purpose of the policy.

We have not seen the regulations. Mr Swinney said that we will see them this afternoon. I have with me the agenda for tomorrow's COVID-19 Recovery Committee and there is no mention of any time being set aside to consider the regulations. Mr Mason has not seen them. I have not seen them. I am sure that other members have not seen them. These measures are being brought in at 5 am on Friday morning and we have no idea what the detail of them will be because they have not been brought to Parliament.

John Swinney: Mr Fraser must surely have looked at the material that the Government has published that gives the details about the scheme that will be brought into effect. It is completely and utterly unacceptable for Mr Fraser to indicate that none of that detail has been put into the public domain by the Government.

Murdo Fraser: I am sure that Mr Swinney knows the difference between the law and policy that has been announced by the Government. Even Mr Swinney must know the difference between those two aspects. Yet again, the Government will bring in regulations as made regulations. They will come into force immediately, without any parliamentary scrutiny, and that is not acceptable.

In this debate, we have been challenged by Mr Mason and a number of other SNP members to say what we would do differently. What are the alternatives? There are two very simple things. First, we would properly resource test and protect so that we are tracing people who have positive contacts and, secondly, we would reach out to those groups who are not accessing vaccinations to increase the take-up of vaccinations. Those are

two practical policies that could be introduced as an alternative to what is being proposed today.

It is more than three weeks since the Government proposed this policy, and we are still no clearer about where the evidence is that supports the introduction of the policy. I remember Mr Rowley in the COVID-19 Recovery Committee asking Mr Swinney if he would bring forward the science that backed up the policy, but three weeks on, we still have not seen it. We can piece together what the Government thinks are the arguments from what Mr Swinney, Mr Yousaf and others have said, but we have not seen the science behind the policy.

It seems to be that the arguments in favour centre around two areas. The first is that having vaccination passports will provide greater protection for people in crowds. There might well be limited protection for people in crowds, although we have heard—Professor Jason Leitch has accepted this point—that because of the delta variant, that protection will be limited. At the event that Mr Cole-Hamilton referenced, even when people were double vaccinated, there was still a risk of infection. Therefore, that is not a complete answer to the question.

The other alternative is that the certification scheme might encourage take-up of vaccination, but we have yet to see where the evidence is to support that viewpoint. Indeed, there are many experts who take the view that it might increase the incidence of vaccine hesitancy. Last week, the COVID-19 Recovery Committee heard from Professor Sir Jonathan Montgomery of the Ada Lovelace Institute, who said:

“The worry is that instead of addressing the reasons for distrust and concern, vaccination passports aim to up the stakes, with people being told that if they want to enter certain venues, they must be vaccinated. That might exacerbate distrust and come back to haunt us.”—[*Official Report, COVID-19 Recovery Committee*, 23 September 2021; c 19.]

Tomorrow, the committee will hear from Professor Stephen Reicher and Professor Christopher Dye—a professor of epidemiology, no less—who also have similar concerns about such matters.

The Government simply has not made the case or produced the science on why vaccination passports are required at this particular time. Indeed, when it made the case three or four weeks ago, the case rates were much higher than they are today. We have seen a very helpful and welcome reduction in the case rates since then. If matters were so serious, as the Government suggested, why did it announce the partial U-turn that we had just yesterday, with the introduction of a grace period of two and a half weeks? If the situation were so serious, surely it would not have done that.

We have heard about the human rights concerns that Judith Robertson of the Scottish Human Rights Commission expressed to the committee last week. She made it clear that the case had not been made for the introduction of vaccination passports. She said:

“There is not clarity about the evidence that is being used to make decisions.”—[*Official Report, COVID-19 Recovery Committee*, 23 September 2021; c 8.]

Jim Fairlie: I, too, am a member of the COVID-19 Recovery Committee. At last week’s meeting, I mentioned that there is a care home company that is based in England that has a care home in my constituency that is sacking people who are not double vaccinated. Whose human rights are more important—the people who go into the care home to be looked after and stay alive or the people who refuse to be double vaccinated?

Murdo Fraser: I have 20 seconds left. Mr Fairlie has raised a really significant issue that requires a serious level of debate and discussion. I will not give Mr Fairlie an off-the-cuff response, because that would not do justice to the serious issue that he has raised, which is one that I sympathise with.

I will be brief in winding up. As we have heard, industry has a lot of concerns. So strongly does the Night Time Industries Association Scotland feel about the damage that will be done to the economy that it is taking a legal case against the Scottish Government in the Court of Session.

Just last week, thanks to the travel industry’s raising of concerns, we had an SNP U-turn on the requirement that international travellers who were double vaccinated also had to have a polymerase chain reaction test. Yesterday, there was another U-turn, with the introduction of a grace period. If the Scottish Government can rethink those issues, it must rethink the issue of a vaccination certification scheme, too.

We know that there are back-bench SNP members who are concerned about the policy. Indeed, even SNP front-bench members were expressing their concern about the policy just a few weeks ago. We also know that there are members of the Green Party who are deeply concerned about it. I hope that, for once, SNP back benchers will grow a backbone, stand up to the front bench and say, “This policy is damaging, it is not wanted and it should be put on hold.”

That is why I support the motion in the name of Douglas Ross.

The Deputy Presiding Officer: Thank you. We have no time in hand, so I ask front-bench members to change over as quickly as possible so that we can move to the next item of business.

Legal Right to Recovery

The Deputy Presiding Officer (Liam McArthur): The next item of business is a debate on motion S6M-01416, in the name of Sandesh Gulhane, on a legal right to recovery. I invite members who wish to participate in the debate to press their request-to-speak buttons or to place an R in the chat function. I call Dr Gulhane to speak to and move the motion.

16:04

Sandesh Gulhane (Glasgow) (Con): The ongoing failure of successive Scottish National Party Administrations to tackle a spiralling drug addiction epidemic that is ruining countless lives is a national scandal. There were 1,339 drug deaths in Scotland in 2020, an increase of 5 per cent from 2019. Since 2007, the number of drug-related deaths has almost tripled. Scotland's drug death rate is more than 3.5 times that of the United Kingdom as a whole and is higher than that of any other European country. People in our most socially deprived communities are 18 times as likely to die from drug-related deaths as those from affluent areas. Those are statistics, but every death is a person's and a family's world turned upside down.

Given those stark facts, after two decades of devolved government and 14 years of an SNP Administration, I cannot help but conclude that the Parliament has not yet grasped what drug addiction means—otherwise, we would have solutions by now. We sit in this iconic Parliament, which was once described as

“a tour de force of arts and crafts and quality without parallel in the last 100 years of British architecture”,

and we are far removed from the lives of addicts in our communities, whom we have a duty to help.

When I listen to proposed solutions to our country's shameful record on drugs, all I hear are aspirations that are based on a version of life success that means little to those outside these walls who are struggling with addiction. As a Glasgow general practitioner, let me tell members what success means to our fellow Scots who are living on the edge. Success is not simply stopping taking drugs; success is just waking up. Success is not not breaking the law to buy drugs; success is getting through the day without being abused.

One of my patients—let us call her Rose—started smoking as a young teenager before being offered cannabis. She got in with the wrong crowd at the age of around 13 or 14 and started taking cocaine and, eventually, heroin. What made Rose change track was an utter tragedy—she watched her best friend overdose and die in front of her. She knew that she was next unless she changed.

She knew that she could not do that any more and survive.

She needed help and she had the courage to ask for it. Rose was lucky, because help was there at Hunter Street health centre in Glasgow's Gallowgate. That centre brings together many of Glasgow's homeless and health and social care services under one roof, alongside a dedicated GP service. Rose is now off drugs and holds down a job in Glasgow. She got there because of the all-round support that was in place. Rather than decriminalise drug use and make it a justice issue, we need to medicalise it and provide a joined-up approach across services that will support drug users' recovery and give them a path to a new life.

Another patient of mine—let us call him Paul—was once a very heavy drug user and so overwhelmed with life that he attempted suicide. Thankfully, he has reduced his consumption and is now on the long road to recovery. That is what success looks like. Both Paul and Rose say that the key to success is the support services being ready to grasp the opportunity when someone first says, “Help. I want to stop.” That response must be quick.

People need, as soon as possible, to get on a pathway that includes help with housing, basic care, GP services and mental health counselling—all the elements that the Scottish Conservatives have set out in our right to recovery bill. We want to guarantee that everyone in our country who needs drug treatment can receive it. That is the cornerstone of a strategy to tackle our national scandal and to turn the tide of ever-increasing drug-related deaths. We want to provide all the appropriate treatment options that our country has at its disposal, so that those seeking help and their support team can have the best possible care plan. That is ambitious, because most of our communities do not have a Hunter Street. However, we need to do it—no ifs, no buts.

Rehabilitation requires medical service-led solutions—laws do not cure addiction. However, while we sit here, in our design award-winning chamber, let us have a think about not going down that route. What if we just tried decriminalisation? I know that the Government will say that what has been announced is not back-door decriminalisation, but the public perception is that it is, and that is what really counts. If we do not have in place a credible support and rehabilitation regime that is well planned and resourced, do we think that those who are suffering in our communities are going to be okay? We would not be able to cope if only 10 per cent of all drug users said that they wanted to quit tomorrow. Our fellow Scots, who are on the edge, need our help and we need to get working on this now. Practical action is

much more progressive than simply passing legislation.

There are unintended consequences of decriminalising class A drugs. Drug use could actually increase, particularly among recreational drug users such as the weekend user. Not all drug users are the stereotype whom people think of. There are adults holding down jobs who use drugs such as cocaine from time to time, knowing that doing so is a criminal offence. We need to ask ourselves this question: if it is no longer illegal, are they going to stop, continue or even start using more?

We are dealing with one of Parliament's most pressing matters, and that is well overdue. We are seeking to consult the Government on the Lord Advocate's statement of 22 September. Given the importance and potential consequences of the Government's position, we feel that our request is reasonable. We have given our debate time to the matter and we would like the Government to do the same.

We also seek a cross-party commitment to back our motion today, so that we can move to enshrine in law a right to recovery—a progressive, medical approach to Scotland's humanitarian crisis. Let us act to rehabilitate the most vulnerable in our communities, and let us do that now.

Before I move the motion in my name, I declare an interest in that I am a practising doctor.

I move,

That the Parliament believes that record drug deaths in Scotland are a humanitarian crisis; further believes that progress in the rehabilitation and treatment of addiction in Scotland has been too slow; calls for a legal right to recovery to tackle Scotland's ongoing drug deaths crisis with the urgency that it deserves; notes that the possession of class A drugs is a serious offence and should not be dealt with through warnings that seek "not criminalising" offenders; believes that the content of the Lord Advocate's recent Ministerial Statement deserves proper consultation, and calls for the Scottish Government to set aside time to debate this matter in full.

The Deputy Presiding Officer: I call Angela Constance to speak to and move amendment S6M-01416.3.

16:11

The Minister for Drugs Policy (Angela Constance): I welcome Sandesh Gulhane to his new role and wish Annie Wells a speedy and full recovery.

It should come as no surprise that the Government cannot support the whole of the motion that has been lodged by the Conservatives. I have consistently acknowledged that we are facing a public health emergency. The loss of life from drug-related deaths is as

heartbreaking as it is unacceptable, and I once again offer my condolences to all those who have lost a loved one and my continuing commitment to doing everything possible to turn the tide on drug-related deaths.

My position is clear: this Parliament and the United Kingdom Parliament should consider any proposal that is based on evidence and that can play a part in saving lives. That includes upholding the rights of individuals to recovery or treatment, whether that be through harm reduction or through recovery in communities or residential settings.

Last weekend, I spent time on the recovery walk in Perth with some absolutely amazing people who have achieved great things despite great adversity on their journeys through life. I strongly believe that supporting the Conservative motion today would be letting down all those people and many others, because it fails to recognise that addressing drug misuse has to be done through a public health approach.

Jamie Greene (West Scotland) (Con): Which bit of our calls for a right to recovery—our calls to enshrine in law that right to rehabilitation and treatment—is letting those people down?

Angela Constance: I was actually talking about the Conservatives' hysterical reaction to the Lord Advocate's statement last week. With respect, if Mr Greene had perhaps paid attention to the many comments that I have made about Conservative calls about its right to recovery bill—which, interestingly, is now called that rather than a right to treatment bill; perhaps the reason for that will come out in the debate—he would know that I have always said that, once the bill has been published and I and others have had the opportunity to ensure that it will do what it says on the tin, I will give a view on it. I have an open mind about whether, at some point, we need to legislate.

The national mission that we have announced comes with an additional £250 million in funding and is driven by the rights that people already have—the rights to respect and healthcare and the human rights that this Government is strengthening through a new framework. The creation of a national care service will also be an opportunity to make those rights real, just as we are doing through our national mission. The work that is being done by the residential rehabilitation development working group will help us to increase capacity in rehab and improve services, including aftercare. The introduction of medication-assisted treatment standards will help to ensure that people have immediate access to a wider range of treatments in more settings, including where they are. Those practical measures will help to make rights a reality.

One of the most significant changes that is being called for through the national mission is the embedding of a public health approach, wherever appropriate, in our justice system. As, I am sure, members are well aware, prosecution policy is not something that the Government or Parliament has a role in deciding. That is for the Lord Advocate in her capacity as an independent authority, as is set out in legislation. Nevertheless, this Government welcomes the change, as it is clear that people with a drug dependency must be supported and helped with their addiction. We know from countries such as Portugal that diversion from prosecution for drug possession towards support or treatment can be an opportunity to secure better outcomes for some of the most vulnerable people in society. I note from the amendments that have been lodged and from the discussion about the Lord Advocate's recent statement to Parliament that there is widespread support across the Parliament for her decision and widespread support for police diversion.

If the Labour amendment is not pre-empted by my amendment, I will support it, with its reference to "safe consumption facilities" and naloxone. I will continue to prioritise the use of naloxone, including by police officers. I recently had the opportunity to discuss with Police Scotland the police's continuing role in the national naloxone programme, and I sought assurances about the support and training that are available to our police officers. We launched the national naloxone campaign last month, which has already significantly increased demand through our third sector partners. That is welcome.

I am aware that the Conservatives will shortly publish a draft right to recovery bill, and I will be happy to consider the bill closely. As I said, I have never ruled out the need for further legislation, but, as I have set out to Parliament several times this year, my focus will be on making rights a reality by getting more people into the treatment and recovery that are right for them, and at the right time. I am focused on making sure that, through the MAT standards and increased capacity in residential rehabilitation over the next five years, everything possible will be done to reduce drug deaths. *[Interruption.]* I cannot take an intervention, as I am about to run out of time.

The Deputy Presiding Officer: The minister is concluding.

Angela Constance: I genuinely hope to see something positive and practical in the proposed bill, but I will have to be satisfied that what is being proposed will not have a negative impact on existing practice and other existing rights. There are crucial rights already in legislation—for example, in the Patient Rights (Scotland) Act 2011 and the Children (Scotland) Act 1995—and I look

forward to hearing from the authors of the bill how those rights will be fully retained.

I move amendment S6M-01416.3, to leave out from "further" to end and insert:

"and public health emergency; offers its condolences to the thousands of families across Scotland who are grieving the loss of loved ones to drugs; believes that the Scottish Parliament and the UK Parliament should consider any proposal that is based in evidence and that can play a part in saving lives, including the right to recovery and harm reduction approaches; recognises that addressing drugs misuse must primarily be taken forward as a public health matter; supports that the £250 million investment to help address drugs deaths will support residential rehabilitation, community rehabilitation, Medication-Assisted Treatment standards, and a range of approaches to reduce harm; understands that prosecution policy is decided independently by the Lord Advocate and is not set by the Scottish Government or the Parliament; notes that experiences from other nations such as Portugal show that diversion from prosecution for drug possession towards support or treatment services can be an opportunity to ensure better outcomes for some of the most vulnerable people in society."

16:18

Claire Baker (Mid Scotland and Fife) (Lab):

Last week, I welcomed to Perth, in my region, the recovery walk Scotland. In the debate, as we focus on Scotland's high and unacceptable level of drug fatalities and mourn the unnecessary loss of life and loved ones, we must recognise the potential for recovery and the importance of investing in people and services.

The grip of addiction is powerful and unrelenting. People need support services to be flexible, responsive, free of stigma and committed to the long term. The recovery walk shows that change is possible. We must do all that we can to support people to make the change.

We are all aware of the Scottish Government's complacent approach to drug addiction and treatment in recent years. Cuts to alcohol and drug partnerships led to a contraction in services. There was a lack of focus on the rising number of deaths, and there was a lack of urgency in responding.

However, as I said in the debate in June, this is the start of a new parliamentary session and I will work with Government and other parties to deliver meaningful and significant change, to ensure delivery of the MAT standards and to scrutinise policy to see whether it is making a difference. We must be open minded and evidence led.

We will consider the member's bill that the Conservatives intend to introduce. I am open minded on the proposal to introduce a legal right to recovery, but I think that it needs scrutiny. It must be able to deliver what it sets out to achieve. The organisations that are working with the

Conservatives on the bill are doing so out of a sense of frustration and a desire to help people who are looking for support.

This week I met Annemarie Ward from Favor—Faces & Voices of Recovery UK. I can understand the frustration over the lack of change, inadequate services, the postcode lottery of care and the lack of options for people seeking treatment. We will consider whether a legal right to treatment will address those issues. We must ask whether it will deliver the funding that is needed. Do we need it as a lever to drive the delivery of services? Will a meaningful right be realised? Those are issues that need to be explored in detail.

The Conservatives need to recognise that, while recovery and treatment options are vital and must be prioritised—and I agree that we need greater focus on investment—the solutions for reducing drug deaths are as reliant on harm reduction programmes as they are on rehab. Facilities that support harm reduction, whether consumption rooms, testing facilities or needle exchanges, address the reality of drug use. It is not fatalistic to accept that some people will continue to take illegal drugs regardless of what we say in the chamber, and the choices should not be to leave them in potentially life-threatening situations, such as ingesting dangerous batches of street drugs; or to wait and see whether they pursue recovery—if they make it that far; or to continue to deal with this group of vulnerable people as criminals.

Brian Whittle (South Scotland) (Con): Does the member agree with me that part of the solution must be prevention—preventing people from taking on drugs in the first place?

Claire Baker: That is a key point, and that is something that needs to be invested in, but we cannot ignore how important it is to have harm reduction policies and proposals that support people through the difficult addictions that they are living with. Supporting harm reduction measures, whether those are safe consumption rooms or testing facilities, is not condoning drug use; it is simply being aware of the harsh realities of living with a drug addiction.

The commentary from the Conservatives over the weekend in response to the Lord Advocate's decision was disappointing, and it misrepresented the policy, although their outrage at the decision is faux. In 2018, they supported diversion from prosecution. It was the Conservatives who highlighted Durham's checkpoint diversion scheme as a model to emulate.

The Lord Advocate came to the chamber, as the Parliament called for, and I support her decision to expand recorded police warnings, which, we should be clear, was her decision to make. That does not change the offence—it is still illegal—but

it changes how the Crown Office and Procurator Fiscal Service will deal with it. Police already use RPWs, and they are familiar with the judgment and professionalism that are needed to use them.

In the past year, the number of diversions from prosecution has doubled, and I hope that the change announced by the Lord Advocate will increase that further. However, the Scottish Government needs to deliver on its side of the equation. There have to be reliable, viable options for Police Scotland and authorities to direct people to, and all agencies must work together.

I want assurances that Police Scotland is enabling the national roll-out of naloxone. Social media reports at the weekend demonstrate a need for awareness raising and training for officers. The Lord Advocate has set out the role that our criminal justice services can play, but they need support from other services for that to be successful.

I support the right of everyone to enter recovery services. I agree that the pathways are not good enough right now, that they fail too many people and that they lack the capacity to meet the need and demand. I understand the frustration and disappointment of families who have been let down by services.

I do not want to regret putting faith into the MAT standards, and that is why I will hold the Government to account on delivery. We need the Parliament to be informed of progress. The charities that I know that are working with people with addictions tell me that, if the standards are fully introduced, they will be transformational for people who are ready to change their lives.

I move amendment S6M-01416.2, to leave out from “calls for a legal right” to end and insert:

“welcomes the Lord Advocate's recent Ministerial Statement regarding diversion from prosecution and the expansion of the use of Recorded Police Warnings; recognises the urgent need to ensure that individuals can access treatment and recovery services when they need them and will consider all proposals that reduce harm and support rights to access treatment; recommends that the Scottish Government urgently considers all options within the existing legal framework to support the delivery of safe consumption facilities, alongside expanded community resources that help people avoid substance misuse and improve access to residential rehabilitation and treatment, and seeks assurances that Police Scotland is trained and supported to respect the nationwide roll-out of the provision of naloxone.”

16:23

Alex Cole-Hamilton (Edinburgh Western) (LD): I start by welcoming Sandesh Gulhane to his place. I look forward to working with him.

We are often divided in the Parliament, but I have heard, in the speeches made by members

from all parties so far this afternoon, a counterpoint of and symmetry with my commitment to fighting this emergency. How we go about doing that is a different matter, as is evidenced by the motion and the amendments that were lodged for the debate, but we are working towards the common goal of stopping people from dying. On that, I thank Angela Constance for reaching out several times to me and my party. I welcome that approach. However, we cannot ignore that there are aspects of the motion that the Government amendment seeks to erase. For example, the Government fails to acknowledge its failures or to recognise the systematic problems that have arisen from the SNP's decision to cut funding for alcohol and drug partnerships by as much as 22 per cent in the 2015-16 financial year. That sent us to the wall and severed relationships.

I believe that the Government has made progress on accepting responsibility for that, but I do not want the Parliament to revise the history of how we got to this point by backing the Government amendment. I therefore must inform the minister that, after consideration, I will not support that amendment tonight.

If progress is to be made, we have to be honest about where we are and how we got here. Progress so far has been far too slow. We have the worst drug mortality rate in the entire developed world—it is nearly four times the rate of our neighbours in England and Wales. This summer, official statistics revealed that 1,339 people died of drug-related deaths in 2020. That was an increase of 5 per cent, and it is the seventh year in a row that Scotland has reported record numbers of drug-related deaths.

In December last year, a new Minister for Drugs Policy, Angela Constance, was announced by the Government to give focus and attention to the crisis. I do not doubt Ms Constance's ability or commitment to her charge, but we are yet to see the progress on the ground that we need. Two weeks ago, the interim statistics were released, showing that there were 722 suspected drug deaths during the first six months of this year. At that rate, drug-related deaths will continue at the same terrifying rate as previous years, and we will continue to set invidious records.

Despite the focus of an entire ministerial portfolio, additional investment and interventions such as an increased roll-out of naloxone, people have not stopped dying. That is why, last week, I wrote to the director general of the World Health Organization asking for international help. I believe that Scotland would be well served by a WHO task force, made up of leading experts in drug mortality, to assess and analyse this particularly Scottish problem.

The drug deaths crisis in Scotland needs a revolutionary strategy in order to make a meaningful difference to the way that we treat those who suffer from drug addiction and—crucially—to save their lives. That starts with innovative approaches, such as that of Peter Krykant and safe consumption rooms. The Liberal Democrats will support the Labour amendment tonight.

I am open to the idea in principle of the right to recovery, as laid out in the Scottish Conservatives' motion, but my concern is that it will become simply another piece of feel-good legislation. I look forward to the publication of the bill—we will scrutinise it with an open mind, and we offer the hand of friendship to work through the issue with colleagues across the chamber. However, where the Conservative motion fails is in the human aspect of the drugs crisis and in the recognition of steps that we are trying to take to lessen that impact. The Liberal Democrats have had an evidence-based approach to drug policy for many years. We called for the decriminalisation of drug use long before any other party, because people should not be punished for suffering. The motion, however, rails against even the smallest steps towards that approach, announced by the Lord Advocate last week. We have to reduce the misery of drug abuse with compassion and health treatment, rather than prosecution and criminalisation, because people's lives depend on it.

16:27

Russell Findlay (West Scotland) (Con): All members will surely welcome the opportunity to debate last week's truly seismic announcement. It is remarkable that greater discussion has taken place in newspapers and on television than in this Parliament. Who would have thought that drugs law could be so radically altered at the stroke of a pen?

We keep hearing that Scotland's drugs deaths crisis must be treated as a matter of public health rather than of criminal justice. Many say that the war on drugs has long been lost. There is agreement that much more needs to be done to counter the root causes of abuse and give addicts the treatment that they deserve and need. It is for that reason that the Scottish Conservatives plan to introduce a right to recovery bill, as explained by my colleague Dr Sandesh Gulhane.

The SNP Government's effective decriminalisation of heroin, crack cocaine and other class A drugs will be felt in communities across Scotland. Normalising possession of those highly dangerous substances and removing the threat of prosecution will diminish the stigma surrounding those substances.

Angela Constance: Would Mr Findlay accept that the recorded police warning system has existed since 2016? On his colleague Mr Gulhane's contribution about the need for treatment and support, and reducing risk, would he accept that class A drugs such as heroin present the highest risk to individuals, and therefore those individuals need our help and not our punishment?

Russell Findlay: That is the very point that I am making. They need our help, and they need a right to recovery, but the current approach is wrong-headed.

The logical inevitability of decriminalising possession, as is happening now, is an increase in the social acceptability of drugs, and in their prevalence and use. Drug dealers will be delighted. Saving lives is the apparent justification for that gamble, but where is the evidence and the joined-up thinking?

I have spent the past month badgering the Cabinet Secretary for Justice and Veterans, Keith Brown, about the prevalence of drugs in our prisons. We know that most drugs get inside by being soaked into items of mail. Chief among them are the psychoactive substances, such as etizolam—so-called street Valium—which causes serious medical harm to prisoners and puts staff at increased risk. Prisoners who desperately want to overcome addiction are failed by jails that are awash with drugs. For many of those prisoners, the prisons have revolving doors.

Despairing staff say that a simple and effective solution can be found. By giving prisoners photocopies of mail, and withholding the original items, a drastic reduction in the amount of drugs getting in can be achieved. That happened during the Covid lockdown, but, from the very day that those restrictions ended, staff reported a significant and dramatic increase.

I raised the matter with Mr Brown at the Criminal Justice Committee on 1 September, and I raised it with him again, in the chamber, on 15 September. Both requests were met with a vague undertaking to look into it. I raised the matter with him again on 16 September. My letter to him concluded:

“Given the urgency of this matter, I would appreciate immediate action and, if that is not possible, a full explanation as to why not.”

The day after the Lord Advocate's announcement, I received Mr Brown's response. His letter appeared to have been constructed by a committee of civil servants. I will read members an excerpt. It said:

“preparatory work into exploring the implications of a change into how we conduct SPS mail processes is well underway. This work involves assessing the full impact, risk assessment, legal implications and operational

requirements associated with a change in how individuals' mail is handled. Once an options appraisal has been reviewed—”

The Presiding Officer: Mr Findlay, I ask you to begin to wind up, please.

Russell Findlay: Members will get the gist, but I will put those words into plain English. The Government could act now, but it will not. Drugs inside will remain as abundant as ever before. More prisoners will overdose, and their chances of rehabilitation will remain vanishingly small.

If the SNP is sincere about—

The Presiding Officer: Thank you, Mr Findlay.

Russell Findlay: I urge members to back the Conservative motion.

16:32

Stuart McMillan (Greenock and Inverclyde) (SNP): I remind members that I am a board member of Moving On Inverclyde, which is a local addiction service.

Not one MSP wants the drugs crisis to continue. The Tories have been talking about a proposal for a legal right to recovery, and the cabinet secretary has—quite rightly—indicated today, and on multiple occasions beforehand, that the Scottish Government will look at any proposals that come forward. That is right and proper. Asking a Government to sign up to something that has not yet been written is no way to do policy, and the Tories know that. That notwithstanding, the Scottish Government has never ruled out the need for further legislation, and it will consider the detail of the draft right to recovery bill once it is made available.

The Conservatives are, through their proposal, asking the Scottish Government to do something, but some things are already happening. First, getting people into the treatment and recovery that is right for them, at the right time, is at the core of the Scottish Government's national mission to save and improve lives.

Most of the issues that have been proposed for legislation are addressed by the recommendations of the residential rehabilitation working group, which the Government has already accepted. The Scottish Government is already investing in increasing the capacity of residential rehab nationally; developing good practice on referral pathways; and exploring options for standardisation and national commissioning of services.

As members know, the Scottish Government is providing additional funding of £250 million over the next five years. That funding commitment

emphasises the importance that is placed on tackling this public health emergency.

There are a range of measures being taken forward, and investments being made. In particular, I welcome the move to a five-year funding cycle for those eligible third sector and grass-roots organisations that are at the forefront of saving lives. I have spoken about that decision previously in the chamber, and when I met the minister earlier this year, and I know that it will certainly save lives across the country.

Third sector organisations provide a range of services that are not always available via public services, and they can also adopt a different approach. We must empower more people to seek support and make that support more consistent, flexible and effective and available more quickly, as well as help services to stick with the people they support.

The additional investment will also be used to support a range of community-based interventions, including primary prevention, as well as an expansion of residential rehabilitation. Ultimately, the guarantee of funding to third sector partners will provide them with surety and will enable them to plan and deliver their services going forward, instead of always having one eye on funding bids.

The Parliament has heard time and again about the need for bold actions and decisions to deal with the drug deaths crisis. It is a national emergency, and we can all agree that we need to be bold and push ourselves into thinking about possible solutions and policies that will help our fellow citizens and our constituents, no matter how difficult that will be.

Last year, 33 people died in Inverclyde, and 1,339 people died in Scotland. Whether or not we want to admit it, the war on drugs cannot be won in the way that we have been doing it so far. I am pleased with the large drug hauls that take place across my constituency and the country, but that does not stop individuals obtaining drugs. We must also learn lessons from elsewhere, because we are failing our constituents if we do not. Insanity is doing the same thing over and over again and expecting different results, so this Parliament has begun to adopt a different approach.

I will back the amendment in the name of the minister and I will not vote for the motion from the Conservatives.

16:36

Sue Webber (Lothian) (Con): Last week, the SNP announced that it was effectively decriminalising all class A drugs, including heroin,

meth and crack cocaine. The possession of class A drugs is a serious offence, and that is the biggest shift in drugs policy in years, as my colleagues have said today. Normally, the Scottish Government is quick to consult and we cannot move for consultations, but on that, there was nothing—no debate until today and no stakeholder involvement.

Angela Constance: Is Ms Webber aware that 89 per cent of people who die from a drug-related death have opiates in their system? We can offer someone who has cannabis in their possession a recorded police warning. If we are serious about saving lives, is there not a bigger case for being able to offer a recorded police warning to someone who has opiates in their possession?

Sue Webber: That was quite a question, given that I have only four minutes. Although drug deaths are rising, the number of people who are convicted of drug offences has continued to decline, so I will carry on with my speech.

Rather than just softening the rules for drug dealers, the SNP should focus on guaranteeing treatment for anyone who needs it. Decriminalising class A drugs by the back door will help only drug dealers, who are ruining our communities, and that extreme move by the SNP will do nothing to save lives.

The answer to our drug deaths crisis is complex, and increasing the treatment that is available to those who need it should be at the heart of it. Anne-Marie Ward, chief executive of Faces & Voices of Recovery, has said that we have to be very clear

“not to view this as a silver bullet. This move will help but ultimately, it will not help people to get well on its own. It will not save lives on its own. It has to be accompanied by increasing access to treatment and rehabilitation or nothing will change.”

This week, I met Jay Haston from the WAVE Trust. He is a former drug addict and he said that the decriminalisation of drugs will not fix the root cause of Scotland’s drug deaths problem, because all that it does is put yet another

“plaster on top of an already bleeding plaster”,

and that, now,

“everybody is having a party in the street”,

because people from all walks of life are no longer scared to carry drugs.

On Monday, I visited Waverley Care. As Stuart McMillan said, we need more funding for third sector organisations that directly help people in such situations. In Glasgow, Waverley Care is helping vulnerable women, often victims of domestic abuse, who are caught in a cycle of drug use and broader health harm. It is a person-centred service, which is flexible in responding to

an individual's needs and enables them to escape the harm that is caused by drugs. We need more of that.

I urge everyone to back the Scottish Conservatives' right to recovery bill, which would guarantee treatment or rehabilitation for anyone who needs it. Today, all we are asking for is time to be set aside to debate the matter in full.

Scotland's drug crisis is the SNP's shame. We need to see access to rehabilitation, not dangerous drug decriminalisation. Former Strathclyde Police Chief Superintendent, Tom Buchan, said:

"Talk about abject surrender ... it should worry everyone. It shames us as a country."

I support the Conservative motion from my colleague Sandesh Gulhane.

16:41

Carol Mochan (South Scotland) (Lab): There seems to be general agreement that we must treat drug deaths in Scotland as a public health issue, not a matter of law and order. I think—I hope—that somewhere among members on the Tory benches, there is an understanding of that. In order to progress and pull our country out of the spiral, we will need to maintain that understanding, and my party will support measures to do so.

I am sure that my parliamentary colleagues will have noticed that, since Scotland re-established its Parliament in 1999, there has not been a parliamentary session in which drug deaths were not a serious concern for the constituents whom members are committed to represent. However, the seriousness with which the Parliament has treated the problem has only recently got anywhere near the level that is required to tackle it. Having seen some examples of other countries that have worked miracles to put a stop to deaths multiplying annually, we are now slowly waking up.

The Lord Advocate's recent statement is simply realistic. It is not anything that the average person on the street would not understand as necessary. Drug abuse and its effects are not hidden away any more. We all see drug abuse, but far too many just want to keep it at arm's length. Equally, the Lord Advocate's intervention has had the positive effect of keeping the issue in the headlines during a time when, naturally, there has been a considerable focus on other health issues. That attention is sorely required.

Prior to Covid, a reform that was getting considerable attention—in no small part due to the great work of my party colleague Paul Sweeney—was safe consumption facilities. They are not an ideal solution, nor one that I particularly envisioned having to support, but over the years, it has

become obvious that the scale of the problem in Scotland is well beyond slogans and awareness campaigns. We need to treat the issue with the same seriousness with which we treated the pandemic, and providing safe facilities to prevent death has been proven to work. That is one example of the direct and meaningful approaches that we need to take at all levels of health policy, policing and education. However, it requires serious funding.

In my region, NHS Ayrshire and Arran is experiencing the second highest rate of drug deaths in Scotland. Much of the work falls on the shoulders of community health workers, hospitals and the police, who are overworked, underpaid and left with resources that are stretched to breaking point. Undoubtedly, councils and health boards see the problem as a priority, but they simply do not have the funds to tackle it all the time. We need to expand community resources and improve access to residential rehabilitation and treatment to get on top of the issue. Part of that involves giving the police the time and training to support any reforms that take place, and not forcing through a new model with little consideration of those on the front line.

The police officers whom I have spoken to will be relieved to hear that a more pragmatic approach is now being taken on drugs, because it frees them up to do the policing that they joined the force to do. Included in that should be proper training, so that officers are prepared to respect the use of naloxone to prevent overdoses, as the minister mentioned.

The debate does not have to be about who can show themselves to be the toughest on people with serious addictions. If it becomes so, that is just about politics, not progress.

Poverty is at the heart of the issue. Although I fully endorse all the measures that I have mentioned, the biggest reform that we could push through to end the crisis would be to remodel our economy and society so that it does not have built into its architecture acceptance that the vast number of people should simply be left to struggle in desperation while others have more wealth than could ever reasonably be required.

16:45

Collette Stevenson (East Kilbride) (SNP): The loss of life in Scotland from drug-related deaths is heartbreaking and unacceptable. The Scottish Government is committed to implementing approaches that reduce drug-related harms now and in the longer term as we tackle that national mission.

To do so, we need a public health approach that supports people with addictions, not an approach

that criminalises large swathes of the population. We need to take bold decisions, not continue with Westminster's failed Misuse of Drugs Act 1971. We need to consider each person as an individual and offer them the most appropriate treatment, not impose a one-size-fits-all response.

The Tories are calling for a right to recovery, but, in the same breath, they want to jail people caught in possession of drugs. I ask that the member who closes for the Conservatives enlightens us all on a matter: is someone with an addiction a serious offender who should go straight to jail, or are they a person who deserves quick and appropriate treatment from health professionals? *[Interruption.]* No, the member can answer that in their own time.

The Government amendment mentions an alternative: Portugal's public health approach, where drug use and drug-related deaths are consistently below the EU average, and the proportion of prisoners sentenced for drugs offences has more than halved.

The Westminster war on drugs has failed. The Tories are stuck in the 1980s. We cannot arrest our way out of the drugs crisis. We need bold thinking to reduce drug deaths in Scotland and the UK Misuse of Drugs Act 1971 needs to be reformed.

Professor Fergus McNeill told the Criminal Justice Committee that

"punishment is not a smart response"

to problems such as substance misuse and that that debilitates people. *[Interruption.]* No, I would like to move on, thank you.

Professor McNeill also told us that criminal justice investment should be

"directed to diversion at every possible turn."—*[Official Report, Criminal Justice Committee, 15 September 2021; c 18-19.]*

[Interruption.] No, thank you.

The Lord Advocate's statement last week is, therefore, very welcome. As she made clear, guidelines on diversion are set by her, independent of any other person. Recorded police warnings do not represent decriminalisation; they offer a proportionate justice response in select circumstances. For example, if someone with an addiction is caught in possession of a small quantity of drugs, diversion from prosecution might be appropriate. Importantly, that will allow police more time to tackle the dealers and give drug users an opportunity to seek help. *[Interruption.]* I am sorry, but no—I want to make progress.

Many new policies and initiatives have been announced and delivered by the Scottish Government in its national mission to tackle drug-

related deaths. That is backed up with additional investment of £250 million over this parliamentary session.

One of the major measures that the minister is working to implement is the medication-assisted treatment standards. Those will ensure that patients can access evidence-based, high-quality services, with same-day treatment, harm reduction and support to remain in treatment for as long as requested.

I have spoken before about the Beacons, which is a Lanarkshire-based recovery community. Earlier this month, peer volunteers delivered a presentation on their research project. Their conclusion was clear: the Misuse of Drugs Act 1971 is not fit for purpose, and we need a public health approach, not a criminal justice approach, if we are serious about reducing drug harm. Theirs is the voice of experience. Let us listen to them.

16:49

Gillian Mackay (Central Scotland) (Green): I would like to extend my condolences to everyone who has lost a loved one to a drugs overdose.

During the debate on drug-related deaths in June, I spoke about dignity—the dignity of people who use drugs and how they are so often robbed of it by a system that seeks to punish them for their addiction. We cannot treat drug-related deaths as the public health emergency it is while we continue to criminalise people.

This is a health debate, which is being led by the Tories' health spokesperson, so I hope that we all agree that it is a health issue, not a criminal justice one. Yet I have to admit that I do not understand some of the tone from the Conservatives during the debate, or some of the content of their motion. It begins by calling drug-related deaths a "humanitarian crisis", but a few lines later it calls for people who are found in possession of drugs to continue to be criminalised. How can we solve a humanitarian crisis by criminalising those who are most affected by it? We must abandon the failed war on drugs, which stigmatises people and actually makes it more difficult to access treatment and support.

We need a harm-reduction approach. In June, the majority of members supported my amendment that called on the Scottish Government to investigate, as a matter of urgency, what options it has to establish legal and safe consumption rooms within the existing legal framework. Safe consumption rooms have been operating in Europe for 30 years, and there is evidence that they result in immediate improvements in hygiene, safer drug use, and wider health and community benefits. The Scottish Greens have long maintained that safe

consumption rooms are an important public health measure that would play an important role in preventing drug-related deaths. I know that work on that issue is progressing, and I look forward to hearing updates in due course from the minister.

As the Government amendment notes, the Scottish and UK Parliaments should consider any evidence-based proposal that can help to save lives, including a right to recovery. On the issue of rehabilitation, it is clear that residential rehab provision needs to be greatly expanded, so that everyone who needs it can access it.

Sue Webber: Now that the member is part of the Government, can she tell us how many more residential rehab beds will be made available this year?

Gillian Mackay: I thank Sue Webber for my promotion, but I am not a member of the Government.

To quote a Scottish Drugs Forum briefing:

“For some people in some situations, residential rehabilitation will be vital and effective.”

However, some people might be afraid that they will lose their tenancy if they enter rehab, and some might have caring responsibilities. It is vital that treatment services are as accessible as possible and that people who enter rehab are protected from negative consequences, such as homelessness.

Follow-up after discharge is also vital. When people leave residential rehabilitation, they are at increased risk of overdose, as their tolerance to drugs has been lowered. It is important that we recognise that people do not leave rehab cured and that they need on-going support. Residential rehabilitation provision must be well integrated with other health and care services, so that no one is left struggling to cope alone after they are discharged.

We must also consider that abstinence-based recovery will not suit everyone. As I have said before, we would not demand that someone stop smoking before we treated them for lung cancer. A range of treatment options must be available. Scotland has only about 40 per cent of people who need it in treatment at any one time, whereas England has 60 per cent. However, many people who use drugs have been in treatment at some point in their lives, so we have significant issues around retaining people in treatment. Services must be flexible and person centred and must take account of changing needs. Community-based provision such, as drop-in cafés and peer support networks, must be made available alongside residential rehab.

I will support the Scottish Government's amendment, because it recognises the need for a

focus on harm reduction and treatment. I am also very supportive of the content of Claire Baker's amendment, but I note that it will be pre-empted by the Government's. To tackle this crisis, we need to treat people with compassion, not judgment, and to offer them support, not condemnation.

16:54

Jim Fairlie (Perthshire South and Kinross-shire) (SNP): I start by thanking the numerous organisations and individuals who gave me their time and expertise during my research for the debate. There are far too many of them to mention, but each of their contributions has been hugely helpful. I have been equally humbled by the work and effort that all of them have put in to help those who are affected by addiction, especially during the pandemic.

Why do people take drugs in the first place? That is a bit like asking what colour cars are. The reality is that there is no single reason, which simply means that nor is there a single silver-bullet cure.

In my constituency of Perthshire South and Kinross-shire and the wider Perth and Kinross Council area, there has been an increase in usage and in drug-related deaths during the pandemic. However, there is also some fabulous joined-up working through multiagency collaborations such as the alcohol and drug partnership, which has made it clear to me that it is committed to delivering the aims of the national drugs mission.

The work that the ADP is doing is brilliant. Because of its scope and scale, it is far too big to discuss it all in a four-minute speech, but it is important to say that the partners in the ADP include Perth and Kinross health and social care partnership; Perth and Kinross Council children's services, housing services and justice services; local Police Scotland representatives; public health representatives; third sector partners; and the Scottish Prison Service. As part of the Scottish Government's £13.5 million uplift to ADPs, this year, Perth and Kinross ADP is to receive just under £400,000 and then a further £180,000 to be used in the outreach and near-fatal-overdose pathways and for the lived and living experience panels.

Miles Briggs (Lothian) (Con): I am sure that the member has heard concerns from the partnerships about their proposed centralisation under the national care service. What representations has he made to ministers about that?

Jim Fairlie: I will come on to that.

That is an example from my constituency of the nationwide effort that the Scottish Government is committed to. I spoke to Jardine Simpson of the Scottish Recovery Consortium, who praised the £250 million funding package, with £100 million ring fenced for residential rehab and aftercare provision. That provision is every bit as important as residential rehab, to ensure that there is a support continuum and that folk are not just dropped back into the drug-taking environment without the necessary support. He spoke about how pleased he was to meet the minister, Angela Constance, and hear about her plans and full understanding of the real lived problems, which he said gave him hope that we are tackling this hellish problem with the right approach.

There is undoubtedly still much to do but, when people who have lived with and come through addiction tell me that they are optimistic about our minister's handling of the situation, that gives me a lot of hope.

That brings me to the Conservatives' motion. They seem to be all over the place on how to address Scotland's problem with substance abuse. In the short space of four clauses, they go from calling drugs deaths a "humanitarian crisis" to expressing horror at the Lord Advocate not wanting to criminalise users. Every single person I have spoken to about the issue who has lived with addiction or worked with addicts—and sometimes both—has said the same thing: criminalising users does not break the chain. I just do not see how talk of a legal right to recovery can be resolved with a determination to judge and jail users.

I simply do not trust the motives behind the motion. It can be seen as cynically trying to use the death toll that drugs are taking in our communities to attack the Scottish Government while preventing and undermining many of the actions that would actually do some good. If the Tories were so concerned about the harms that are done by drug or alcohol misuse, why did they oppose minimum unit pricing for alcohol, when alcohol was a bigger killer of Scots than drugs?

Professor Sir Ian Gilmore, chair of the Alcohol Health Alliance, said of a recent research study by Newcastle University that was published in *The Lancet*:

"This is powerful, real-world evidence of the success of minimum unit pricing as a harm reduction policy."

Just as the Tories in this chamber tried to stop minimum pricing, their colleagues in Westminster are blocking drug consumption rooms, which we know can reduce the risk of disease transmission and prevent drug overdose.

The Presiding Officer (Alison Johnstone): Mr Fairlie, could you wind up, please?

Jim Fairlie: Yes—absolutely.

My question to Dr Gulhane is this: how will he maintain the trust of his patients who present to him with the disease of drug addiction when he is going to vote to jail them for an addiction that may well be attributable to poverty policies that his party has imposed on Scotland's people for decades?

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

16:58

Pauline McNeill (Glasgow) (Lab): Scottish Labour is genuinely interested in the proposals for a right to recovery that Dr Sandesh Gulhane has outlined. Last year, more than 1,300 people in Scotland died of drug misuse, which was a record number of deaths for the seventh year in a row. As we have previously discussed in the Parliament, that is the highest rate of drug deaths of any country in Europe. As Claire Baker, Stuart McMillan and many other members have said, that is a national shame, with tragic consequences. Therefore, the Scottish Government is rightly under pressure to change that. We desperately need fresh thinking throughout the Parliament when it comes to Scotland's approach to tackling drugs. If we do not have fresh thinking, we will fail.

A step in the right direction was the Lord Advocate's announcement last week, in which she confirmed that the scope of the recorded police warning scheme has been extended to include possession-only offences relating to class A drugs. It is important that the Tories speak accurately about the announcement. It is still illegal to possess drugs. The law is not changing. Drugs have not been decriminalised, as the Tories know. It is about diversion from prosecution.

It is important to note that the scheme applies only to drug possession offences; it does not apply to drug supply offences. It is aimed at reducing the number of drug deaths and at getting people on to the right pathway, which is what Dr Gulhane talked about, and I believe what he said. For the Tories to characterise the Lord Advocate's announcement as a wholesale decriminalisation of drugs does their proposal no justice whatsoever. Has it occurred to them that a route or pathway to recovery might come through a police officer issuing a warning under the scheme and referring a person to treatment services?

It is worth stressing that offering a recorded police warning is not mandatory. Police officers retain the ability to report cases to the procurator fiscal. As the Lord Advocate noted last week, when the police encounter an individual who they know, or suspect, is addicted to drugs, officers are able to direct that person to services that may be

able to assist. Surely that is consistent with finding pathways to recovery. The Lord Advocate said that such referrals must become the norm. We need more resources for treatment and recovery programmes urgently.

In the previous debate on the subject, I said that drug consumption facilities are operating in 66 cities around the world. There is some agreement in the Parliament that Scotland needs to provide such facilities. A review by the European Monitoring Centre for Drugs and Drug Addiction concluded:

“There is no evidence to suggest that the availability of safer injecting facilities increases drug use or frequency of injecting. These services facilitate rather than delay treatment entry and do not result in higher rates of local drug-related crime.”

The Scottish Government must work within the legal framework. Following the Lord Advocate’s statement last week, I asked her whether she considers that the supervision of those who are consuming drugs in such facilities contravenes the Misuse of Drugs Act 1971, because it might well be that it does not if the supervision is in order to save lives. I was pleased that the Lord Advocate noted, in response, that she

“would be prepared to consider any such future proposal”.—[*Official Report*, 22 September 2021; c 26.]

We know that, by the end of March, lives had been saved by Peter Krykant, who has been mentioned. Such facilities have to be a serious part of our consideration if we are not to fail on the matter.

17:03

Angela Constance: It is clear that most members in the chamber support taking a public health approach to our drug deaths crisis—Scotland’s other public health emergency. For most of us, the debate is about how, through our national mission to save and improve lives, to reduce harm and to promote recovery, we do everything possible to maximise that public health approach, which is much broader and more holistic than a purely medicalised model.

Like Pauline McNeill, I fear that the Tories are failing to join the dots in relation to life-saving emergency work to improve lives, because an all-Government and all-Scotland response must include our criminal justice system, our welfare system, our health system and our education system. Sue Webber said that she is worried that people will no longer be scared to carry drugs. I am worried about people being scared to seek treatment because of the risk of criminalisation.

Dr João Goulão, the architect of Portugal’s reforms, has said:

“The biggest effect has been to allow the stigma of drug addiction to fall, to let people speak clearly and to pursue professional help without fear.”

Despite my questions about the Conservatives’ proposal on the right to recovery bill, I, like other members in the chamber, have been clear that I have an open mind and will give it a fair hearing, which of course is more than the Tories gave the Lord Advocate last week.

I have to say to Mr Findlay that it is a poor show never to let the facts get in the way of column inches in *The Daily Mail* or *The Daily Express*. The decision is the Lord Advocate’s; it is not decriminalisation, nor is it mandatory. We heard from the Lord Advocate that the response could be tailored to the needs around the alleged offence and the individual who is involved. Most of us are trying to elevate the debate in, and outwith, the Parliament.

Russell Findlay: Would the minister encourage her cabinet colleague Keith Brown to act immediately in relation to prison drugs and stop the mail, as I suggested in my speech? That action would go a long way towards helping vulnerable prisoners who suffer from drug problems.

Angela Constance: I do not expect Mr Findlay to know this about me, but a large part of my career before I entered the Parliament was to work in three Scottish prisons and a state hospital, so I know the hard work of prison officers both to make their institutions safe and secure and to protect and promote the welfare, and particularly the mental health, of prisoners.

I remind Mr Findlay that even prisoners these days have human rights, and that we do not pick and choose those rights. The challenge for our prison services is not only safety and security, but also the protection of our most vulnerable citizens, some of whom are wrongly placed in the prison system—[*Interruption*.]

Mr Findlay is a big boy now, and does not need his mammy to hold his hand; I am sure that he will be able to address any outstanding matters that he has with the Cabinet Secretary for Justice and Veterans.

Let us go back to the facts of the matter and consider the diversion scheme that Baltimore introduced, in which they stopped prosecuting for low-level drug offences, and only six out of 1,400 diverted drug cases were involved in re-offending. Let us consider Portugal, with its six drug deaths per million of the population, in comparison to Scotland’s 315 deaths per million of the population. We have to think big, bold and radical.

Of course, the Conservatives are suspiciously quiet on the wide range of evidence-based

interventions that work, whether they be safe consumption rooms, heroin-assisted treatment—

Miles Briggs: Will the minister take an intervention?

Angela Constance: I am so sorry but I do not have time, Mr Briggs, otherwise I would.

Someone on the Labour benches made the point that the issue is not about supporting harm reduction over recovery or the other way around, but about supporting people. We have massive platforms of work, around medication-assisted treatment and residential rehabilitation.

The Presiding Officer: Can you wind up, please, minister?

Angela Constance: I will indeed. We have never presented any measure as a silver bullet, but neither will we pass up any opportunity, large or small, to take even one step forward. We will continue on a journey to save lives.

17:08

Jamie Greene (West Scotland) (Con): I thank members from across the chamber for their input to today's short and, for the most part, respectful debate about our drugs crisis. It is a crisis, and there are, of course, polarised arguments over decriminalisation and even its perception. The argument is not new, nor is it easy, and it is clear from a number of contributions that there is agreement on the scale of the problem that we face in Scotland and even, to an extent, on what has gone wrong in the past and what might need to be done to fix the problem.

I want to be clear, however, about why we are using Opposition time to talk specifically about the decision that the Lord Advocate made last week. It is our view that this major shift in drugs policy has not fully been thought through or consulted on, nor have its potential effects or consequences been fully understood or debated. It is clear that very little consultation took place before the decision was made. In fact, last week's announcement came as a surprise to many of us.

Jim Fairlie has just waxed lyrical about all the stakeholders that he has been engaging with about today's debate. That is great, but let me remind him that none of those people would have a voice within these walls had we not brought the debate to the chamber in the first place. Where was the formal consultation with drug rehab charities, the third sector, Police Scotland and recovering addicts? What did Police Scotland say about the new guidance or the proposed changes? What experiences did the police share with the Government about the effect of the previous changes that were made to the possession of class B and class C drugs? What

evidence is there that the approach does work or will work?

Angela Constance: In my closing remarks, I quoted the evidence from Baltimore and Portugal. Mr Greene heard the Lord Advocate's statement last week: did he not ask her questions about her decision?

Jamie Greene: I would have loved to, but we had a 20-minute question-and-answer session. There was no time to properly debate the issues and listen to the voices of those stakeholders that many of us have spoken about today.

In fact, why was a Holyrood committee not afforded the opportunity to take proper evidence? I am sure that many of them would have been happy to do so. We have a Health, Social Care and Sport Committee and a Criminal Justice Committee. Surely, that is the role of committees in a unicameral Parliament such as ours. There might be voices who support the move, but there will surely be others who do not; perhaps we ought to listen to those voices.

We argue that a shift in the guidance to police on whether to prosecute the possession of class A drugs makes them no less harmful, nor will it reduce drug use or drug deaths. We are not alone in that view. Other stakeholders in the real world share that view: this is not a political position. For example, the Centre for Substance Use Research said that there is a huge risk of escalating, not reducing, our drug problem.

I want to drill down into why that argument is being made. Maintaining legal barriers to drug use is a powerful means by which society seeks to suppress the limitless expansion in the scale and impact of drug use. The only way to reduce our drug deaths total is to reduce the overall level of drug use itself. The measure that was announced last week will go nowhere towards doing that because the policy, as it was announced, assumes a behavioural change only in those who use drugs, not in those who deal in them. The dealers will be buoyed by this new approach to how we police hard-core drugs.

Claire Baker: Why in 2018 did the Conservatives support diversion prosecution and highlight Durham's checkpoint diversion if they are asking for scrutiny now? They seemed to be able to decide that they supported this kind of approach three years ago.

Jamie Greene: I am happy to respond directly to that important point. In 2018, we said that there needed to be a holistic approach. I have never said on anything that was reported last week that I am against the principle of diversion. Many ideas have been mooted over the years, and our 2018 paper was to be commended, but it was ignored. That is the point. We cannot divert people from

prosecution to nothing. We cannot divert them if there is nowhere to divert them to. That is the point that we are making today.

Neither can we simply point towards other countries and say, "My goodness, what a great job they've done!" without accepting that those Governments in those countries did not make 22 per cent year-on-year cuts to drug and alcohol services as this Government has done.

It is not good enough to use emotive arguments that are based on the perceived benefit of a policy. We need to use Scottish facts, and here are some facts for the minister. When the SNP came to power, there were 352 residential rehab beds in Scotland. There were 445 drug deaths that year, which we all agree was too many. Ten years later, there were 70 rehab beds and a death rate of more than 1,000. Today, that rate stands at nearer 1,400. Does the minister see the link? Those are the facts. They are disgraceful and they should be a source of shame for the Government.

One thing that we all agree on is that drug addiction destroys lives. Sandesh Gulhane made that point powerfully in opening the debate. Of course people with such an addiction need help but, for far too many, that help is simply not there. It is our unapologetic view that the right to recovery must be enshrined in law.

If the Government's direction of travel is, as it says it is, to make our drug shame a health rather than a justice problem, that is fine, but ministers had better make sure that there is a health solution there to back it up. Their track record to date fills no one with confidence. We will support them on that journey, but they must be willing to listen.

I support the motion in Dr Gulhane's name.

Points of Order

17:15

Murdo Fraser (Mid Scotland and Fife) (Con): On a point of order, Presiding Officer.

In this afternoon's debate on Covid vaccination passports, reference was made to the absence of draft regulations and of an evidence base to support the policy. I understand from media reports that the Scottish Government's senior counsel, when appearing this afternoon at the Court of Session, stated that the regulations would be considered by the COVID-19 Recovery Committee tomorrow morning, despite the agenda for that meeting having been published already and there being no room on the committee's agenda to do so.

Moreover, the same senior counsel produced in evidence to the Court of Session a 71-page evidence paper from the Scottish Government in support of its policy. The draft regulations and that evidence paper were then emailed to members of the COVID-19 Recovery Committee after the debate in the chamber had concluded. It is clear that the documents would have been very helpful in informing that debate and were, I presume, ready long before the debate commenced.

Presiding Officer, will you investigate why the Scottish Government made the documents available to the Court of Session, but not to Parliament, and why it is treating the chamber with contempt?

The Presiding Officer (Alison Johnstone): I thank Mr Fraser for his point of order. At this moment, I am not aware of the precise detail of the information that has been provided, or the basis on which it was produced in the Court of Session.

However, it is, of course, extremely important that members and committees be provided with information to enable scrutiny in a timely manner. I will review the information that has been provided, and I will return to the chamber if I consider that a further ruling is appropriate.

Stephen Kerr (Central Scotland) (Con): On a point of order, Presiding Officer.

The Deputy First Minister and Cabinet Secretary for Covid Recovery (John Swinney): On a point of order, Presiding Officer.

The material that has been provided to the COVID-19 Recovery Committee has been provided in accordance with routine arrangements, which have existed throughout the pandemic, for supplying regulatory information to committees in advance of their deliberations. That material was

provided at 4 pm this afternoon, in accordance with the normal arrangements that are in place.

The Presiding Officer: I thank Mr Swinney for his point of order. I will satisfy myself as to the situation and I will, as I said previously, return to the chamber with a further ruling if I consider that to be appropriate.

Pauline McNeill (Glasgow) (Lab): On a point of order, Presiding Officer.

The Presiding Officer: I believe that Mr Kerr's point of order is next, after which I will return to Ms McNeill.

Stephen Kerr: Thank you, Presiding Officer.

I have previously raised concerns with you about the Scottish National Party Government's blatant disregard for Scotland's Parliament. This morning, the SNP snuck out the answer to Government-initiated question S6W-03408, which announced:

"the NHS will remain on an emergency footing until at least 31 March 2022."—[*Written Answers*, 29 September 2021; S6W-03408.]

Surely that kind of significant and substantive announcement must be brought to the chamber in the first instance, with members being given an opportunity to question ministers on its consequences. Yesterday, we heard the First Minister's Covid update statement. There was ample opportunity for the Cabinet Secretary for Health and Social Care to make a statement to Parliament in person and to answer questions.

Therefore, Presiding Officer, I seek your guidance on three matters. First, you will know that, on 22 June, I raised a very similar point of order. You said then that you had

"asked the Scottish Government to reflect on the use of GIQs when Parliament is sitting."—[*Official Report*, 22 June 2021; c 12.]

Do you believe that today's events demonstrate that the Scottish Government has taken any notice whatsoever of your request?

Secondly, on 22 June, you also said that

"all significant and substantive announcements should be made to the Parliament, whenever that is possible."—[*Official Report*, 22 June 2021; c 12.]

I do not think that anyone can argue that the announcement was not significant and substantial, or that it was not possible for the cabinet secretary to make a statement to Parliament yesterday, or even today or tomorrow. Do you still believe that what you said on 22 June is correct, and do you share my concern that the Government is disrespecting your office and Parliament by its behaviour again today?

The Government has shown this week how quickly it can, and does, change business when doing so suits it. Based on the approach that we have seen from the Government today, I fear that the Scottish Government's elusive winter national health service plan might well be snuck out over recess with minimal scrutiny.

The one thing that we know about this SNP Government is that it cannot abide transparency or scrutiny. What can be done to ensure that members of Parliament will have an opportunity to scrutinise that plan before the October recess?

The Presiding Officer: I thank Stephen Kerr for his point of order.

Government-initiated questions are recognised as a mechanism through which the Government can make announcements. As I set out in June, all significant and substantial announcements should be made to Parliament, wherever that is possible. There will, of course, be instances in which it is not possible to make an announcement in the chamber.

In relation to question S6W-03408, I have noted that the GIQ mechanism has been used both in this session and the previous session to confirm extensions to the period for which the NHS will remain on an emergency footing. The guidance on announcements also notes that GIQ answers can be followed up with a debate. The member might wish to raise that at the next meeting of the Parliamentary Bureau, at which I will visit the issue that the member has raised.

Pauline McNeill (Glasgow) (Lab): Further to the question that you will consider about scrutiny in Parliament—in particular, of the vaccination passport regulations—I note that, in a radio interview that was given by the Cabinet Secretary for Health and Social Care after the debate, he said that the evidence to back the Government's position was lodged with the Scottish Parliament information centre. However, I pursued that and was told that no such evidence exists.

I therefore ask the Presiding Officer to consider whether members of Parliament who have an interest in this debate but are not part of the COVID-19 Recovery Committee—that includes me and many others—must have access to all the Government's advice and evidence, so that we can consider what position we want to take. It is really unsatisfactory, when we are considering the whole basis of the Government's argument on Covid vaccination passports, if that advice and evidence are not available in our information centre.

The Presiding Officer: I thank Ms McNeill for her point of order.

As I said previously, I will review the information that has been raised with me this afternoon. I will return to the chamber with a further ruling if I consider that that is appropriate.

Business Motion

17:23

The Presiding Officer (Alison Johnstone):

The next item of business is consideration of business motion S6M-01438, in the name of George Adam, on behalf of the Parliamentary Bureau, setting out a business programme. Any member who wishes to speak against the motion should press their request-to-speak button now.

Motion moved,

That the Parliament agrees—

(a) the following programme of business—

Tuesday 5 October 2021

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by First Minister's Statement: COVID-19 Update

followed by Ministerial Statement: Covid Recovery Strategy

followed by Scottish Government Debate: Legislative Consent to the Environment Bill

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 6 October 2021

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
Justice and Veterans;
Finance and the Economy

followed by Scottish Government Debate: Scotland in the World – Championing Progressive Values

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 7 October 2021

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:
Education and Skills

followed by Ministerial Statement: Heat in Buildings Strategy

followed by Stage 3 Proceedings: Carer's Allowance Supplement (Scotland) Bill

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

Tuesday 26 October 2021

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by First Minister's Statement: COVID-19 Update

followed by Scottish Government Business

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 27 October 2021

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
Covid Recovery and Parliamentary
Business; Net Zero, Energy and
Transport

followed by Scottish Government Business

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 28 October 2021

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:
Rural Affairs and Islands

followed by Scottish Government Business

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

(b) that, for the purposes of Portfolio Questions in the week beginning 4 October 2021, 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.—[*George Adam*]

17:24

Stephen Kerr (Central Scotland) (Con): To build on the point of order that I just made, I rise

once again to speak against the business motion because of the lack of opportunity for any meaningful scrutiny of today's announcement, by stealth, that the national health service will remain on an emergency footing until at least March 2022. I understand that the announcement had to be made before 30 September; however, what I do not understand is why it had to be snuck in through the back door on 29 September.

I would have welcomed the opportunity to discuss with the Parliamentary Bureau at its meeting this week, or the one last week, the appropriate way in which the announcement could be scrutinised by the Scottish Parliament. That would have been the correct way to do things but, for whatever reason, the Minister for Parliamentary Business made no mention of it at all at those meetings.

We should not have to fight tooth and nail for significant Government announcements to be made to Parliament. The people of Scotland are watching the tedious pattern of this SNP Scottish Government disrespecting Parliament and its processes, and the Scottish Conservatives cannot stand idly by and watch it happen. We will defend Scotland's Parliament from this overbearing Executive.

I urge the Minister for Parliamentary Business to lodge a revised business motion that includes a statement on today's announcement, with an appropriate question-and-answer session. [*Interruption.*] They may laugh, but someone has to defend this Parliament from the Executive, so we will take up that challenge.

I currently have heard no indication from the Minister for Parliamentary Business that he intends to put such a statement or question-and-answer session into the business programme for next week, which is why we will oppose the motion.

17:26

The Minister for Parliamentary Business (George Adam): I feel as if I have been time warped back to last week. We seem to have the same debate on every issue in the Scottish Parliament. That is nothing to do with the Scottish Government's attitudes; it is purely to do with the attitudes of the members over to my left.

When we take away the Conservative hyperbole and look at the issue in reality, we see that the National Health Service (Scotland) Act 1978 enables the Scottish ministers to make use of directions in making emergency powers to ensure continuance of services.

The NHS in Scotland was initially placed on an emergency footing on 16 March 2020. That was

announced in a statement by Jeane Freeman, in which numerous ideas and ways of going forward on Covid were put in place. The period was extended until the end of September 2021.

Although the number of new Covid cases appears to be in decline, health services are continuing to deal with the most challenging combination of issues. There remains a need for caution in protecting the NHS's capacity as we move into the challenging winter period. *[Interruption.]* No—I really need to get to the end of this. There is a need to continue with measures in taking a consistent approach to remobilising and renewing the vital services on which we all rely.

In addition, we are mindful of the impact on many front-line staff, who are the most important people in this scenario. They will remain under considerable pressure and must be given appropriate support, as well as the opportunity to recover, as our range of services continues to resume.

Let us look over what happened. Jeane Freeman announced to Parliament in March 2020 that the NHS was under emergency measures. Then, in March 2021, Jeane Freeman put a GIQ through Parliament, extending the period. In June this year, a letter was sent to the COVID-19 Committee to say that the period would continue until September, which made sure that everybody knew about it and there was time to debate it.

We are living in the middle of one of the most challenging times that we have ever gone through. For the Conservatives to come here and play political games while people's lives are at stake is a damned disgrace.

The Presiding Officer: Mr Adam, I would be grateful if you could address the chamber with courtesy.

George Adam: I take back the swear word that I should not have said.

We might ask ourselves why a GIQ was acceptable in March and a letter was acceptable in June, but a GIQ is not acceptable in September. As I said, this is about the people of Scotland dealing with the terrible situation that we are in. It is about ensuring that our NHS staff get full support.

First and foremost, this is about the Scottish Parliament making a decision tonight about its forthcoming business.

The Presiding Officer: Thank you.

The question is, that motion S6M-01438, in the name of George Adam, on behalf of the Parliamentary Bureau, setting out a business programme, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

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

17:30

Meeting suspended.

17:35

On resuming—

The Presiding Officer: Members should cast their votes.

The vote is now closed.

Craig Hoy (South Scotland) (Con): On a point of order, Presiding Officer. My—*[Inaudible.]*—voted no.

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

For

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (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)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 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)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 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)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

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

Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Webber, Sue (Lothian) (Con)
 White, Tess (North East Scotland) (Con)
 Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

The Presiding Officer: The result of the division on business motion S6M-01438, in the name of George Adam, on behalf of the Parliamentary Bureau, on a business programme, is: For 69, Against 52, Abstentions 0.

Motion agreed to,

That the Parliament agrees—

(a) the following programme of business—

Tuesday 5 October 2021

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by First Minister's Statement: COVID-19 Update

followed by Ministerial Statement: Covid Recovery Strategy

followed by Scottish Government Debate: Legislative Consent to the Environment Bill

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 6 October 2021

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
Justice and Veterans;
Finance and the Economy

followed by Scottish Government Debate: Scotland in the World – Championing Progressive Values

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 7 October 2021

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:
Education and Skills

followed by Ministerial Statement: Heat in Buildings Strategy

followed by Stage 3 Proceedings: Carer's Allowance Supplement (Scotland) Bill

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

Tuesday 26 October 2021

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by First Minister's Statement: COVID-19 Update

followed by Scottish Government Business

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 27 October 2021

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions:
Covid Recovery and Parliamentary Business; Net Zero, Energy and Transport

followed by Scottish Government Business

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 28 October 2021

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:
Rural Affairs and Islands

followed by Scottish Government Business

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

(b) that, for the purposes of Portfolio Questions in the week beginning 4 October 2021, 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.

Parliamentary Bureau Motions

17:38

The Presiding Officer (Alison Johnstone):

The next item of business is consideration of four Parliamentary Bureau motions. I ask George Adam, on behalf of the Parliamentary Bureau, to move motions S6M-01439, S6M-01440 and S6M-01441, on approval of Scottish statutory instruments, and motion S6M-01442, on a committee substitute.

Motions moved,

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 17) Regulations 2021 (SSI 2021/301) be approved.

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 18) Regulations 2021 (SSI 2021/307) be approved.

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 19) Regulations 2021 (SSI 2021/319) be approved.

That the Parliament agrees that—

Colin Smyth be appointed as the Scottish Labour Party substitute on the Rural Affairs, Islands and Natural Environment Committee.—[*George Adam*]

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

Decision Time

17:38

The Presiding Officer (Alison Johnstone):

There are seven questions to be put as a result of today's business.

The first question is, that amendment S6M-01415.2, in the name of John Swinney, which seeks to amend motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccine certification scheme, 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, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (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)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 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)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 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)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Baillie, Jackie (Dumbarton) (Lab)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Choudhury, Foysol (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Dowey, Sharon (South Scotland) (Con)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Griffin, Mark (Central Scotland) (Lab)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Hoy, Craig (South Scotland) (Con)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Leonard, Richard (Central Scotland) (Lab)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Marra, Michael (North East Scotland) (Lab)
 McArthur, Liam (Orkney Islands) (LD)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 Mundell, Oliver (Dumfriesshire) (Con)
 O'Kane, Paul (West Scotland) (Lab)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 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)
 White, Tess (North East Scotland) (Con)

Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

Abstentions

Rowley, Alex (Mid Scotland and Fife) (Lab)

The Presiding Officer: The result of the division on amendment S6M-01415.2, in the name of John Swinney, which seeks to amend motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccine certification scheme, is: For 67, Against 52, Abstentions 1.

Amendment agreed to.

The Presiding Officer: The next question is, that amendment S6M-01415.1, in the name of Daniel Johnson, which seeks to amend motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccine certification scheme, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Baillie, Jackie (Dumbarton) (Lab)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (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)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Griffin, Mark (Central Scotland) (Lab)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Hoy, Craig (South Scotland) (Con)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Leonard, Richard (Central Scotland) (Lab)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Marra, Michael (North East Scotland) (Lab)
 McArthur, Liam (Orkney Islands) (LD)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 Mundell, Oliver (Dumfriesshire) (Con)
 O'Kane, Paul (West Scotland) (Lab)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Simpson, Graham (Central Scotland) (Con)

Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Webber, Sue (Lothian) (Con)
 White, Tess (North East Scotland) (Con)
 Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

Against

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (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)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 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)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 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)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)

Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the vote on amendment S6M-01415.1 is: For 52, Against 67, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccine certification scheme, as amended, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

The vote is now closed.

Michelle Thomson (Falkirk East) (SNP): On a point of order, Presiding Officer. I lost connection to my mobile application. I would have voted yes.

The Presiding Officer: Thank you, Ms Thomson. We will ensure that your vote is recorded.

For

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (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)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 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)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 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)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Baillie, Jackie (Dumbarton) (Lab)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Choudhury, Foysol (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Dowey, Sharon (South Scotland) (Con)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Griffin, Mark (Central Scotland) (Lab)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Hoy, Craig (South Scotland) (Con)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Leonard, Richard (Central Scotland) (Lab)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Marra, Michael (North East Scotland) (Lab)

McArthur, Liam (Orkney Islands) (LD)
 McNeill, Pauline (Glasgow) (Lab)
 Mochan, Carol (South Scotland) (Lab)
 Mundell, Oliver (Dumfriesshire) (Con)
 O'Kane, Paul (West Scotland) (Lab)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (Lab)
 Webber, Sue (Lothian) (Con)
 White, Tess (North East Scotland) (Con)
 Whitfield, Martin (South Scotland) (Lab)
 Whittle, Brian (South Scotland) (Con)
 Wishart, Beatrice (Shetland Islands) (LD)

The Presiding Officer: The result of the division on motion S6M-01415, in the name of Douglas Ross, on halting the Covid-19 vaccine certification scheme, as amended, is: For 67, Against 53, Abstentions 0.

Motion, as amended, agreed to,

That the Parliament commends the extraordinary effort of vaccination teams throughout Scotland, which means that, as of 24 September 2021, 86% of eligible over-18-year-olds were double-vaccinated against COVID-19; recognises that case numbers remain too high and that action is needed from all sectors to ensure that baseline COVID-19 measures are rigorously implemented; acknowledges that a number of other countries have introduced COVID-19 certification schemes, that the Welsh Government has plans to introduce a vaccine certification scheme in Wales, and that it is part of winter contingency planning by the UK Government for England; believes that, in line with the Scottish Government's strategic intent, a COVID-19 vaccine certification scheme can provide a targeted means to maximise Scotland's ability to keep certain higher-risk settings open, while reducing the impact of transmission and encouraging the remaining sections of the population, including those who may be vaccine hesitant, to get vaccinated; recognises that the Parliament has already endorsed a certification scheme; supports the implementation of a COVID-19 vaccine certification scheme; agrees that the scheme will apply to late night venues between the hours of 00:00 and 05:00 with music, alcohol and dancing, indoor unseated live events with 500 or more attendees, outdoor unseated live events with 4,000 or more attendees, and all events with 10,000 or more attendees; notes that measures are being taken to ensure digital inclusivity and to ensure that disabled people are not disproportionately impacted, and agrees that this scheme will be kept under review.

The Presiding Officer: I remind members that, if the amendment in the name of Angela Constance is agreed to, the amendment in the name of Claire Baker will fall.

The question is, that amendment S6M-01416.3, in the name of Angela Constance, which seeks to amend motion S6M-01416, in the name of Sandesh Gulhane, on a legal right to recovery, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

The vote is now closed.

Clare Haughey (Rutherglen) (SNP): On a point of order, Presiding Officer. I lost connection, and I would have voted yes.

The Presiding Officer: Thank you, Ms Haughey. I confirm that your vote was recorded.

For

Adam, George (Paisley) (SNP)
 Adam, Karen (Banffshire and Buchan Coast) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (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)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 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)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 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)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)

Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

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

Abstentions

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

The Presiding Officer: The result of the division on amendment S6M-01416.3, in the name of Angela Constance, which seeks to amend

motion S6M-01416, in the name of Sandesh Gulhane, on a legal right to recovery, is: For 67, Against 32, Abstentions 21.

Amendment agreed to.

The Presiding Officer: As the amendment is agreed to, the amendment in the name of Claire Baker falls.

The next question is, that motion S6M-01416, in the name of Sandesh Gulhane, on a legal right to recovery, 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, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baillie, Jackie (Dumbarton) (Lab)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)
 Chapman, Maggie (North East Scotland) (Green)
 Choudhury, Foysol (Lothian) (Lab)
 Clark, Katy (West Scotland) (Lab)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 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)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Neil (Airdrie and Shotts) (SNP)
 Greer, Ross (West Scotland) (Green)
 Griffin, Mark (Central Scotland) (Lab)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green)

Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Marra, Michael (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McKee, Ivan (Glasgow Provan) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Minto, Jenni (Argyll and Bute) (SNP)
 Mochan, Carol (South Scotland) (Lab)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 O’Kane, Paul (West Scotland) (Lab)
 Rennie, Willie (North East Fife) (LD)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Roddick, Emma (Highlands and Islands) (SNP)
 Rowley, Alex (Mid Scotland and Fife) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Slater, Lorna (Lothian) (Green)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP)
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Sweeney, Paul (Glasgow) (Lab)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Wishart, Beatrice (Shetland Islands) (LD)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Dowey, Sharon (South Scotland) (Con)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Gulhane, Sandesh (Glasgow) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Hoy, Craig (South Scotland) (Con)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Ross, Douglas (Highlands and Islands) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Webber, Sue (Lothian) (Con)

White, Tess (North East Scotland) (Con)
 Whittle, Brian (South Scotland) (Con)

The Presiding Officer: The result of the division on motion S6M-01416, in the name of Sandesh Gulhane, on a legal right to recovery, as amended, is: For 92, Against 28, Abstentions 0.

Motion, as amended, agreed to,

That the Parliament believes that record drug deaths in Scotland are a humanitarian crisis and public health emergency; offers its condolences to the thousands of families across Scotland who are grieving the loss of loved ones to drugs; believes that the Scottish Parliament and the UK Parliament should consider any proposal that is based in evidence and that can play a part in saving lives, including the right to recovery and harm reduction approaches; recognises that addressing drugs misuse must primarily be taken forward as a public health matter; supports that the £250 million investment to help address drugs deaths will support residential rehabilitation, community rehabilitation, Medication-Assisted Treatment standards, and a range of approaches to reduce harm; understands that prosecution policy is decided independently by the Lord Advocate and is not set by the Scottish Government or the Parliament; notes that experiences from other nations such as Portugal show that diversion from prosecution for drug possession towards support or treatment services can be an opportunity to ensure better outcomes for some of the most vulnerable people in society.

The Presiding Officer: If no one objects, I propose to ask a single question on the four Parliamentary Bureau motions.

The question is, that motions S6M-01439 to S6M-01442, in the name of George Adam, on behalf of the Parliamentary Bureau, be agreed to.

Motions agreed to,

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 17) Regulations 2021 (SSI 2021/301) be approved.

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 18) Regulations 2021 (SSI 2021/307) be approved.

That the Parliament agrees that the Health Protection (Coronavirus) (International Travel) (Scotland) Amendment (No. 19) Regulations 2021 (SSI 2021/319) be approved.

That the Parliament agrees that—

Colin Smyth be appointed as the Scottish Labour Party substitute on the Rural Affairs, Islands and Natural Environment Committee.

The Presiding Officer: That concludes decision time.

Poverty (Purchase of School Uniforms)

The Deputy Presiding Officer (Liam McArthur): The final item of business is a members' business debate on motion S6M-01095, in the name of Fulton MacGregor, on alleviating poverty associated with the purchase of school uniforms. The debate will be concluded without any question being put.

Motion debated,

That the Parliament recognises and praises the continuing work of Cool School Uniforms, which is based in Coatbridge, in ensuring that many children across Coatbridge and Chryston are able to obtain warm, clean and comfortable school uniforms; notes that research by Dr Rachel Shanks at the University of Aberdeen has found that almost 20% of secondary schools in Scotland specify an exclusive supplier for their uniform, restricting parents and carers choices; understands that it has been suggested that regular reviews of exclusive supply arrangements of uniform items should take place in order to reduce costs; acknowledges the challenges that parents and carers face in ensuring that their children continue to be clothed appropriately for school, especially as uniforms become more expensive due to what it sees as exclusivity and rising prices and in the face of austerity; believes that the Scottish Government-Green Party cooperation deal has pledged to bring forward statutory guidance for schools to increase the use of generic items of uniform; welcomes this pledge, and notes the view that this and any other steps to alleviate poverty associated with the purchase of school uniforms should be brought forward as soon as practically possible.

17:55

Fulton MacGregor (Coatbridge and Chryston) (SNP): I am pleased to have secured the debate. I thank the members from all parties who signed my motion and those staying to participate. I also thank those who have helped me to prepare for the debate, particularly Julie O'Byrne, Anne Culley and the rest of the team from cool school uniforms, which is based in my constituency, and Dr Rachel Shanks at the University of Aberdeen. Their knowledge and expertise were indispensable to me in bringing the debate to the table.

I am sure that we can all agree that all children, regardless of background, deserve to be able to attend school in clean, warm and comfortable clothes. Unfortunately, that is not always the case. Just as we have food banks across the country, so, too, we have uniform banks, and with the coming Tory cut to universal credit, it is becoming harder and harder for parents and carers who are trying to make ends meet to provide for their families. I was glad that, yesterday, this Parliament voted overwhelmingly for the United Kingdom Government to reverse its draconian decision to

cut universal credit. Now the ball is very much in its court.

Of course, the cut to universal credit is only the latest attack on our most vulnerable by a UK Government that Scotland did not vote for. Again, the Scottish Parliament is in the predicament of merely acting as a mitigation chamber. We have already done so much with the bedroom tax; we have also increased the Scottish child payment—and we have done much more besides. Without our having full powers, I know how difficult it is to do even more on issues such as school uniforms. However, we must do more as part of a range of measures to tackle child poverty in this country.

We all know that the uniform can be one of the most significant school costs for parents. The Scottish Government already provides a minimum school clothing grant of £100 for families on low incomes, and it has committed to reviewing the real cost of school uniforms for less well-off families. It has increased the grant to at least £120 for primary school pupils and £150 for secondary school pupils, and it will ensure that the amount increases each year in line with inflation.

I was delighted that the Scottish National Party-Green Party co-operation agreement recognised the issue and has committed to introducing statutory guidance for schools and to encouraging the increased use of generic uniforms. However, I urge the Government to take those actions as soon as possible. The issue affects parents and carers now, and the pandemic has made an already difficult situation even worse. In her closing speech, I ask the minister to indicate the expected timescale for the introduction of the statutory guidance.

This is not a new issue. I have been working with the cool school uniforms group for some years now—indeed, I have been doing so since its formation three or four years ago—discussing the problems parents and carers in my constituency often face in relation to the affordability of school uniforms. As I think that any parent in the chamber will testify to, even taking an MSP's salary into consideration, school uniforms are very expensive.

I am sure that members are equally aware that many schools now demand specific items, badges, colours and styles for their uniform. The items are not always widely available and some are obtainable only from specific suppliers. School pride and identity are important, and I am not arguing against uniforms in that respect. Indeed, I retain a special pride in each of the schools that I went to, as I am sure is the case for everyone in the chamber in relation to their schools. I will take the opportunity to give my schools a wee shout out: Coatdyke primary school, which is now closed; Rochsolloch primary school, where I went after Coatdyke; and Coatbridge high school.

A person's school often has a special place in their heart, and much of that is driven by the identity of the school community. I do not think that we should remove that identity, but we need to have more standardised uniforms, to make sure that nobody is left behind and that we begin to break the stigma around uniforms.

Currently, uniform suppliers can set whatever price they please. With so many having a monopoly of supply over uniforms, parents and carers are left in the unenviable position of having either to fork out for an expensive uniform or to send their child to school in a more affordable but generic uniform that makes them more likely to feel out of place among their peers.

Members might be aware that a law was passed in England in April requiring schools to follow new statutory guidance on uniform costs. I congratulate Labour MP Mike Amesbury on introducing that as a private member's bill. I understand that, later this year, the UK Department for Education will publish statutory guidance instructing England's schools to keep prices down, consider high street alternatives and encourage the use of second-hand uniforms. That is fantastic. I hope that the department implements that with haste and—this will be important—with appropriate safeguards to ensure quality.

Ahead of the debate, I spoke with Julie O'Byrne, whom I have already mentioned. She is the chair and founder of cool school uniforms and, for members' information, she is also my local hero for the opening of Parliament on Saturday.

To explain to people who are not familiar with a uniform bank, cool school uniforms accepts donations of uniform that is in good condition and redistributes it to pupils who require it. Families can be referred through schools, social work departments or any respected caring group or individual. Families can also self-refer, and they will be assisted after benefit checks. Cool school uniforms also helps with physical education kits and stationery, and ensures that children can go to school ready to learn. The group's work is absolutely invaluable and a lifeline to many, but I wish that places such as uniform banks and food banks did not have to exist.

Julie said that she would unquestionably support generic uniforms and has spoken to me about how that approach has been successful elsewhere—in Wales, for example. She detailed how some schools request colours for their blazers or shirts that are so specific—for example, a lilac shirt—that there is no choice as they cannot be bought from supermarkets, which are the affordable option for many parents and carers.

White shirts from a supermarket can cost as little as £3 for a pack of two, whereas lilac shirts

from a uniform supplier cost £16 for a pack of two. That is a huge difference for someone who is on the breadline, and there is not much change left from the £100 grant once the basics have been purchased. The total back-to-school bill can add up to several hundred pounds for parents with more than one child, and that is why I believe that the current grant is not working as well as it should or could be.

The 26th UN climate change conference of the parties—COP26—is fast approaching, of course, and there is a climate issue here, too. Clothing is a huge contributor to global carbon emissions. That does not mean that we should stop buying uniforms, but if we can get more than a year's use out of something, we absolutely should. I know from my own kids that they grow fast. We always hope to get their clothes to last as long as possible, but unavoidable growth spurts mean that their clothes are often still new when they no longer fit. It is important that there are options to reuse such items.

Dr Rachel Shanks at the University of Aberdeen has undertaken a phenomenal amount of research on the issue. I spoke to her ahead of lodging my motion and I will highlight the three broad recommendations that are coming out of her research. First, we should implement statutory guidance on school uniform policies with affordability as the top priority. Secondly, the statutory guidance should require regular reviews to be undertaken of exclusive supply arrangements for school uniform items in order to reduce the cost of the school uniform. Thirdly, school uniform, dress code and appearance policies should involve pupils in decision making in both their creation and regular reviews.

Those three recommendations are fair and proportionate, and I ask the Government to comment on them and provide a view on whether further legislation, such as through a member's bill, could be helpful and useful.

Every child deserves to be able to attend school with clean and warm clothes that do not single them out from their peers. In a time of great austerity imposed by the Tory Government, it is becoming more and more difficult for parents and carers to ensure that they have the cash to make sure that young people are kitted out for school, even with uniform grants in place. Action on school uniforms can be only part of a suite of measures to alleviate child poverty, including free school meals for larger cohorts and the uplifting of the Scottish child payment, but I hope that we can move forward swiftly with a policy that will help to mitigate uniform poverty and ensure that our children arrive at school equipped to learn.

18:03

Meghan Gallacher (Central Scotland) (Con): I start by thanking Fulton MacGregor for bringing the important topic of school uniforms to the chamber. Cool school uniforms, which is based in Coatbridge, is one of many organisations that go above and beyond to help families obtain warm, clean and comfortable school uniforms.

Mr MacGregor spoke highly of the work that the group does. I share his admiration for the group's dedication to helping families who may struggle to afford uniforms for their children. There is more that we in the Parliament can do to support such organisations and make uniforms more easily available to all families, so that no young person feels awkward or segregated from their peers. I intend to explore some proposals during my speech.

At present, a large majority of Scottish publicly funded schools require pupils to wear a uniform, which can put financial strain on families each school term. In 2020, the Children's Society found that families across the UK pay on average £337 per year for school uniforms for each secondary school child. The same study found that those costs were more than three times what parents think is a reasonable cost for secondary school uniforms.

Support is in place for some families, who are entitled to a uniform grant. Although it is welcome that the Scottish Government has increased the grant for primary and secondary school pupils, it was forced into that decision. Eligible primary school pupils will receive a minimum of £120 and eligible secondary school pupils will receive a minimum of £150. The grant is in line with the views of parents and families, who should not have to pay through the nose to ensure that their children have the appropriate school uniform.

It is relevant to recognise the importance of a school uniform. It removes the stigma that is caused when some families are unable to afford the latest designer clothes. A uniform is visible and should give pupils a sense of pride in their school.

However, one fifth of secondary schools specify an exclusive supplier for their uniforms. It is understandable that, as the end of the school holidays draws near, families have to make tough decisions because they cannot choose a supplier within their budget. Although the SNP-Green coalition has said that it intends to crack down on schools using exclusive uniform suppliers, that promise has not yet been fulfilled. Both parties included the idea in their manifestos, but we need action now. As the motion says,

"steps to alleviate poverty associated with the purchase of school uniforms should be brought forward as soon as practically possible."

The Scottish Government must also implement the £20 increase to the Scottish child payment without delay.

Until those actions are taken, organisations such as cool school uniforms will experience increasing demand from families who need donated clothing. I will continue seeking confirmation from the Scottish Government that clothing grants will not be delayed, as they were last year. That delay caused upset and panic to parents who were entitled to the grant but did not know if they would receive that financial support in time. It is imperative that councils receive that funding so that they can administer it to families in time, before the school term begins, and so that families and children can be organised and ready for the return to school.

Mr MacGregor made an interesting point about the reuse of clothing. I share his interest in sustainable clothing, which could involve our young people in the fight to tackle climate change.

The Scottish Government must set out its plans to stop schools using named school uniform suppliers, and it must review the school uniform grant, which Scottish Conservatives support. We must also ensure that grants are provided to families at the appropriate time, to reduce the pressures on the organisations that go above and beyond to support their communities. I thank Mr MacGregor for bringing the issue to the chamber and I look forward to hearing the other speeches.

18:07

Emma Harper (South Scotland) (SNP): I welcome the opportunity to speak in the debate and congratulate Fulton MacGregor on securing it. I congratulate cool school uniforms for ensuring that children and young people in Coatbridge can obtain clean and comfortable school uniforms. I welcome the commitment in the Scottish Government-Green party agreement to introduce statutory guidance for schools to increase the use of generic items of school uniform. I agree that the use of exclusive supplier arrangements between schools and businesses can be extremely expensive—the cost is prohibitive for many families.

The Covid-19 pandemic has had a direct and negative impact on family budgets across Scotland, including in my South Scotland region, while costs have increased significantly. Too often, school uniforms are an additional expense that families on low incomes struggle to meet.

During the pandemic, the London School of Economics carried out research into the effect of the cost of school uniforms on low-income families across the four UK nations. Case studies in the report showed that families in all parts of the UK

were being driven to choose between heating or eating and that they also had to make such choices about school uniforms. The report also found that the root cause of those inequalities was the UK Government's welfare system.

There are regional variations in support in England. I welcome the steps that the Scottish Government is taking, such as the school clothing grant of £120 for primary school pupils and £150 for secondary school pupils. Those grants are a lifeline for many families.

One participant in the LSE study, Tahlia from the Scottish Borders, articulated the challenges being faced by families as regards uniforms. Tahlia once relied on charity shops and pre-loved clothing from friends and people in the community for school uniforms. The inaccessibility of those sources during lockdown triggered a spiral of bills, debt and hunger.

Tahlia said:

"Because of covid ... I've not received any hand me down clothes for my sons this whole year ... In September had to buy 3 children all brand new uniform ... I'm £2000 in debt, I ran out of money a week last Thursday ... I've only eaten a diet based on bread and potatoes this last month as I wanted to ensure my kids had food."

She said that just as the UK Government is proposing to take away the £20 per week universal credit uplift from the most vulnerable families in the UK. It is completely unacceptable. Once again, I call on the UK Government to reverse that callous, cruel cut.

I want to highlight some of the important work that is being carried out by dedicated people across Dumfries and Galloway to ensure that young people have access to school uniforms, such as the Dumfries uniform bank, run by Dr Amy Veters, which I visited in 2018. The uniform bank has been operational since 2017, and is available to any family in Dumfries and the surrounding area who are struggling with the costs of school uniforms. The uniform bank has collection points at various supermarkets, where those who are able to do so can donate items of uniform. The uniform bank has helped more than 380 families so far with uniform costs. I thank Amy and the volunteers for their work.

Another organisation that works across Dumfries and Galloway is Aberlour. I visited the Aberlour Dumfries north-west resource centre campus on Monday and met Amanda McAllister, the manager. Aberlour has a range of support options available to families for school uniforms and its recent one shirt one month challenge to help with the cost of school uniforms for local families has had great support.

I welcome the debate and I support the measures that the Scottish Government has put in

place to assist families with the cost of school uniforms. Again, I call on the UK Government to reverse the callous and cruel cut to the £20 per week uplift to universal credit.

18:12

Carol Mochan (South Scotland) (Lab): Scotland in 2021 should not require many of the services that Fulton MacGregor mentioned in his motion and in his speech. Decisions by the Scottish Government and the Conservative Government in Westminster have made it harder for people to get by and have ensured that fewer families are in stable well-paid employment. That means that more children live and grow up in poverty. The poverty that is associated with purchase of school uniforms is a direct impact of political decision-making. Families are being let down, so we must act with purpose to deliver the real radical change that is required to improve livelihoods and life chances.

The motion suggests that we should welcome the SNP-Green Party coalition pledge to introduce statutory guidance for schools to increase use of generic items of uniforms in order to reduce costs. I support any progressive steps to make buying school uniforms easier and less expensive for low-income families. I know the pressure that is felt by some parents to buy for their children items such as new school uniforms, when it is not really an expense that they can afford.

In 14 years of government, the SNP Government has taken the Tory cuts, multiplied them and passed them on to local communities, so I hope that I can be forgiven for being sceptical about the likelihood of the SNP-Green coalition taking the necessary steps to support our lowest-income families and communities. I hope that tonight's debate will prove me wrong. I hope that the members who have spoken here will stand up and be counted on the issue.

In response to the need that has been created by political decision making, it has been encouraging to see so many groups and individuals in our communities doing all that they can to help parents to provide uniforms for children, whether that be in the form of donating directly to families or setting up uniform banks where uniforms can be handed in and collected by families. Communities are pulling together to help to alleviate the pressure that is put on their neighbours by poverty that is associated with purchase of school uniform and other items. That has been truly positive and has continued throughout the pandemic.

South Ayrshire School Clothing Bank in my area is a fine example of such work. It is run fully by volunteers, with a mission to ensure that every

child is able to go to school in clothing that is just like that of their peers', which the clothing bank believes can help their ability to learn, socialise and develop key interpersonal skills. However, I stress again that it is shameful that it has come to that. Although community intervention is welcome and the work of volunteers is admirable, the correct policies would have to be put in place to ensure that it is not needed.

With regard to local government, this year, despite more than a decade of cuts to its budget, Labour-run North Lanarkshire Council became the first council in the United Kingdom to introduce a clothing and footwear grant for nursery children. That is an example of a council doing what it can to give children the best start in life. It is clear to me that if such action was to be replicated across Scotland, our young people would start off with the best of benefits.

It is devastating that poverty that is associated with purchase of school uniforms exists in Scotland, and I agree with Fulton MacGregor that schools can and should do more to make generic and less expensive uniform items more accessible to parents of the children who attend. Having an exclusive supplier of expensive uniforms might work for a school, but it does not necessarily work for the low-income families whom it serves. I would welcome regular reviews of such arrangements.

The issue that we are debating today has much deeper causes—namely, fundamentally flawed policies that have failed the people who are most in need. To alleviate poverty that is caused by a host of factors, we must be more radical in our politics and stand up for those who have been let down by austerity and cuts. Only by doing that will we deliver the change that we truly need.

18:16

The Minister for Children and Young People (Clare Haughey): I am grateful to Fulton MacGregor for lodging the motion and enabling discussion of such an important issue in the Scottish Parliament.

I recognise and thank Cool School Uniforms for its work in supporting children, young people and their families to access school uniform items, which enables pupils to achieve their potential. I also thank all those who work and volunteer in clothing banks across Scotland for their commitment to and support for families. I absolutely recognise the issues and concerns that have been raised in this evening's debate.

Our programme for government sets out the actions that we will take in our efforts to end child poverty. Subject to the necessary data being made available from the Department for Work and

Pensions, by the end of next year the Scottish child payment, which already benefits eligible families with children up to the age of 6, will be extended to include children up to the age of 16.

However, we are already supporting as many children as possible through our bridging payments. Through that benefit, which is unique in the United Kingdom and is designed to tackle poverty head on, we are now reaching 108,000 children. We are committed to increasing the child payment from £10 to £20 per child per week as soon as possible, and we will consider that through the budget bill process.

As part of the strategic approach, we will also reduce the cost of the school day. We will build a system to ensure equal access to the full package of education by breaking down financial barriers in order to make a real difference in the lives of children from low-income families.

We have already abolished music tuition charges and we have extended provision of free school meals to children in primary 4. Over the course of this parliamentary session, we will extend free school meals to all primary school pupils all year round. In addition to the expansion of provision of free school lunches, we have committed to universal free breakfast provision for all primary school pupils during term time and in the holidays. That will ensure that all primary school pupils can benefit from a nutritious breakfast at the start of the day, every day.

We will also provide every child with an electronic device and a connection to get online, because we recognise that they are as essential to education today as jotters and pencils were in years gone by.

In a moment, I will speak about school uniforms in particular, but before I do so, I acknowledge the work of the Child Poverty Action Group. Recently, the group published an updated toolkit for schools to support them in considering the cost of the school day for families. The toolkit provides a range of resources to support schools, local authorities and their partners to identify and address financial barriers to participation and learning. At the heart of the resource is the involvement of children, parents and staff in identifying which school items result in additional financial burden for families, and risk children and young people experiencing stigma or feeling excluded.

I turn to the issue of school uniforms. We know that uniforms can be one of the most significant school costs for families. I confirm that we are firmly committed to overcoming barriers to accessing education, including those relating to school uniforms.

In partnership with local authorities, we have delivered on our commitment to increase the level of the school clothing grant to at least £120 for primary school pupils and £150 for secondary school pupils. That vital support was in place in time for the start of the new school year in August.

As has been recognised by Fulton MacGregor, during this parliamentary term we will introduce statutory guidance for schools, which will lead to an increase in use of generic items of uniform and a reduction in costs for families. The member asked what the timescale is for the measures. We will engage with stakeholders as soon as possible as part of preparing the guidance.

Fulton MacGregor: I thank the minister for answering my question about the statutory guidance and for highlighting that she will be talking to stakeholders. Can she also comment on my question about how the guidance might be progressed? Would a member's bill on the topic be helpful?

Clare Haughey: At the moment, we are looking to provide guidance, but I am certainly happy to explore the idea of a member's bill with Mr MacGregor.

The steps that we are taking are important. We must do all that we can to ensure that families can afford school uniforms. We know that some families are sacrificing essentials including heating, food and rent payments so that their children can participate fully at school. That cannot be right.

As Emma Harper mentioned, yesterday Parliament voted overwhelmingly to support cancelling the planned £20 a week cut to universal credit next month. The cut will plunge 60,000 families, including 20,000 children into poverty. I find it quite rich that a Tory MSP has asked us to introduce a £20 a week Scottish child payment without delay. I note that no Tory members are sitting here—they have left the debate.

The Deputy Presiding Officer: Minister, I say just for the record that Meghan Gallacher, who contributed to the debate, is still here.

Clare Haughey: Yes—she is here virtually, but the two members who were in the chamber have left.

I am pleased that the commitment to introduce statutory guidance on school uniforms is part of the Scottish Government's and Scottish Green Party's shared policy programme. I welcome the opportunity to work with colleagues to deliver that commitment, and to ensure that all our children and young people can go to school free from stigma, that they are included, engaged and involved in their learning, and that they are supported to reach their full potential.

Meeting closed at 18:22.

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