



## PUBLIC PETITIONS COMMITTEE

### AGENDA

7th Meeting, 2017 (Session 5)

Thursday 20 April 2017

The Committee will meet at 9.00 am in the Sir Alexander Fleming Room (CR3).

1. **Consideration of continued petitions:** The Committee will consider the following continued petitions—

[PE1548](#) by Mrs Beth Morrison on National guidance on restraint and seclusion in schools;

and will take evidence from—

John Swinney, Deputy First Minister; Laura Meikle, Team Leader; Melanie Lowe, Policy Officer, Scottish Government.

[PE1581](#) Duncan Wright on behalf of Save Scotland's School Libraries on Save Scotland's school libraries;

and will take evidence from—

John Swinney, Deputy First Minister; Catriona MacKenzie, Policy Manager; Craig Flunkert, Team Leader, Scottish Government.

[PE1603](#) by Mairi Campbell-Jack and Douglas Beattie on behalf of Quaker in Scotland & Forces Watch on Ensuring greater scrutiny, guidance and consultation on armed forces visits to schools in Scotland;

and will take evidence from—

John Swinney, Deputy First Minister; Marie Swinney, Team Leader; Katherine McNab, Policy Adviser, Scottish Government.

2. **Consideration of continued petition:** The Committee will consider the following continued petitions—

[PE1627](#) by Annette McKenzie on Consent for mental health treatment for people under 18 years of age;

[PE1628](#) by R Maxwell Barr on behalf of Struan Lodge Development Group and Dunoon Community on Consultation on service delivery for the elderly or vulnerable;

[PE1639](#) by Maureen Macmillan on Enterprise agency boards.

**PPC/S5/177/A**

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The papers for this meeting are as follows—

**Item 1**

PRIVATE PAPER

PPC/S5/17/7/1 (P)

Note by the Clerk

PPC/S5/17/7/2

Note by the Clerk

PPC/S5/17/7/3

Note by the Clerk

PPC/S5/17/7/4

**Item 2**

Note by the Clerk

PPC/S5/17/7/5

Note by the Clerk

PPC/S5/17/7/6

Note by the Clerk

PPC/S5/17/7/7

**Public Petitions Committee**

**7th Meeting, 2017 (Session 5)**

**Thursday 20 April 2017**

**PE1548 on National Guidance on Restraint and Seclusion**

**Note by the Clerk**

**Petitioner** Beth Morrison

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to

1. Introduce National Guidance on the use of restraint and seclusion in all schools; this guidance should support the principles of:

- Last resort - where it is deemed necessary, restraint should be the minimum required to deal with the agreed risk, for the minimum amount of time
- Appropriate supervision of the child at all times, including during “time out” or seclusion.
- Reducing the use of solitary exclusion and limiting the time it is used for (e.g. maximum time limits)
- No use of restraints that are cruel, humiliating, painful and unnecessary or not in line with trained techniques.
- Accountability of teaching and support staff for their actions; this should include recording every incident leading to the use of seclusion or restraint and monitoring of this by the local authority.
- Regular training for staff in how to avoid the use of restraint
- Where restraint is unavoidable training in appropriate restraint techniques by British Institute of Learning Disability accredited providers and no use of restraint by untrained staff.

2. Appoint a specific agency (either Education Scotland or possibly the Care Inspectorate) to monitor the support and care given in non-educational areas including the evaluation of the use of restraint and seclusion of children with special needs in local authority, voluntary sector or private special schools.

**Webpage** [parliament.scot/GettingInvolved/Petitions/PE01548](http://parliament.scot/GettingInvolved/Petitions/PE01548)

**Introduction**

1. This petition was last considered by the Committee at its meeting on 19 January. At that meeting the Committee agreed to invite the Deputy First Minister to provide evidence at a future meeting. The Deputy First Minister has accepted the

invitation to provide evidence and the Committee is invited to consider what action it wishes to take.

### **Committee consideration**

2. To help to inform the Committee's consideration of the petition at this meeting, the most recent submissions received are provided in the annexe to this paper. These comprise a submission from Dr Brodie Paterson, two petitioner submissions and a letter from the Deputy First Minister.
3. In her submission of January 2017, the petitioner identified concerns on three particular issues—
  - Development of the guidance, *Included, Engaged and Involved Part 2: A Positive Approach to Preventing and Managing School Exclusions (IEI2)*
  - The Scottish Government's response to the UNCRC Concluding Observations
  - Local Authority policies
4. In terms of IEI2, the petitioner expressed concern that the guidance was being developed from the position of treating the problem as an "education issue, rather than a learning disability issue within an education environment". She noted that a number of experts had offered to assist in the development of the guidance, but that these offers had not been taken up by the Scottish Government.
5. With regard to the UNCRC Concluding Observations, the petitioner was concerned that the Scottish Government did not appear to be fully reflecting the observations in its revised guidance. She argued that replacing terms like 'seclusion' with phrases such as 'separation that is supported' does not meet the recommendation to 'abolish' the use of isolation rooms.
6. The petitioner also expressed her concern that, if local authorities were left to develop their own policies, there would be "no official body monitoring what they do" and suggested that there should be robust national guidance with a national recording system which should be monitored.
7. In her April 2017 submission, the petitioner refers to her previous points in relation to seclusion and the need for a national recording system. The petitioner also highlights the communication passport resource as "the foundation of being able to support children in schools" and which "underpins the focus on positive relationships to enhance the quality of life for disabled children." The petitioner indicated that the Scottish Government support the roll-out of this resource to all schools via the GLOW network.
8. The petitioner also raises the issue of independent regulatory oversight. The petitioner indicates that she does not believe Education Scotland is the right body for this and wonders if jurisdiction to ensure compliance could be given to the Mental Welfare Commission for Scotland.

9. The petitioner concludes by highlighting who is affected by this issue—

“We are not talking about children in secure units, we are not talking about neurotypical kids with behaviour problems. We are talking about the most disabled and in many cases medically fragile children in our society!”

10. Dr Paterson echoed the petitioner’s concerns. While he welcomed the suggestion that the forthcoming guidance will be clear that any incident where a decision is made to physically restrain a child must be recorded and monitored he was concerned that this would be determined by the local authority’s policy, as “a significant number of authorities continue to have no such policies”.

11. In his most recent submission, the Deputy First Minister indicated that he would be happy to address these issues at this meeting. The submission provided a response to the Committee’s request for an update on publication of the ‘communication passport’ and the ‘toolkit’ for practitioners.

12. In terms of the ‘communication passport, the Deputy First Minister advises that this will be signposted in IEI2 and “will be part of a suite of documents that will be published to support schools and local authorities with the implementation of IEI2”.

13. Mr Swinney advises that “WithScotland and the Scottish Government’s Ministerial Working Group on Child Protection and Disability published a Child Protection and Disability Toolkit” alongside the updated ‘National Guidance for Child Protection in Scotland’, published in 2014. The toolkit is a “comprehensive training resource for practitioners in Scotland, and is freely available for download”.

### **Action**

14. The Committee is invited to consider what action it wishes to take on the petition. Options include—

- To reflect on the evidence from the Deputy First Minister and to consider a note by the clerk at a future meeting;
- To take any other action the Committee considers appropriate.

**Clerk to the Committee**

## **Annexe**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1548/AA: Dr Brodie Paterson letter of 6 December 2016 \(122KB pdf\)](#)
- [PE1548/BB: Petitioner letter of 9 January 2017 \(90KB pdf\)](#)
- [PE1548/CC: Scottish Government letter of 15 February 2017 \(65KB pdf\)](#)
- [PE1548/DD: Petitioner emails of 5 and 11 April 2017 \(134KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).

**Public Petitions Committee****7th Meeting, 2017 (Session 5)****Thursday 20 April 2017****PE1581 Save Scotland's School Libraries****Note by the Clerk**

<b>Petitioner</b>	Duncan Wright on behalf of Save Scotland's School Libraries
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to set out a new national strategy for school libraries which recognises the vital role of high quality school libraries in supporting pupils' literacy and research skills.
<b>Webpage</b>	<a href="http://parliament.scot/GettingInvolved/Petitions/SaveScotlandsSchoolLibraries">parliament.scot/GettingInvolved/Petitions/SaveScotlandsSchoolLibraries</a>

**Introduction**

1. This petition was last considered by the Committee at its meeting on 2 March. At that meeting the Committee agreed to invite the Deputy First Minister/Cabinet Secretary for Education and Skills to provide evidence at a future meeting.
2. The Cabinet Secretary has accepted the invitation to provide evidence and has provided a written submission in advance of today's meeting. That submission has been provided to members, along with other recent submissions which are included in the annexe to this paper. The Committee is invited to consider what action it wishes to take.

**Committee consideration**

3. In its submission of 10 January, COSLA reiterated its comments on the difficult decisions faced by local authorities within a "challenging budget settlement", and identified views of its members, including—
  - the benefits attributed to other areas of educational provision
  - the potential for putting other areas of local authority services under even greater pressure
  - it would undermine the role of locally elected Councillors in making budget decisions and would be a further erosion of local democracy.
4. It also noted that with an increased use of technology in schools and in the home, children can now access "a wide range of reading materials" in e-reader formats. It adds that Education Scotland is developing a number of resources to support the Digital Learning and Teaching Strategy being developed by the Scottish Government.



5. The petitioners argued that “the take-up of e-lending within school libraries is extremely low”, and suggested that reasons for this include costs, licensing restrictions and restrictions on Wi-Fi availability in schools.
6. In response to COSLA's reference to an “erosion of local democracy”, the petitioners argue that “there is a requirement for a National Strategy, enforced by the Scottish Government, to ensure the positive impact a professionally staffed school library can have on attainment and curriculum delivery”.
7. The Committee identified the petitioners' concerns as being about the level of advice and guidance that is provided to local authorities with regard to modern school library and librarians provision, and the added value that they can bring rather than being considered a “luxury”.

**Action**

8. The Committee is invited to consider what action it wishes to take on the petition. Options include:
  - to reflect on the evidence from the Cabinet Secretary and to consider a note by the clerk at a future meeting
  - to take any other action the Committee considers appropriate.

**Clerk to the Committee**

**Annexe of written submissions –**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1581/V: COSLA letter of 10 January 2017 \(65KB pdf\)](#)
- [PE1581/W: Petitioner letter of 16 February 2017 \(109KB pdf\)](#)
- [PE1581/X: Deputy First Minister letter of 13 April 2017 \(51KB pdf\)](#)

All previous written submissions received on the petition can be viewed on the [petition webpage](#).

**Public Petitions Committee**  
**7th Meeting, 2017 (Session 5)**

**Thursday 20 April 2017**

**PE1603: Ensuring greater scrutiny, guidance and consultation on armed forces visits to schools in Scotland**

**Note by the Clerk**

**Petitioner** Mairi Campbell-Jack and Douglas Beattie on behalf of Quaker in Scotland & Forces Watch

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to ensure that:

1. Guidance is provided on how visits to schools by the armed forces should be conducted so that information presented to children takes account of the unique nature of armed forces careers, ensures political balance, and offers a realistic representation of the role of the armed forces and what a career in the armed forces involves.
2. Information is collected to enable public monitoring of the number and location of visits, the purpose and content of visits, and comparison with the number of visits by other employers.
3. Parents/guardians are consulted as to whether they are happy for their child to take part in armed forces activities at school.

**Webpage** [parliament.scot/GettingInvolved/Petitions/armedforcesvisitsstoschools](http://parliament.scot/GettingInvolved/Petitions/armedforcesvisitsstoschools)

**Introduction**

1. The Committee last considered this petition at its meeting on 2 March 2017. At that meeting the Committee agreed to invite the Deputy First Minister (DFM) to provide evidence on the petition. The DFM will provide evidence at this meeting of the Committee. To inform the evidence session, a copy of the petitioners' most recent submission is annexed to this note, along with correspondence from the DFM.
2. Members will recall that at the meeting on 2 March it was also agreed to request a briefing from the Ministry of Defence. Arrangements for this are being taken forward.

**Committee consideration**

*Stakeholder responses*

3. The Committee has, to date, received 32 written submissions on this petition. These submissions cover a range of issues in relation to armed forces visits to

school. The issues could be considered within three broad headings: whether information about armed forces careers strike an appropriate balance and explore the possible *risks* of armed forces careers, whether armed forces visits are carried out in a way that recognises the *rights* of children and of their parents/guardians and who should have *responsibility* for capturing information about armed forces visits to schools, including the number and purpose of such visits.

4. The petitioners have made clear that their petition does not call “for an end to under-18 recruitment, try to impinge upon the “legitimacy” of an armed forces career, or ask for the armed forces to cease their relationship with schools.”
5. The most recent from the petitioners commented on submissions received by the Committee from organisations and individuals who took the opportunity to make a written submission, as well as organisations that the Committee specifically asked to comment. In light of these submissions, the petitioners suggested a number of steps which they considered could be used to achieve a clear and consistent national approach to the issue of armed forces visits to schools—
  - commission a Child Rights Impact Assessment on armed forces visits to schools in Scotland.
  - inquiring as to how existing policy and practice, such as that covering employer relations with schools under the Developing the Youth Workforce Strategy, can accommodate the scrutiny, guidance and consultation that the petition calls for, and to explore ways forward.
  - inquiring into armed forces visits to special schools and if this should be prohibited.
  - awareness raising amongst organisations involved in schools and school career activities about the issues surround armed forces recruitment.
  - involvement of young people, parents, teachers and others in drawing up guidelines.
  - commitment from the armed forces to make accessible good quality data that covers the range of ways in which they engage with young people within the education system to the public and The Scottish Parliament.

### **Action**

6. The Committee is invited to consider what action it wishes to take on the petition. Options include—
  - To reflect on the evidence from the Deputy First Minister and to consider a note by the clerk at a future meeting;
  - To take any other action the Committee considers appropriate.

**Clerk to the Committee**

**Annexe**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1603/EE: Petitioner Letter of 10 February 2017 \(224KB pdf\)](#)
- [PE1603/FF: Deputy First Minister and Cabinet Secretary for Education and Skills submission of 5 April 2017 \(47KB pdf\)](#).

All written submissions received on the petition can be viewed on the petition [webpage](#).

**Public Petitions Committee**  
**7th Meeting, 2017 (Session 5)**  
**Thursday 20 April 2017**

**PE1627: Consent for mental health treatment for people under 18 years of age**

**Note by the Clerk**

<b>Petitioner</b>	Annette McKenzie
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to provide for consultation with and consent from a parent or guardian before prescribing medication to treat mental ill health if the patient is under 18 years of age.
<b>Webpage</b>	<a href="http://parliament.scot/GettingInvolved/Petitions/PE01627">parliament.scot/GettingInvolved/Petitions/PE01627</a>

### Introduction

1. The Committee last considered this petition at its meeting on 19 January 2017. At that meeting, the Committee took evidence from Annette McKenzie and agreed to write to the Scottish Government, Scottish Association for Mental Health, Scottish Youth Parliament, Children and Young People's Commissioner Scotland, Mental Health Foundation, the General Medical Council, the Royal College of General Practitioners (RCGP), and the Medicines and Healthcare Products Regulatory Agency. Responses have been received and the Committee is invited to consider what action it wishes to take.

### Committee Consideration

#### *Medical bodies*

2. The Medicines and Healthcare Products Regulatory Agency's written submission explained that "doctors should usually prescribe licensed medicines in accordance with the terms of their licence". It also noted-

Whilst historically medicines were often only developed for adults and not adequately researched in children, since the coming into force of Regulation (EC) No 1901/2006 on Medicinal Products for Paediatric Use in 2007, it has been a regulatory requirement that paediatric research is an integral part of medicine development.

3. The Medicines and Healthcare Products Regulatory Agency suggested that the Committee may be interested to seek the Royal College of Psychiatrists Faculty of Child and Adolescent Psychiatry's view on clinical guidelines for mental health conditions in children and adolescents.

4. The General Medical Council noted in its submission that it is not able to comment on the steps that can be taken to prevent suicide in young people using prescription medication. It drew attention to two pieces of guidance it has published that are particularly relevant to the Committee in addressing the questions raised. These are [0-18 years: guidance for all doctors](#) and [Good practice in prescribing and managing medicines and devices](#).
5. The General Medical Council explained that its guidance is clear that doctors have the same duty of confidentiality to young people as they have to adults. In its view, confidentiality is required to encourage young people to seek medical care and advice; and tell doctors all of the facts they need to provide good care. The General Medical Council's guidance explains the procedure doctors should follow to assess the capacity to consent.
6. The RCGP's written submission also noted that patient confidentiality is "of the utmost importance" and that any dilution of this principle may discourage young people from seeking professional help.
7. The RCGP noted its support for social prescribing as a means of addressing the wider issue. Social prescribing is a means of enabling GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services. The RCGP noted that the Scottish Government is funding a Links Worker Programme in this regard, which the RCGP considers to be a beneficial means of support. Although, the RCGP noted that only very few general practices are participating in this programme.

#### *Youth bodies*

8. The Scottish Youth Parliament's written submission explained that it would consider the petition at its sitting on 25-26 March 2017. It held a workshop with 36 young people aged between 12 and 25 to gather their views on the issues outlined in the petition. The group had concerns about the action called for in the petition. Some participants considered that involving parents in mental health treatment could help break down any stigma, whilst the majority considered that it would discourage young people from seeking help.
9. The Scottish Youth Parliament noted its members favour an increased focus on social prescribing opportunities, either as an alternative to, or to complement, medical interventions. It noted that, in its view, young people favour lower-intensity, non-clinical, community-based support (such as peer-to-peer support, talking to youth workers, information centres, and counselling) as positive examples of mental health services.
10. The Children and Young People's Commissioner Scotland's written submission noted that it does not support the action called for by the petition. The Commissioner considered that young people's right to patient confidentiality should not be diminished and that this may prevent young people accessing the support they need when they need it. The Commissioner also considered that there is adequate guidance in place to address the issue and that any moves to create a different system for mental health could be difficult to navigate.

11. The Commissioner agreed with the petitioner that there is merit in exploring the guidance and training provided to medical professionals when prescribing certain health medications to young people under the age of 18, particularly where there is a risk that these medications will increase the risk of suicidal tendencies. The Commissioner also agreed with the petitioner that limiting the amount of supply of such drugs “puts the best interests of the young person at the heart of the decision-making process.” The Commissioner also suggested that age-appropriate information should be readily accessible to young people.

*Mental health organisations*

12. SAMH's written submission agreed with the view of other respondents that the petition's proposals may discourage young people from seeking professional help. It did not support the petition for this reason.
13. SAMH noted, however, that doctors should follow evidence-based guidelines. It noted in this regard–

NICE guidance on social anxiety in children and young people specifically says that they should not usually be offered medication but instead should be offered Cognitive Behavioural Therapy.

NICE guidance on depression in children and young people says that antidepressant medication should not be used for the initial treatment of children and young people with mild depression. Children and young people with moderate or severe depression should be offered a psychological therapy that runs for at least three months. Antidepressant medication should only be offered to children and young people in conjunction with psychological therapies, and contact should be maintained on an approximately weekly basis with the young person and their parents for the first four weeks of treatment.

14. The Mental Health Foundation did not provide a written submission.

*The Scottish Government*

15. The Scottish Government's written submission explained that general practitioners are expected to follow guidance. It also explained that in the Chief Medical Officer's [Annual Report for 2015/16](#), Dr Catherine Calderwood announced that the consent process for people who receive care and support in Scotland will be reviewed by the Scottish Government, General Medical Council and the Academy of Medical Royal Colleges. In this regard, the Scottish Government explained–

A task and finish committee set up for reviewing consent met for the first time in February. The review is intended to update the advice provided to clinicians following the Supreme Court's ruling on the Montgomery case. The review will also develop supporting materials and tools to help embed the principles of the guidance into practice.



The important issues raised by Mrs McKenzie will be considered as part of that review.

*The petitioner*

16. The petitioner's written submission acknowledged that overall the written submissions "were not supportive" of her proposal but highlighted areas where there was support. In this regard, Ms McKenzie highlighted the Commissioner's support for exploring the guidance and training provided to general practitioners and limiting the supply of certain medications at each appointment. The petitioner also highlighted SAMH's comments on the existing NICE guidelines and noted she would be pleased to work with the respondents on the guidance and support for medical professionals regarding young people's mental health.

**Conclusion**

17. The Committee is invited to consider what action it wishes to take. Options include —
  - To seek clarification from the Scottish Government on how the petitioner can contribute to the review of the consent process for people who receive care and support in Scotland; and what funding is in place for the provision of Links Worker Programme in Scotland.
  - To seek the Royal College of Psychiatrists Faculty of Child and Adolescent Psychiatry's view on the petition and the existing clinical guidelines for mental health conditions in children and adolescents.
  - To take any other action the Committee considers appropriate.

**Clerk to the Committee**

**Annexe**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1627/A: Medicines and Healthcare products Regulatory Agency submission of 9 February 2017 \(69KB pdf\)](#)
- [PE1627/B: Scottish Youth Parliament submission of 10 February 2017 \(151KB pdf\)](#)
- [PE1627/C: General Medical Council submission of 14 February 2017 \(110KB pdf\)](#)
- [PE1627/D: Scottish Association for Mental Health submission of 17 February 2017 \(166KB pdf\)](#)
- [PE1627/E: Children and Young People's Commissioner Scotland submission of 17 February 2017 \(91KB pdf\)](#)
- [PE1627/F: Royal College of General Practitioners submission of 26 February 2017 \(173KB pdf\)](#)
- [PE1627/G: Scottish Government submission of 9 March 2017 \(47KB pdf\)](#)
- [PE1627/H Scottish Youth Parliament submission of 5 April 2017 \(212KB pdf\)](#)
- [PE1627/I: Petitioner's submission of 7 April 2017 \(64KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).

**Public Petitions Committee**  
**7th Meeting, 2017 (Session 5)**  
**Thursday 20 April 2017**

**PE1628: Consultation on service delivery for the elderly or vulnerable**

**Note by the Clerk**

<b>Petitioner</b>	R Maxwell Barr on behalf of Struan Lodge Development Group and Dunoon Community Council
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to ensure that all changes to service delivery for elderly and/or vulnerable groups by Integrated Joint Boards responsible for health and social care are underpinned by the principles of openness and accountability and are therefore subject to detailed public consultation and full democratic scrutiny before final decisions are made and those decisions implemented by the Boards.
<b>Webpage</b>	<a href="http://parliament.scot/GettingInvolved/Petitions/PE01628">parliament.scot/GettingInvolved/Petitions/PE01628</a>

### **Introduction**

1. The Committee last considered this petition at its meeting on 2 February 2017. At that meeting, the Committee took evidence from R Maxwell Barr, Chair, Struan Lodge Development Group and Kenneth Mathieson, Convenor, Dunoon Community Council. The Committee agreed to write to the Scottish Government, Scottish Health Council, NHS Scotland, Audit Scotland and COSLA.

### **Committee Consideration**

2. Audit Scotland's written submission highlighted its report on Health & Social Care Integration, which was published in December 2015. Audit Scotland explained—

“The proposed governance arrangements of the IAs [integration authorities] are complex, with some uncertainty about how they will work in practice. This will make it difficult for staff and the public to understand who is responsible for the care they receive.

Partners need to set out clearly how governance arrangements will work in practice, particularly when disagreements arise. This is because there are potentially confusing lines of accountability and potential conflicts of interests for board members and staff. There is a risk that this could hamper the ability of an IA to make decisions about the changes involved in redesigning services. People may also be unclear who is ultimately responsible for the quality of care.”

3. The Scottish Health Council's written submission agreed that the existing guidance requires further consideration, noting—

“Guidance on Identifying Major Health Service Changes was published prior to the integration of health and social care services. It therefore does not take account of the current context for decision-making in relation to integrated services, or the ambitions for services which are outlined in the Scottish Government's Health and Social Care Delivery Plan (Dec. 2016), which refers, for example, to regional and national centres of expertise.

There is therefore a risk of confusion and ambiguity given the current guidance does not reflect a very different landscape of decision making, accountability and more integrated models of care. The Scottish Health Council firmly believes that the CEL 4 (2010) guidance and the supplementary Guidance on Identifying Major Health Service Changes should be reviewed and revised with the current context in mind.”

4. COSLA's written submission explained that—

“...we do not believe that there are systemic problems across IAs and therefore do not feel that issuing further national guidance (or extending NHS guidance) is the best course of action.

...Rather than adding further consultation requirements to what is already a substantial body of regulation and guidance, we need to focus on supporting those involved with Integration Authorities to bed-in the various groups and arrangements outlined above, and to consolidate the relationships which support them.”

5. In relation to accountability and public consultation, COSLA noted—

“COSLA is aware that CEL 4 sets out consultation requirements for NHS Boards, and that there are associated Ministerial powers to call-in decisions about certain NHS services. COSLA believes that this runs counter to the policy aims of integration, which are about delegating functions and resources to IAs and empowering them to make difficult decisions about shifting the balance of care from unaffordable institutional care to the community; and from acute/crisis care to prevention and early intervention.”

6. The Director General for Health and Social Care's submission explained in relation to the existing guidance—

“We introduced CEL 4 (2010) to support NHS Boards in their statutory duty to inform, engage and consult with patients, the public and stakeholders. We do not plan to update this as Chief Executive Letters provide direction and guidance to NHS Boards rather than Integration Authorities.”

7. The Scottish Government explained that it has reviewed all strategic commissioning plans published by Integration Authorities for 2016-19. The

review concluded that “the reach and quality of engagement in the development of Integration Authorities’ strategic commissioning plans was comprehensive and generally of good quality”.

8. In relation to harmonising the guidance and advice relating to public consultation developed to support the Act with the advice and guidance to health boards in the Chief Executive Letter CEL 4, the Scottish Government explained—

“I understand that local systems have largely approached this matter on the pragmatic basis that, if the service is a healthcare service then it would be subject to CEL 4 and if it is a social care service (directly provided or externally procured) it would be subject to the local consultation processes developed by the relevant Local Authority, underpinned by the National Standards for Community Engagement.”

9. The petitioner’s written submission set out his view that the consultation and engagement requirements or guidelines should be standardised and readily accessible to communities and the public. Mr Barr welcomed the Scottish Health Council’s view that the Guidance on Identifying Major Health Service Changes should be updated.

### **Scottish Parliament consideration**

10. The Health and Sport Committee agreed, as part of its budget scrutiny, to examine Integration Authorities’ (IAs) approach to engagement with stakeholders and whether or not IAs are doing enough to involve patients, carers, the third sector and other stakeholders over the design and future of health and social care in their local area.
11. A call for written evidence was issued on Monday 13 February seeking views from patient and carers representatives, NHS and social care staff, third sector organisations. The call for views closed on 8 March. The petitioner made a [written submission](#) in response to the call for views on the inquiry.
12. The clerks understand that the Health and Sport Committee is provisionally scheduled to consider this inquiry again at its meeting on 25 April 2017.

### **Conclusion**

13. The Committee is invited to consider what action it wishes to take. Options include —
  - To refer the petition to the Health and Sport Committee.
  - To take any other action the Committee considers appropriate.

**Clerk to the Committee**

## Annexe

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1628/A Scottish Government submission of 10 March 2017 \(57KB pdf\)](#)
- [PE1628/B: Director General of Health and Social Care submission of 16 March 2017 \(44KB pdf\)](#)
- [PE1628/C: Scottish Health Council submission of 17 March 2017 \(78KB pdf\)](#)
- [PE1628/D: Audit Scotland submission of 21 March 2017 \(79KB pdf\)](#)
- [PE1628/E: COSLA submission of 5 April 2017 \(73KB pdf\)](#)
- [PE1628/F: Petitioner's submission of 7 April 2017 \(51KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).

**Public Petitions Committee****7th Meeting, 2017 (Session 5)****Thursday 20 April 2017****PE1639: Enterprise Agency Boards****Note by the Clerk**

<b>Petitioner</b>	Maureen Macmillan
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to reverse its decision to create a single Scotland-wide board for enterprise and skills and instead retain separate boards for each enterprise agency, including the Highlands and Islands Enterprise.
<b>Webpage</b>	<a href="http://parliament.scot/GettingInvolved/Petitions/PE01639">parliament.scot/GettingInvolved/Petitions/PE01639</a>

**Introduction**

1. The Committee last considered this petition at its meeting on 30 March 2017. At that meeting, the Committee took evidence from the petitioner and agreed to defer its further consideration of this petition until its next meeting. The Committee is invited to consider what action it wishes to take.

**Committee Consideration**

2. At its last meeting on 30 March 2017, the Committee noted that the Cabinet Secretary for Economy, Jobs and Fair Work was due to make a ministerial statement on the enterprise and skills review later that afternoon.
3. The Cabinet Secretary explained in his ministerial statement on [30 March 2017](#)—

“...The boards of HIE, the SFC and the other agencies will remain. However, there is an expectation that the agencies will work to align their delivery to maximise their positive impact on the economy. As I have previously promised, HIE will continue to be locally based, managed and directed, and the new arrangements will protect and enhance its unique service.”<sup>1</sup>
4. The Cabinet Secretary also provided further information on HIE’s core functions—

“HIE will continue to have a board and its core functions, as set out in statute, will remain legislatively unchanged. The new arrangements will not only protect the service that HIE delivers for our Highlands and Islands economies, but—

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<sup>1</sup> Official Report, 30 March 2017, col 85.

through the collaboration that we seek with other agencies—enhance the support that is available to businesses, employers and employees across the region.”<sup>2</sup>

5. As to the Highlands and Islands Enterprise Board’s powers , the Cabinet Secretary confirmed—

“I have said that the board will remain as it is and that it will have the powers that it currently has. It will not be second-guessed in terms of its strategic investments and it will continue to take the decisions that it has taken up until now.”<sup>3</sup>

6. The Cabinet Secretary explained further on this point—

“There is potential for the boards to be more powerful than they currently are. It is right for us to set out an overarching vision about productivity, increasing exports and meeting challenges that apply not just to one part of Scotland but to the whole of Scotland.”<sup>4</sup>

The boards of the funding council and Highlands and Islands Enterprise will do the things that they currently do. In fact, it may well be the case that they do substantially more. I mentioned that there is also a stream of work on regionalisation...It may well result in local areas, whether at agency board or some other level, taking on additional powers that are currently exercised by agencies such as Skills Development Scotland.”<sup>5</sup>

7. The Cabinet Secretary also clarified in relation to the HIE’s social functions that “...our intention that the social function of Highlands and Islands Enterprise will remain”.<sup>6</sup>

8. On the issue of reducing duplication of the work of enterprise skill boards, the Cabinet Secretary explained—

“We can achieve a lot more if we can make sure that the boards come together. I have given the example previously of internationalisation, where sometimes there is not the collaboration that there should be. People in HIE told me during the consultation process that they had access to one person in SDI. HIE needs to have more resource and more collaboration with the other agencies than is currently taking place.”<sup>7</sup>

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<sup>2</sup> Official Report, 30 March 2017, col 87.

<sup>3</sup> Official Report, 30 March 2017, col 89.

<sup>4</sup> Official Report, 30 March 2017, col 90.

<sup>5</sup> Official Report, 30 March 2017, col 90.

<sup>6</sup> Official Report, 30 March 2017, col 89.

<sup>7</sup> Official Report, 30 March 2017, col 90.



## **Conclusion**

9. The Committee is invited to consider what action it wishes to take. Options include —
- To close the petition under Rule 15.7 on the basis that the Cabinet Secretary for Economy, Jobs and Fair Work has stated that the boards, including the Highlands and Islands Enterprise Board, will be retained with their existing core functions.
  - To take any other action the Committee considers appropriate.

**Clerk to the Committee**