

PUBLIC PETITIONS COMMITTEE

Tuesday 15 December 2009

Session 3

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PUBLIC PETITIONS COMMITTEE

18th Meeting 2009, Session 3

CONVENER

*Mr Frank McAveety (Glasgow Shettleston) (Lab)

DEPUTY CONVENER

*John Farquhar Munro (Ross, Skye and Inverness West) (LD)

COMMITTEE MEMBERS

Rhona Brankin (Midlothian) (Lab)

*Bill Butler (Glasgow Anniesland) (Lab)

*Nigel Don (North East Scotland) (SNP)

*Robin Harper (Lothians) (Green)

Anne McLaughlin (Glasgow) (SNP)

*Nanette Milne (North East Scotland) (Con)

*John Wilson (Central Scotland) (SNP)

COMMITTEE SUBSTITUTES

Claire Baker (Mid Scotland and Fife) (Lab)

Jamie McGrigor (Highlands and Islands) (Con)

Nicol Stephen (Aberdeen South) (LD)

*Bill Wilson (West of Scotland) (SNP)

*attended

THE FOLLOWING ALSO ATTENDED:

Jackie Baillie (Dumbarton) (Lab)

Ron Beaty

Malcolm Bruce MP

Alex Fergusson (Galloway and Upper Nithsdale)

Dr Edward Fitzsimons (Gartnavel Hospital)

Garth Goddard (Yellow School Bus Commission)

Josh Kane (Scottish Youth Parliament)

Dr Kathryn Robson (Weatherall Institute of Molecular Medicine)

George Scott

Ewan Wallace (Aberdeenshire Council)

CLERK TO THE COMMITTEE

Fergus Cochrane

ASSISTANT CLERKS

Franck David

Alison Wilson

LOCATION

Committee Room 1

Scottish Parliament

Public Petitions Committee

Tuesday 15 December 2009

[THE CONVENER opened the meeting at 14:03]

Interests

The Convener (Mr Frank McAveety): I thank everyone for their attendance at the 18th meeting of the Public Petitions Committee this year. I ask that all mobile phones and electronic devices are switched off, because they can interfere with our broadcasting system.

I welcome to the public gallery a number of petitioners whose petitions the committee discussed at an external meeting.

We have a substitute member with us because of a committee member's ill health. I ask Bill Wilson to declare any interests.

Bill Wilson (West of Scotland) (SNP): I have nothing to add to my entry in the register of members' interests.

The Convener: Thank you, and welcome to the meeting. I hope that you will find going through the petitions that are in front of us beneficial and interesting.

Current Petitions

School Bus Safety (PE1098 and PE1223)

14:05

The Convener: We have two petitions for our immediate attention this afternoon. PE1098 calls on the Parliament to urge the Government to make provision for three-point seat belts to be installed on every school bus for every schoolchild passenger and to ensure that, as part of local authorities' consideration of best value in the provision of school buses, proper regard is given to the children's safety needs. PE1223 calls on the Scottish Parliament to urge the Government to take all appropriate action—by amending guidance, contracts, agreements or legislation—to require local authorities to install on school buses proper safety signage and lights, which are to be used only when schoolchildren are on the bus and only when necessary, and to make overtaking a stationary school bus a criminal offence.

Because of ill health, only one of the petitioners can be with us this afternoon. I welcome Ron Beaty to our discussion. He has engaged not only with the committee, but with the Parliament and Scottish ministers in trying to get proper responses to the concerns that are raised in his petition. As this is a round-table discussion, we have several other participants this afternoon. I welcome Malcolm Bruce, the member of Parliament for Gordon in the north-east of Scotland. He has had a keen interest in the matter over a number of years. I also welcome Garth Goddard, from the Yellow School Bus Commission; Josh Kane, the convener of the Scottish Youth Parliament's transport, environment and rural affairs committee; and Ewan Wallace, from Aberdeenshire Council, who is here because of the discussions that have taken place in Aberdeenshire about the matters that have been raised by the petitioners. Anything that is said in the debate will be recorded in the *Official Report*. I hope that we can have an open and honest discussion about the roles that we can all play in relation to the issue.

I open with a question for Garth Goddard. In your experience with the Yellow School Bus Commission, what initiatives have been pursued elsewhere in the United Kingdom and what has been the driving force behind those initiatives? Who do you feel is best placed to pursue such initiatives in order to ensure school bus safety?

Garth Goddard (Yellow School Bus Commission): Before I retired and became a member of the Yellow School Bus Commission, I was the transport co-ordinator for Cheshire County Council and was responsible for school transport for more years than I care to say. There are two

sorts of school transport. The first is the free school transport that local authorities are required by statute to provide for children. However, three quarters of children do not qualify for free transport and must use public transport or cars. The Yellow School Bus Commission has looked at that sector of the total school population and asked whether we should not get more of those children on to effective school transport for safety and environmental reasons. The yellow bus provides a clear opportunity to do that—it is our *raison d'être*.

A number of yellow bus schemes already operate in the United Kingdom. Most of them provide statutory school transport for the pupils whom the local authorities are responsible for transporting anyway. When I worked in Cheshire, I was one of the first transport co-ordinators to purchase some American yellow school buses to replace the conventional buses that had previously been provided by the private sector contractors. By and large, the schemes have shown that we can improve the safety standard and quality of school transport by investing in purpose-built buses such as those with which people in the United States are very familiar—we see them almost every time that we watch “The Simpsons”.

Yellow buses have gone down very well in this country, too. Where yellow school bus schemes have been introduced, they have been popular with parents, children and schools. It is particularly important that they are popular with children, because they have helped to address behavioural problems on buses. If children travel to school on buses that are 20 or 30 years old and are a bit shabby, they are less likely to take care of them than if they have their own yellow school bus with their identified seat and are familiar with the driver and so on. Our experience is that yellow school buses are a big plus from that point of view. From the safety and behavioural points of view, they have been shown to be good.

Yellow school buses have been effective in the schemes that have been introduced in Britain. All the schemes apart from the biggest one have been local authority initiatives, because local authorities are ultimately responsible for school transport. The UK's biggest scheme, which is in West Yorkshire, has been funded as an experiment by the Department for Transport. That has been really interesting, because it has shown the impact of having not just one or two buses, as I had in Cheshire, but a large number of yellow buses operating to a number of schools in West Yorkshire. The DfT has been monitoring that experiment and I hope that it will draw positive conclusions from it.

The Yellow Bus Commission has looked at the issue in enormous detail. We used the University of Aberdeen to do technical work for us, which has

shown not only that yellow bus schemes are popular but that they can be effective in cost benefit terms, particularly in relation to children who are not eligible for free transport: if we get large numbers of children out of cars and on to yellow buses, we can produce a substantial cost benefit from that investment.

Yellow school buses are about local authority initiatives, and perhaps central Government initiatives as well. They are about making substantial improvements, but they are also about money. The bottom line is that the sum of money that we need to find if we want to invest in yellow buses is not small, but our research has shown that such initiatives can be really effective in terms of both cost benefit and safety.

There are also environmental benefits. If we introduce more buses and get more children on to public transport, there are two major benefits. First, we reduce the number of cars that buzz around schools and cause safety problems. Secondly, we say to children during their formative years, “This is what public transport is about, and it can be a positive thing”, so that, we hope, we capture them for the longer term.

The Convener: Has an assessment been done of children's and parents' views of the buses?

Garth Goddard: Yes.

The Convener: What were the key messages from that?

Garth Goddard: The key message is that children and parents like them. Parents and users were surveyed extensively when the Yellow Bus Commission had an exhibition that toured around the country with a yellow bus, and we got positive results throughout. Perhaps more effective, however, is the impact of particular schemes that are operating now. As I said, we find that schools, parents and children are all positive about them.

One of the best schemes is at a primary school in Basingstoke in Hampshire. Young children are happily transported to school in mass transport by yellow buses. Parents are delighted and children are very happy with the scheme. It was introduced because there was too much car congestion around the school, and it has brought real benefits in that respect. In addition, parents like the fact that they are no longer responsible for getting into their car and taking their children to school. Instead, they hand their children over to a safe environment. That is an important aspect of encouraging more people to consider public transport for their child's journey to school.

14:15

The Convener: On the importance of a safe environment, in your experience do the yellow

buses have higher specifications than the other options that are available?

Garth Goddard: Yes, the yellow buses have high specifications. The American yellow buses that we imported are built like tanks so, if they are involved in any sort of accident, we can be sure that they will come off better. They provide a safe environment. Generally, the buses are built with children rather than adults in mind, so the seating dimensions—the spacing of seats and so on—have been thought through. All the seats have three-point seat belts, which is really positive.

Other specifications are also available. One specification that we had on our yellow school buses was to have a radio on the bus to entertain the children, which they really liked. If they were naughty, instead of getting Radio 1, they would get Radio 4. That presents a worthwhile opportunity to get the children to identify with and enjoy the experience of going to school. Another important specification is closed-circuit television.

The Convener: We would have “Good Morning Scotland”, but there we go.

Bill Wilson: Garth Goddard stated that yellow buses are safer and, if I understood him correctly, he implied that they suffer slightly lower levels of vandalism. Are there any hard figures on that to give us a clearer idea of the benefits?

Garth Goddard: Vandalism is an issue that everyone has experience of, but it is difficult to quantify. As someone who ran a small number of yellow buses in Cheshire, I can confirm that there were far fewer behavioural problems on the yellow buses than on the conventional school transport that I provided elsewhere in the county. From my personal experience, I can give an assurance that that is the case.

The safety benefits are also difficult to quantify because buses are generally a very safe mode of transport. Statistically, the number of accidents, injuries and fatalities arising from bus travel is very low, so we do not have enough data to be able to say that a yellow bus is safer than a conventional bus. However, intuitively, we can say that a bus with built-in safety features such as seat belts and crash resistance will perform more satisfactorily than the older bus that is often the norm for school transport.

Bill Wilson: I suppose that studies in the States—although they would not be quite the same thing—could provide us with some hard figures.

Garth Goddard: That is an interesting point because we know that yellow buses are ubiquitous in the United States.

Another interesting point is that the United States has a totally different culture in respect of

the way in which other road users treat the yellow buses. As probably everyone knows, if a yellow bus in the United States is loading or unloading passengers, drivers must stop and may not overtake. The fact that there is no passing traffic immediately reduces a considerable danger in carrying children by bus to school. Anecdotally, I know that my commission colleague who visited the United States to talk to yellow bus operators generally got the view that, as I said, the yellow buses are built like tanks and are very crash resistant. The apparent experience in the United States is that the nature of the vehicle means that the danger to the children in an accident situation is much lower.

Bill Wilson: You said that drivers in the States may not overtake yellow buses when passengers are dismounting. Are there any statistics on the extent to which that has reduced the number of accidents involving children being knocked down while leaving or being in the vicinity of a school bus?

Garth Goddard: Are you asking about the data in this country?

Bill Wilson: Are such data available in this country or in the States?

Garth Goddard: Those data will be available, but I do not have them to hand to comment on. However, an issue in the United Kingdom is that from time to time serious accidents occur in which children get off the school bus, cross the road in front of or behind it and are knocked down by a passing motor vehicle. That is one of the real problems with the journey to school. The issue is not so much about the children being on the bus and the danger of the bus crashing; it is the situation that the children are in immediately prior to getting on the vehicle or immediately after leaving it.

Nanette Milne (North East Scotland) (Con): Is there any adult supervision of the children on yellow buses, other than that by the bus driver?

Garth Goddard: Broadly, no. One interesting thing about yellow bus schemes is that the drivers tend to be hand picked and specifically trained to deal with the children. It is about building the right sort of relationship between the drivers and the children, which helps a great deal in the supervision of the children. In my experience of working in local authority transport, it is an expensive business to have an escort, as we called them, on all school buses, which is not justified. If there is a problem on a particular route, a temporary escort can be put on. That is probably the best way forward. It would be overkill to expect every school bus to have an escort. An escort is even less important with yellow buses because of the benefits that I talked about of better behaviour

and driver identification with the children whom they carry.

Nanette Milne: That is interesting. When I was a local authority member, I tried to get a bus for some fee-paying schools. Three fee-paying schools were interested in having a school bus to take some of the congestion off the roads at peak times. That fell flat on its face because the schools could not get adults to do the supervision regularly and the scheme would not be sanctioned without a supervising adult. It is interesting that yellow buses do not have such adults.

The Convener: Garth Goddard is doing really well, but this is almost like a prosecution, when it is meant to be a round-table meeting.

Robin Harper (Lothians) (Green): I venture that it is far more important to have somebody on the road to greet the buses and shepherd the children than to have somebody on the bus. That should be relatively easy for schools to arrange, either with volunteer parents or by finding money to pay the equivalent of a lollipop person to stand on the road. That is the point when the danger arises—it is not while the children are on the bus.

The Convener: Are there any other broad points on that topic?

Ron Beaty: I have a comment on Bill Wilson's question about whether there are any figures in the UK for school bus deaths or accidents. Those figures do not exist. Although figures are collected through the stats19 system, they are inaccurate because of the way in which they are recorded by police, hospitals and emergency services in general. I believe that a new form is being produced but, basically, a school bus accident is treated as a child pedestrian accident. That is why figures are so hard to come by.

Bill Wilson: Do you know whether the figures exist in the States, where school buses have been used for far longer?

Ron Beaty: I think that in the States the overall figure is something like 0.5 per cent out of 164 million miles that are covered per year—it is a small figure.

Bill Wilson: Do you have any idea of the accident rate for passengers leaving other buses?

Ron Beaty: Not really. Those accidents are lumped in with other figures. You would have to go to the Government site to find that out, but the statistics are not 100 per cent accurate by any means. People involved with stats19 have admitted that to us.

Garth Goddard: Our commission could consider the issue to see whether we can unearth more information on the statistics, if that would help.

Nanette Milne: Just this week, a local councillor raised with me the difficulty at this time of year of seeing pupils when they come off school buses. They tend to wear dark clothing nowadays that has no high-visibility attachments. Does the yellow bus scheme provide armbands that people can see, or something like that?

Garth Goddard: I am not aware of any yellow bus schemes that do that. However, it could be done, and it is already done in the context of what are often referred to as walking buses, in which platoons of children are supervised to walk to school where the journey is less than, say, 1 mile. In the Yellow School Bus Commission, we very much encourage children to walk to school. We do not want every schoolchild to be transported by bus. Clearly, if they have less than 1 mile to go to get to school, walking is a healthier alternative for them. When someone organises children to walk to school, they perhaps provide high-visibility vests, as well as escorts at the front and rear. The suggestion that children might wear some identifier for when they get off a school bus possibly merits consideration.

Nanette Milne: You said that, by and large, pupils like the yellow bus for various reasons, including safety. Do we know the views of children who are not fortunate enough to be in such a scheme? I have not specifically asked children in my area what they think about bus safety. I do not know whether any work has been done on that.

Garth Goddard: We have a representative here from the Scottish Youth Parliament who might be able to help us on that question. However, I can tell you that I addressed the UK Youth Parliament at its annual session in Canterbury last summer and spoke to two quite big groups of representatives, who were all enthusiastic about yellow buses. The commission's general experience is that, when we talk to children who do not have yellow buses or who have conventional buses, they often ask when they are getting a yellow bus. There is therefore enthusiasm for the yellow bus among children.

Josh Kane (Scottish Youth Parliament): Some of the ideas sound excellent in theory, but I do not think that they will be effective in practice. You should try to find a young adult who will wear a wristband getting off a bus—they will not do it and are not really up for it. Robin Harper said that perhaps there could be escorts on buses, which is possibly a better idea. However, can schools do that? Some schools have perhaps eight or nine school buses, and it is not possible to get an escort on each bus.

On behaviour on school buses, we must consider the safety not of the school bus itself but of the children, which opens up another aspect that perhaps has to be looked into.

Ewan Wallace (Aberdeenshire Council): My main point is on statistics, to which Ron Beaty and Garth Goddard have already referred. We did a bit of work on the back of an accident in 2006 that involved one of our home-to-school transport vehicles. We had discussions with the Transport Research Laboratory, particularly on the seat belts issue. Certainly, the TRL reinforced some of the numbers that Ron Beaty quoted from the United States of America. We are talking about a one in 17 million chance of an accident involving a home-to-school transport vehicle—the statistical levels, in terms of the number of incidents, are very small. However, the TRL research identified that, when such accidents happen, they tend to be very serious because the vehicles have multiple occupants. The TRL also looked at the impact of different types of seat belts.

If the committee is to take the matter further, as well as talking to the Yellow School Bus Commission, you should also have discussions with the TRL, the Department for Transport and Scottish Government statisticians because they will have the best handle on the type of information that would start to flesh out how to take the issue forward.

14:30

The Convener: We heard from Garth Goddard about the progress that some local authorities are making. We have heard about Aberdeenshire Council's experience. The issue has been explained to us before—some powers are reserved, but some issues can be developed through Scottish transport bodies. Given that much of the cost could fall on councils, where do local authorities fit in?

Ewan Wallace: I can add some background to that. In Aberdeenshire, we transport close to 14,000 pupils every day to all the schools in the north-east. Three or four authorities in Scotland perform that function at a similar level. We spend £15 million annually on such contracts. A lot is happening out there—that is a big bit of a local authority's business.

We have considered several ways in which we can make a difference, such as altering contracts before the next round of contracts starts next year and trialling different signage for the back of buses to make them more visible to drivers, so that it is more obvious that they are approaching a school transport vehicle. To pick up Mr Harper's point, we have considered having something at pick-up and drop-off points. We have talked to Swedish colleagues about a flashing signage system that they use at particular pick-up and drop-off points. We have about 15 strands of work on what we can do, but the convener is right to say that local authorities do not have the ability to achieve all of

them. For example, flashing signage on the back of buses starts to fall into the scope of vehicle use regulations, which the Department for Transport deals with. A range of matters is associated with that work.

Josh Kane talked about interaction with pupils. One advantage for a local authority is that we also deliver the education function in schools. I cannot overstate the advantages of regular joint work in every school, so that we know each school's views on its transport requirements.

Robin Harper: I am looking at the numbers of young people who have been killed or seriously injured or who have been in other accidents. It is remarkable that, between the ages of 10 and 12, the numbers of children who are killed or seriously injured treble and the numbers who are in other accidents quadruple. Has research been conducted into what needs to be done to address that sudden rise involving these children, particularly in pedestrian accidents? Are those increases associated with particular pedestrian accidents, such as those that occur when children get off buses and dash across the road unsupervised? I just throw that into the general mix. The rise in the figures is astonishing. A similar rise occurs in all forms of accidents among children between the ages of 10 and 12.

The Convener: I will bring in Malcolm Bruce, who introduced a private member's bill on school buses and has had dialogue with UK transport ministers about opening up the debate and being more proactive.

Malcolm Bruce MP: The statistics reveal that the rise in deaths, injuries and accidents to which Robin Harper referred has a lot to do with the fact that children at the age that he mentioned have confidence but not experience, so they tend to push their luck.

The Convener: I am still in that age group.

Malcolm Bruce: One of my daughters is 10, and I can see such behaviour starting to happen.

I commend Aberdeenshire Council and other authorities that are proactively developing measures, but they cannot do everything in law. I am worried that different authorities will move in different directions and that co-ordination is lacking. A role for the respective transport departments is to provide—at the very least—some kind of framework without inhibiting the development work that is going on.

There are three issues that people were most persistent in raising with me when I was promoting my private member's bill. The first is why we do not have a no-overtaking rule and why there has not even been a pilot scheme. When I first raised the matter with the Government, Sadiq Khan, who

is Minister of State for Transport, seemed keen on the idea of a cross-Scotland pilot. However, in a subsequent meeting, he seemed to imply that he did not get the feeling that there was a will in Scotland to do that. I am not sure whether that was because of an inhibition on money or any other factor, but what he told me does not accord with what people at the other end have been saying. I am unclear why that pilot could not happen. The issue is controversial—not everyone agrees that the idea is a good one—but a pilot scheme might help to test the reality. Obviously, from experience, Garth Goddard believes that the evidence would be positive.

The second issue is that of seat belts. I accept the statistical evidence that accidents do not happen very often, but at least one accident in Aberdeenshire caused concern and generated a lot of campaigning activity. The question is: if wearing seat belts is made the rule, should seat belts not be standardised? People want to know whether lap belts or three-point belts will be specified. When I spoke to it, the Department for Transport said that it had identified a problem with European law, but I found what it told me a little odd. The department implied that a seat belt requirement on school bus providers would be seen as an infringement on competition. The argument did not seem to be realistic: I cannot see Belgian or Italian bus providers rushing to make contracts with Aberdeenshire Council. Anything that the committee can do to clarify the situation would be helpful.

The third issue—and perhaps the best one to pursue—is that of electronic signage, which Ewan Wallace mentioned. We had a very good meeting in Inverurie on the subject, and I have discussed it with ministers, in the House of Commons and with other people. There are a lot of ideas on how signage could be improved. One example is interactive signage at bus stops that alerts people that a bus is approaching and that drivers should slow down. Such signage could be coupled with flashing signs on school buses. The issue poses the question what the law allows a local authority to do. If authorities were given a fair amount of discretion, would that be helpful? What if authorities were to have completely different systems?

At the end of the process, I was left with the belief that the respective departments have a clear role in co-ordination and leadership. Ewan Wallace made the point that we should respect the huge amount of front-line experience that the education authorities that are providing the transport have. The departments should not be inhibited but be liberated by that; they should try to co-ordinate the bringing forward of best practice.

At the end of the day, despite a great dialogue in which a lot of very good ideas were raised, neither the Department for Transport nor the respective Scottish Government department has made any concrete development on how to make the situation safer.

Robin Harper made a suggestion about co-ordinating better how children get on to the buses, which could be done. However, in the north-east, the accidents happened when children were on their way home—when they were getting off the buses. Parents witnessed an accident that was not entirely the fault of the child. There was perhaps a lack of concentration on their part, but the accident happened because the driver of the vehicle who hit the child was moving far too fast and without due consideration. Clearly, flashing signs and a no-overtaking rule would make a difference.

In the north-east, people are fairly clear about what has happened and what they would like to happen. They are also fairly frustrated that we are getting no positive action.

The Convener: Thanks for that, Malcolm. Your evidence is important. We are caught in the middle on this one; there are powers at both Scottish and UK ends. We want to drive this forward.

Nigel Don (North East Scotland) (SNP): I am delighted that Malcolm Bruce is at committee. Clearly, the matter is complicated: different people have different responsibilities. I would like an answer to a question that the BBC put to me yesterday and which I could not answer. Is there confusion about who has which powers, or is it clear who has which powers and that the problem is the complexity of the matter? Clearly, we need to be able to distinguish between the two.

Malcolm Bruce: It depends which powers we are talking about. Let us take the no-overtaking rule, the power for which lies with the UK Department for Transport. The minister to whom I spoke told me that he has the discretion to allow a pilot scheme in Scotland. It is not clear to me why that has not proved possible; I have not received a satisfactory answer to the question. Similarly, I understand that there is nothing to stop a local authority including in bus operator contracts a requirement for three-point seat belts; Ewan Wallace will correct me if I am wrong. It could be an education requirement for all local authorities to insist on such seat belts. In that case, responsibility could be split between the UK and Scottish authorities or could be fully devolved.

The issue of signage is pretty much devolved, although Ewan Wallace makes the point that road traffic regulations might come into play. You are right to say that the position is confused and complicated. There are things that can be done in Scotland without reference to the UK Government,

but there are other things that require co-ordination, at the very least.

Nigel Don: You have confirmed to me not only that the position is complicated but that there is a degree of confusion. We need to address that issue.

The Convener: I invite Ron Beaty to comment on the issue, which he has raised consistently.

Ron Beaty: Malcolm Bruce mentioned Europe, and I do not know whether he has seen the 2009 report on road safety in schools. I and others understand from reading the report that it is fully supportive of the no-passing law. However, as often happens in the European Union, not much seems to have been done much about that.

Flashing signs are an utter necessity. Lighting regulations have been mentioned. East Riding of Yorkshire Council has trialled a school bus that, in addition to the school sign, has a safety flashing sign that says "Caution Children Crossing", with four strobe lights. That is brilliant, because it immediately draws the driver's attention to the fact that something is going on.

There are problems with the legality of school bus signs. The question is: should they be removed when the school run is finished? I think that they should be on the bus for educational visits and so on. In its new contract, Aberdeenshire Council stipulates that bus signs must be taken down, but no points system is attached to penalise failure to do that. I realise that there are contractual problems, which need to be sorted out.

School transport has not been updated since the year dot. It is time that money was spent on the issue—a flashing sign is a necessary. All the safety experts have missed the fact that signage is on different levels on different buses: sometimes it is at the top of the bus, sometimes it is halfway down and sometimes it is in the bottom right-hand corner. When it is in the bottom right-hand corner, it cannot be seen from a heavy goods vehicle or large van that parks behind the bus. That is where extra-high hazard lights—which are found on ambulances—come in. Such lights immediately draw a driver's attention to the fact that a bus has stopped and lead them to ask themselves why it has stopped.

Signage is a problem area. East Riding of Yorkshire Council went for permission not to the Department of Transport but to the Vehicle and Operator Services Agency. VOSA said that, as far as it was concerned, there was not a problem with the proposed sign, so the council went ahead with its trial. The issue needs to be sorted out, along with others.

The Convener: Unless there are other issues that members and participants in the round-table discussion would like to raise, I suggest that we move on, as there are other aspects of the petition that we would like to explore.

Malcolm Bruce: Ron Beaty has mentioned one scheme. In Aberdeenshire, a couple of people are trying to develop electronic sensors that flash automatically when someone passes in front of them. The technology is at an experimental stage, but Aberdeenshire Council will know about it. Many ideas are in place. However, if all of them go off in different directions in different places, that will add to the confusion instead of resolving it—I share Nigel Don's concern. The committee could help to co-ordinate matters.

14:45

John Farquhar Munro (Ross, Skye and Inverness West) (LD): Good afternoon. There seems to be a great deal of enthusiasm and support for the concept of the yellow buses—we have heard plenty of evidence of that today—but if a local authority were to go down the road of purchasing some yellow buses, there would be a tremendous capital cost attached. Could local authorities make a case to demonstrate that going down that road would lead to financial savings being made in other activities?

Garth Goddard: Our commission looked at that issue. As I have said, the work that the University of Aberdeen has done for us indicates that the costs are substantial but the benefits are very high. For example, we have identified that, if the initiative of persuading children, other than those whom councils are statutorily required to transport by bus, to use buses instead of cars were applied across the board to primary schools throughout Scotland, local authorities could expect to spend between £17 million and £18 million on acquiring the vehicles but the benefits that might spin out of that would be upwards of £40 million. It is clear that money would need to be found to do that.

The Convener: How do you arrive at those figures? How do you get a benefit to cost ratio of 3:1?

Garth Goddard: The benefits are worked out by performing the widest possible cost benefit analysis. In other words, we are talking about the benefits to parents and other road users of, for example, congestion and accident reduction. It is a question of looking not just at the financial benefits but at the whole spectrum of social benefits. A strong case can be made but, as I have said, it is really a question of money.

I want to return to the school transport that local authorities have a statutory obligation to provide. At the moment, most local authorities use the

tendering process to get value for money, as one would expect, but they can write into the contract whatever specification they like. If they wanted to write into the contract, "We would like yellow buses," the bidding bus operators would have to ensure that they could acquire the right tool for the job. It is an investment issue. If the local authorities were to buy the buses directly and operate them themselves, they would incur a big capital cost up front. If they were to specify the use of yellow buses in the contract, the monthly cost of the contract would be much higher, because they would be asking for new vehicles in the contract.

The Convener: I could see the fellow from Aberdeenshire twitching about that, so I will ask him to speak.

Ewan Wallace: I can perhaps provide some context. As I said, I cannot speak for every other authority, but Aberdeenshire Council runs 750 contracts, which means that every day about 800 vehicles transport the school kids for whom we have a statutory obligation to provide services. We own and run a small number of those vehicles ourselves—smaller-scale ones that have a low floor and are fully accessible, which are used for children who require support for learning. We already run a certain number of school transport vehicles, but we are talking about a high level of statutory provision. A significant number of vehicles are provided by the private sector contractors who operate in our communities, who employ drivers and have maintenance, such as MOTs and services, carried out in local garages, so there is a hidden element.

The Convener: It strikes me that, as far as the wider economy of Aberdeenshire is concerned and given the support services that are required for the large number of small, independent providers, it is probably not feasible, from a capital point of view, to achieve a shift from the present arrangement. What can you do with the existing independent providers? Could more statutory back-up, national direction and commitment be provided by the Scottish or the UK Government? Could incentives be offered, such as reductions in cost and other aspects of support, if they were seen to bring benefits to road users in the longer term? How would that work?

Ewan Wallace: We have already tried to work with the operators on types of signage and the trials that we have run. We have considered the Yellow School Bus Commission's reports, tried to build many elements that are deemed to be best practice into contracts, encouraged best practice in driver training, and rolled out interactive DVDs to get the contractors to train their drivers on their responsibilities.

Josh Kane made a point about pupils' responsibilities. The drivers of school transport

vehicles and cars on the road network and parents also have responsibilities. They are all part and parcel of the situation, and we are already trying to work with them. Rather than use the stick, we try to work in partnership with them as much as possible.

John Farquhar Munro: That is interesting.

The evidence that we have heard, today in particular, suggests that the big problem and real danger is when school pupils step off or get on to buses rather than with their conveyance. The campaign to make vehicles that transport children as conspicuous as possible is to be commended. Anything that can be achieved in that regard would help.

I am still confused about one thing. PE1098 says that seat belts should be fitted in all school conveyance vehicles. Initially, that appears to be quite a simple suggestion, but it was not specified that there have to be three-point linkages. It is fairly simple to put in lap belt arrangements, but putting in three-point fixings is altogether different. Have the bus operators commented on the difference in costs between lap belts and three-point linkages?

Garth Goddard: The extra cost of having a new bus with 40 seats fitted with three-point belts would be around £4,500. That would be the total cost for a new, conventional single-decker bus that costs £140,000-plus, so the cost of getting those belts fitted in new buses is relatively modest. However, trying to retrofit belts in existing buses that have not been properly designed to cope with belts is a problem. The cost of that would come to a minimum of around £8,000 per bus; it would possibly be much more if there were no easy anchorage points.

The Convener: So the earlier there are discussions about specifications, the better.

Garth Goddard: Yes.

Bill Wilson: For normal motor vehicles, there are child seats with seat belts because adult seat belts do not fit children. If buses are supposed to be run for children between the ages of five and 16, will one type of seat belt be sufficient? Will it cover that entire age group? It is obvious that there are huge differences in the sizes of children.

Garth Goddard: That is an interesting question. An issue is whether very small children need booster seats as well. I understand that the three-point belts that are being fitted in modern buses are specifically designed to cope with the problem. That may not be a perfect solution, but the issue is clearly in the minds of the people who supply belts for the buses.

I was going to say something else, but I have forgotten what it was. I am sorry.

The Convener: Do not worry, Garth. I have senior moments as well.

I am keen to explore how we can get the two responsible bodies—the Scottish Government and the UK Parliament—working a bit better, and what initiatives we want to examine as a result of what we have heard. I am conscious that we have already spent a fair amount of time discussing the petitions and that there are other items on the agenda, so in the remaining time that we have I would like people to focus on those things.

Bill Butler (Glasgow Anniesland) (Lab): As Malcolm Bruce said, it seems perfectly possible for a no-overtaking pilot scheme to be instructed by the UK Government and carried out north of the border. Could we correspond with the UK and Scottish Governments to see whether they can work together to do something that does not seem to be outwith the powers that are available?

John Wilson (Central Scotland) (SNP): Instead of making this just a UK Government and Scottish Government initiative, it might be useful to incorporate local authorities, too. As we have found previously in considering the introduction of new measures, cost variances can apply across the 32 local authorities. If we are to ask for a pilot to be carried out, we need to consider the costs of putting such measures in place. How would the measures apply? Would they apply to the vehicles that transport the school pupils? I am also thinking of stand-alone signage on the road that comes on when a bus or school vehicle stops, like the signage that currently applies to 20mph limits on approaches to schools. We need to get down to the basics of what a pilot scheme would entail and what costs would be associated with it. Pilot schemes do not come cost free.

Any pilot might not end up being Scotland-wide. As in the past, we could ask one or two local authorities to participate in the pilot—but being fully aware of the cost restrictions that might apply and of the measures that might be required to operate such a scheme in a way that brings accurate results.

We can do some calculations about the introduction of yellow buses. How long do the yellow buses that are purchased by local authorities operate for? The school year lasts only 38 weeks, which means that there are 14 weeks when the buses are not used. How do we restore the buses? What do we do with them? There are issues around cost.

I agree with the point about pilot schemes, but we need to be clear about how they would be funded and who would deliver the pilots. We could not do a Scotland-wide pilot.

Robin Harper: It would be worth pointing out to local authorities, if we add them in as John Wilson

has suggested, that the most important time for road safety education for young people is not in the final year of primary school but in the first year of secondary school, which is when the peak number of accidents and injuries occurs.

The Convener: I want to pull those points together. We have taken note of the suggestion that we seek further information about good models elsewhere in the UK. The Yellow School Bus Commission has indicated that it will be happy to explore some of the issues, if we are able to engage in dialogue. Malcolm Bruce, Nigel Don and John Wilson have spoken about discussions with the appropriate ministers, in both the Scottish Government and the UK Government. Robin Harper has spoken about the statistical emphasis and where the biggest impact of accidents lies. Let us pull all those things together and explore them with the appropriate agencies.

Are there any other useful suggestions or observations from members and other participants?

Malcolm Bruce: The no-overtaking rule is not universally supported, but the argument for piloting it in Scotland is that, as Scotland is a distinct entity with suitable communication means, people would know about the policy. The arguments against having a pilot in one or two localities are that people would not know about it easily, it would cause confusion, and it might not provide a good base test. Those points were part of the discussion and must be part of the balance.

I am more concerned about the developments on signage than anything else. Technology is moving at a rapid rate and people are doing different things in different places. The two Government departments should work together, co-ordinate with the local authorities on best practice and recognise that the best ideas probably come from the local authorities rather than from the top down. That is where the biggest breadth of support seems to be, as well as the greatest possibility of getting concrete results that would hit the public, make children aware and improve safety.

15:00

The Convener: Perhaps Ewan Wallace would like to make a final comment on Malcolm Bruce's invitation for local authorities to take some ownership of the matter.

Ewan Wallace: It is not only Aberdeenshire Council that has done work on the matter; a sizeable number of authorities throughout Scotland are working along similar lines. It is always difficult for the UK Government and the Scottish Government to talk to so many individual bodies, but there are umbrella organisations that

can bring together and co-ordinate the development of best practice in discussion forums and work with the Scottish Government and the Department for Transport. On the public transport side, there are bodies such as the Association of Transport Co-ordinating Officers, which is a key organisation; on the road safety education side, there is Road Safety Scotland, which delivers a number of different initiatives; and, from the local authority perspective, there is the Society of Chief Officers Transportation in Scotland.

The Convener: I am conscious that there are other major petitioners waiting to speak to us as well. There is a lot in what has been said. I thank those who travelled up a long distance and those who have come down from the north-east for the meeting. Through the petitions that Ron Beaty and the other petitioners submitted, we know that there is a lot of public support for exploring the issues, and we want to try to find satisfactory solutions. We want to explore the key issues that have been raised and, in particular, try to bring together the two different departments in much more effective dialogue. We will take a graded approach towards things that we can do now, things that we would like to do if resources permit, and long-term measures that are major investment issues and require partnerships between local and national Government. We would be happy to explore the statistics that exist or should be collected on children's safety in school transport.

I hope that the meeting has been of benefit to those who managed to attend for the petitions. I do not know whether it is the first time that Malcolm Bruce has been in a Scottish Parliament committee.

Malcolm Bruce: It is the second time.

The Convener: I hope that it was as gentle as the last time.

New Petitions

Haemochromatosis (Screening) (PE1298)

15:06

The Convener: The next item is consideration of four new petitions. The first new petition on which we will hear from contributors is PE1298, by George Scott, which calls on the Scottish Parliament to urge the Scottish Government to promote and support the introduction of national screening and a science-based diagnosis of haemochromatosis iron overload within national health service primary care—I thank our resident general practitioner for the accuracy of my pronunciation.

Let me welcome a number of individuals: George Scott, who is the petitioner; Dr Edward Fitzsimons, who is a consultant haematologist and head of department at Gartnavel hospital; and Dr Kathryn Robson, who is from the Weatherall institute of molecular medicine at the John Radcliffe hospital in Oxford. If this is their first time in front of a Scottish Parliament committee, I hope that the experience will be of benefit not just to them but to those of us at this end of the table.

The petition has attracted keen interest among elected members, so let me also welcome the Presiding Officer, Alex Fergusson—he is here in his capacity as an individual MSP, but I always like to mention his important role in the Parliament—and Jackie Baillie, who is another constituency member with an interest in the issue. I will allow them to contribute to our consideration of the petition at some point in the afternoon.

I invite Mr Scott to explain a bit further what lies behind the petition.

George Scott: Convener and committee members, let me first thank you for agreeing to consider the petition.

Haemochromatosis was first discovered in 1935, which is almost 75 years ago. The disease has at least five forms, including neonatal and juvenile haemochromatosis. The mutation of the C282Y gene was identified in 1996, yet no screening of the condition is offered today in 2009.

The condition is easily controlled by venesection and the blood can be used for transfusion purposes—that would provide the blood service with a constant stream of donors once the patient was in the maintenance phase. Indeed, I note that another petition that the committee will consider today calls for the payment of blood donors. I confess that I was an executive director of the National Blood Service in England, so I know a bit about blood.

The condition has links to many other diseases, including multiple sclerosis, chronic arthritis, heart conditions, diabetes, Alzheimer's, dementia and terminal liver damage to name but a few. If there is time later, I will give a personal story about how I became involved in the condition.

Basically, diagnosis of the condition is currently carried out only at secondary care level, which means that it is done by people such as Dr Ed Fitzsimons. It is believed that considerable savings could be possible in the reduction of liver care at acute stage and in other related conditions. If we consider the fact that the condition affects one in 200 of the population and is carried by one in eight people—I invite anyone just to count the number of people in this room—that means that more than 600,000 people are carriers, yet haemochromatosis is often seen as a rare condition.

What would I like to happen with the petition? I will give you the bottom line. I would very much welcome the committee's help in persuading the Government to consider: first, introducing an increased awareness programme for primary care and the general public; secondly, offering parents the opportunity to have their children screened for haemochromatosis; thirdly, offering families of all confirmed cases screening for the condition; fourthly, introducing iron blood tests at primary care level, based on the general symptoms of the condition; and fifthly, and perhaps most important, setting up a patient registry in Scotland to quantify the penetration of the condition and setting up trials to help to determine the penetration and quantify difficulties with the introduction of adult screening. The Haemochromatosis Society, of which I am a trustee director, has offered to make a financial contribution to any such trial. We are prepared to put up some money to help the trial along.

I thank Alex Fergusson again for taking the matter forward in the first instance on my behalf. We are happy to answer questions.

The Convener: I invite Alex Fergusson to comment.

Alex Fergusson (Galloway and Upper Nithsdale): Thank you. You will be pleased to know that I intend to be very brief—that is unlike me, I know. I wanted to come along today. Mr Scott is a constituent of mine, who contacted me to ask me to come and talk to him about haemochromatosis. I had never heard about it, but I went along one afternoon and—to be frank—I sat spellbound and captivated as he talked me through the condition and the level of ignorance that has surrounded it until comparatively recently.

What really struck me were the diseases and conditions to which haemochromatosis is linked.

Mr Scott referred to some of those, which, as he pointed out, are only the tip of the iceberg; there are many other such conditions. The thought came to me that all those conditions cost our national health service a fortune in people's later years. Much of that cost—not all, but much—might almost be eliminated if the condition was picked up at an early enough stage. As I understand it, screening is easy and inexpensive and could have the most tremendous cost implications for our NHS, freeing up resources for other badly needed things.

Simply on that basis, I encouraged Mr Scott to bring a petition to the Parliament on the issue. We approached the Minister for Public Health and Sport, Shona Robison, who gave a perfectly sympathetic answer, but I thought that the issue could be pushed a bit further and more quickly and that a petition would be the right way to do that. I am grateful to the committee, as is Mr Scott, for considering the petition and hearing evidence on it, and I encourage members to probe the issue of the other diseases to which haemochromatosis is linked and the extraordinary savings to our national health service that could be made if the condition was picked up at an early stage.

Nanette Milne: Alex Fergusson said that screening is not expensive, which is interesting. I am not up to date with what is going on with regard to such conditions. How is screening done? Is there a genetic test? Will Mr Scott talk a little about that and say what the cost is?

George Scott: You have to look at the issue in two ways. Initial diagnosis of the condition is done by quite a simple test. It is just a question of including additional tests in an existing blood test, to look at the amount of ferritin, which is the protein that binds the iron to the blood, that is saturated in the blood. If tests are run through the main laboratories, the cost is about 40p or 50p per test, because other tests are being done at the same time. If the test is done as a one-off, the cost is probably about £3. The big health service labs can do it for about 40p.

Nanette Milne: Is the process fairly automated?

George Scott: Yes, it is automated. Most areas can do it easily because they are used to doing the tests. It is not a new test or one for which a separate assay is necessary; the assays are already in place. The genetic test is a bit more involved.

15:15

Dr Kathryn Robson (Weatherall Institute of Molecular Medicine): The cost of doing a genetic test at the moment can be anywhere from £50 to £100 depending on where it is done in the United Kingdom. However, if we break it down to how

much the eggs, flour and sugar to do the test cost, it is less than £5. Because it is a genetic test, it needs to be done only once.

Nanette Milne: I can certainly see the cost effectiveness of the test if it prevents later complications.

Dr Edward Fitzsimons (Gartnavel Hospital): The iron testing is simple; the definitive testing—the molecular testing for genes—is a bit more complicated. However, we could do the simple tests in the first instance. They are already in place in laboratories throughout the country and are easily done.

Nanette Milne: Are those tests done on someone who is not showing clinical symptoms at the time?

Dr Fitzsimons: Yes. The tests would show the first evidence of iron loading. The condition is hugely common and, if it develops, it is destructive. I am not sure how many people in the room had heard of haemochromatosis before, let alone could spell it.

The Convener: I had trouble pronouncing it, never mind trying to spell it.

Dr Fitzsimons: From a clinical point of view, the disease is entirely preventable.

The Convener: Perhaps we will touch on that point. I think that members want to pursue questions on it.

Bill Wilson: The petition says that

“recent surveys have shown a prevalence of 1 in 200 likely to be at risk of developing”

the disease. If a person is one of those one in 200, what is the probability of their developing the disease? What percentage of those people might be expected to develop it?

Dr Robson: The authorities in northern and south-east France are ahead of us in that they have a registry so they can do those calculations. From the results that are coming out of there, it looks as though more than 30 per cent of males over the age of 30 to 35 who have two copies of the C282Y mutation will require treatment for their iron overload. The level in women is much lower—probably about 15 per cent—but you must realise that, until a woman is post-menopausal, she is less likely to develop the disease because she bleeds every month and, hence, she is self-treating in a way.

Bill Wilson: That sounds like we will be going back to the old days and will start bleeding ourselves.

Dr Robson: Yes.

Bill Wilson: You said that the test can be added fairly simply to standard tests. Are there any points at which children could have blood tests, or standard tests into which the test for haemochromatosis could easily be fitted?

George Scott: I believe that five genetic tests are already carried out on newborns with the initial heel-prick test and I do not see why parents could not be offered a sixth one to determine whether the child is likely to present with the symptoms of haemochromatosis later in life. We could catch sufferers early enough to ensure that they would avoid that. There is also the possibility of diagnosing juvenile haemochromatosis, which is much more serious because sufferers are fully loaded when they are born and, therefore, develop iron overload not in their 20s or 30s but immediately.

Screening newborns would catch two populations. Not only would it catch juvenile sufferers and prevent them from getting seriously ill in their early years but, as soon as we had identified someone with two copies of the gene—someone who was a homozygote for the condition—we could start to direct them towards becoming a blood donor. They could give blood, which could be used by the transfusion service because there is no risk of transferring the condition as it is genetically inherited. That way, they would never get to the point at which they would overload on iron, so all the associated conditions would reduce. I cannot say that they would all disappear, because other factors are involved.

Why not, at an early age, give someone the best opportunity that they can be given in life when it costs very little to test them?

Bill Wilson: So the test could be added to a standard suite of tests that already exists for minimum cost.

Dr Robson: It could be added to the screening of newborns. However, one of the problems that we have experienced in trying to set up a programme to screen for the two copies of the C282Y mutation is that ethicists argue that newborns should not be screened for a disease that will not affect them until they are adults in middle age.

Bill Wilson: You have said that a male homozygote has a one-in-three chance—which is very high—of developing the disease.

Dr Robson: Yes, but in the classical form of the disease, that person will not begin to show biochemical signs until their late 20s or early 30s—for example, the standard test for the amount of iron in the body will not show elevated values until then.

Bill Wilson: But if someone is aware that they have that problem, they might start giving blood in their early 20s.

Dr Robson: You would never see elevation in iron levels at that age, and a person would be unlikely to get the complications at that time. Members of the Haemochromatosis Society have said that they felt much better, psychologically and physically, after giving a pint of blood, and it was not until many years later, when they stopped being a blood donor and started accumulating the iron, that they found out why that was the case.

Bill Wilson: So—to return to the question of ethics—not testing people early on may increase the probability of their having the disease later on.

Dr Robson: Exactly. It is a catch-22 situation: do we test early, keep a record and give a recommendation, or do we test much later, when somebody may already have developed joint damage? Such damage affects the knuckles and can affect the large joints, and it is often irreversible. Some people with untreated haemochromatosis require hip replacements because of the damage that the disease has done to their hips. If a cost prevention strategy can be developed, screening may well cut costs in terms of the hospital beds that are needed for patients undergoing serious surgery.

The Convener: I find it difficult to get my head round some of these issues.

Bill Butler: The petition states that a screening policy for haemochromatosis is needed. However, the Scottish Parliament information centre briefing states that in 2006, the UK national screening committee

“concluded that screening for the condition should not be offered.”

From what you have all said, that decision seems to be illogical. Did the NSC give any reason or rationale for why screening should not be offered at that stage? I know that the NSC has been reconsidering the issue since August this year, and we can perhaps feed into that process.

Dr Robson: I spoke to Anne Mackie of the NSC last week. The rationale behind the decision centres on the question of what to do with the 60 per cent—the two out of three people—who do not develop the disease. At present, we cannot distinguish at an early age those who will develop the disease from those who will not. Anne Mackie wants a test that will allow her to discriminate between all those who will develop the disease and those who will not.

At present, we suspect that other genes are involved, but we do not know what they are. We cannot say, “Right, if somebody’s going to develop the disease, they will show two oranges, a lemon

and an apple”. All we currently know is that two oranges are needed; we do not know what the other slot machine bits are.

Bill Butler: Are you saying that there should not be a screening policy?

Dr Robson: I am saying that we cannot afford for there not to be a screening policy.

Bill Butler: In other words, you are saying that there should be a screening policy.

Dr Robson: Yes, because the condition is so common. If it was very rare, one might argue that screening would not be cost effective, but because it is so common—

Bill Butler: So you disagree with the NSC’s 2006 decision because their rationale appears irrational to you, and you believe that the rational thing to do is to screen.

Dr Robson: Yes.

The Convener: Do not worry—that is what I thought you were saying.

Robin Harper: My questions have more or less been answered. However, I inferred from what you said earlier that you feel that the ethics people are in danger of having got their ethics the wrong way round.

Dr Robson: Yes.

Robin Harper: My second question is about comparative costs. How would the screening that you propose compare with grand-scale things such as flu vaccines for the entire population, or for all over-65s?

Dr Robson: The cost of a flu vaccine is about £50 per person—correct me if I am wrong, but that is my guess. If that is the case, the screening that we propose is probably cheaper.

George Scott: A lot cheaper.

Dr Robson: Remember that the flu vaccine protects only against those flu viruses that are currently in circulation, not against something new that is not in the vaccine.

The Convener: That cheers me up.

Dr Fitzsimons: We hope to take small steps today—first and foremost, to increase awareness of haemochromatosis. For all that one in eight of us here will be a carrier, I happen to know that there are three homozygotes sitting here today, one of whom is well known to Real Radio.

The first step is to think about screening adults. That makes it easier and it is also a simpler test. Of course, the definitive test would be the molecular test. We are still trying to reach the Scottish population in whom haemochromatosis is embedded, but who are largely ignorant of it. We

should keep our ambitions humble and say, “Look, let’s get this message out—we are a population at risk of the toxicities of iron in our liver, pancreas, heart, skin and joints, and there’s a lot of it.”

Nigel Don: You have been wonderful witnesses because you have thrown lots of numbers at us; people tend not to have the figures available in that way. It strikes me that given the numbers that you have at the top of your mind and the ones in your back pocket—or stored somewhere—you could probably generate a credible number for the national cost of not screening because you know the risks of the incidence of other conditions and you can apply a sensible cost to not screening. I know that that figure would come with a large number of noughts on the end and a good deal of uncertainty, but if you could put such a number in front of the health minister she might take a deep breath and say, “Yeah”.

George Scott: Before we get to that stage, I would not like to present the Government or anyone else with figures that we could not back up. We have to start by developing a registry that captures the information. From that registry, we will be able to determine how many people go on to develop serious or fatal complications from the condition. I would not wish to put together some numbers without having ground-based evidence for them.

Haemochromatosis is one of those conditions that has drifted for years and everyone has said, “Oh yes, we are aware of it.” Even the reply that I got from Shona Robison said, “Oh yes, everyone is aware of this condition.” If I asked a GP whether they knew what haemochromatosis was, the GP would probably make the association between haemo and iron and say, “It must be an iron condition—I’ll just look it up.” They would find that it is a genetic iron overload condition. Haemochromatosis covers numerous iron overload conditions; we are interested in the genetic part of the condition and its on-effect on people.

My situation is not unique. I have the condition—I have the two copies of both genes—and I overload on iron. My father had the condition. He presented at the Royal infirmary in Glasgow in 1977 with haemorrhoids that required a simple procedure to resolve. He died of cirrhosis of the liver on St Patrick’s day 1978. I nursed him for months and months. It was painful and slow and he died in a lot of agony because of the liver failure. He could not get a liver transplant.

15:30

The one thing that totally skewed the diagnosis was the fact that my father was the manager of a pub in Glasgow. My father did not drink alcohol—

he hated alcohol—but it is easy for someone to make the association between alcohol and liver damage because, like haemochromatosis, alcohol suppresses a substance in the liver called hepcidin, which controls the absorption of iron from the duodenum. Because of that, the doctors easily assumed that my father was an alcoholic, although he was not.

The story does not end there, however. In 1994, I experienced tummy problems. Many people who have haemochromatosis present with a gut ache that does not go away. I went to my GP, who could not discover what was wrong. I changed GP to a nice gentleman who said, “I’m going to try every test in the book to find out what’s wrong with you, George.” He put me in touch with a gastroenterologist, who examined me and said, “You are perfectly healthy, George, but—”. When he said, “but”, a fear crept down my spine. I said, “What’s the but?” He said, “You have an incurable condition called haemochromatosis.”

I went out of that office thinking that I had better write my will. That is how it affects people. I act as a counsellor for the Haemochromatosis Society in Scotland. Every week, I get phone calls from people who have recently been diagnosed. Every one of those people is in a depressed state; some are almost suicidal. I spend huge amounts of the day talking to them on the telephone—I rack up huge telephone bills ringing them back to try to convince them that their lives are not over and that there is a lot that can be done.

However, after I was diagnosed in 1994, I spent 18 months attending a hospital in Oxford—every Monday at 4 o’clock—so that blood could be taken from me and, during that time, I was the most miserable I had ever been in my life. I was just going to work and trying to make sure that I could function.

I am here today to say that, if we can catch the condition early enough and do a simple blood test to determine the transferrin saturation and the total iron-binding capacity, we can say to sufferers, “You are overloading on iron, but we can do something about it.” That will mean that a person’s condition does not become so serious that they stop functioning as an individual. That is what can happen, and thousands of people in the UK, not just Scotland, are in that position.

John Wilson: How widely known is the condition among GPs? You said that it is possible for a GP to look up the symptoms in a textbook, but people tend not to go to a doctor and say, “I think I’ve got this condition and I would like you to diagnose me.”

George Scott: The Haemochromatosis Society has 170 members, and I have spoken to them all about how they were diagnosed. In none of those

cases did the GP know what the condition was; only when the symptoms are referred to secondary care and people see practitioners such as Dr Fitzsimons is the diagnosis made. Around 40 per cent of sufferers are referred by a gastroenterologist, because of the duodenum issue.

Primary care practitioners know what haemochromatosis is, but if you ask them whether they carry out any tests for haemochromatosis or the conditions that are associated with it, they tell you that they do not. GPs run a series of blood tests to capture information about a patient's cholesterol level and so on. With only a few more boxes to tick, the GP could also test to see whether the patient is overloading iron. It is as simple as that.

Dr Fitzsimons: My clinical practice is in west Glasgow. Even in that small area, I continue to see one or two new cases of florid haemochromatosis presenting every month. The curse is a lack of awareness of the condition. There is almost a Scottish perverseness to it. Sometimes we speak to relatives who we know to be at high risk and we tell them that they need to be screened, but they will not go to get screened. We must deal with that by increasing awareness and emphasising the fact that the problems are preventable.

John Wilson: Mr Scott talked about his father's condition and the diagnosis of cirrhosis of the liver, rather than the condition that his father was actually suffering from. That could provide an explanation regarding a number of individuals who have died over the past 40 to 50 years. More of them have been diagnosed as alcoholics, rather than with what is a serious medical condition. Mr Scott's examples should prey on all our minds as we try to deal with the issue and take it forward—as I hope that we will do.

The Convener: Dr Robson mentioned the extensive approach that is taken in parts of France. Are more people in Scotland predisposed to the condition compared with people elsewhere in Europe—in France, for example—or elsewhere in the UK? What is the differential?

Dr Robson: In Ireland and parts of Scotland, one in eight to one in 10 people are carriers of the C282Y mutation in the HFE gene. In southern France, the proportion is much lower. There is a gradient, and the highest proportion of people carrying the mutation are in Ireland, Scotland, England, Wales and Brittany. It is very much a Celtic mutation. Between one in 200 and one in 300 people—one in 50 in some parts of Ireland and Scotland—are genetically at risk. If we take the 129 MSPs and their partners, one of those people might have the C282Y homozygote, and

they could be in the early stages of developing the disease.

The Convener: It is interesting to get a sense of scale.

John Farquhar Munro: I am interested in the subject—in effect, I am one of your patients. When you have made a diagnosis and confirmed the condition, how do you treat the individual?

George Scott: Treatment is fairly straightforward. It requires getting iron out of the body, although the body does not release iron easily. There are only two methods that I am aware of by which it can be done. One way is by venesection—removing blood, after which the haemoglobin in the body calls on iron from the iron stores. The second way is chelation therapy, but that is not really recommended for haemochromatosis. The easiest, most cost-effective approach is simply to remove blood.

It depends on how high the levels go, but a person initially requires weekly venesections; then, they go into a maintenance phase. That is controlled by keeping the ferritin at a certain level, which is 50 micrograms per litre, according to the guidelines. I usually have a blood test every two or three months to determine the ferritin level, and the treatment is done by venesection—the blood is just removed.

Dr Fitzsimons: It is very simple.

The Convener: Yes, it sounds it.

Jackie Baillie (Dumbarton) (Lab): Thank you, convener, for the opportunity to speak on this matter. I commend to members yesterday's edition of *The Herald*, if they have not already seen it. It contains an article by Torcuil Crichton, who himself has haemochromatosis. It is an accessible article, and the following comment captures the condition:

“the amount of iron in ... a rare steak is minuscule compared to my internal Ravenscraig”.

That shows the scale of the problem that people with haemochromatosis experience.

The issue is simple: as the committee has heard, screening is not difficult and it is cost effective. I cannot remember when someone last said to me, “It only costs 50p for each test.” We know that it costs the health service thousands upon thousands of pounds to treat some of the acute conditions that can develop from this condition, so there is in my mind no doubt about the cost-effectiveness of screening. What struck me in the presentation is that the conditions are entirely preventable if diagnosed early enough. I will do something that I do not often do, which is agree with Nigel Don and, indeed, with John Wilson—this must be a red-letter day.

The committee should suggest to the minister that we have pilot screening in one health board area. That would provide an opportunity both to raise awareness among GPs in a controlled fashion, and to measure whether that has an effect because, of course, it is not for the GP to diagnose but to say, "Here are some conditions that may well lead to this. We will send for a blood test." It is as simple as that. A pilot would allow the Government to conduct a very rigorous cost-benefit analysis to underpin the decision that I hope it will take, which is to introduce a national screening programme.

The Convener: I do not know whether Nigel Don or John Wilson's blood pressure went up on receiving that commendation.

Bill Butler: Jackie Baillie has to realise that we are all very agreeable people on this committee.

Jackie Baillie: I have always known that.

Bill Butler: I think everyone agrees on the petition. One would have had to have not listened to do otherwise—we were all rapt and attentive. Jackie Baillie's suggestion for a pilot screening programme in one health board area as a precursor to a national screening programme and science-based diagnosis of the condition is something that we should suggest to the Scottish Government.

We also need to talk to the UK National Screening Committee to ask when it expects to conclude its consultation on the policy review, and whether it would take the petition as a contribution to that review, in the hope and expectation that it will change its position from that which it took in 2006, and that it will heed expert advice, in particular that of Dr Robson. We should ask the NSC, in the light of the survey that it is undertaking, whether the incidence of haemochromatosis has increased over recent years, what testing for the condition currently takes place and by whom. That would move the issue forward. There will obviously be other suggestions from colleagues.

The Convener: Are there other comments or suggestions on how we want to pursue the issue? Witnesses will sense from what we are saying that we support exploring whether we can make progress on the petition. Dr Fitzsimons identified a gradation in how we deal with the issue, so that is something on which we can try to open up discussion. We need to make contact with Scottish Government representatives and appropriate national bodies that take an overview.

I suggest to Dr Robson that it would be helpful, if there are other statistical data that would help our exploration of the issue, for the committee to receive those. Comparisons would also be interesting, as I am worried about the gene pool

issue in Scotland and the shape of our make-up, which seems to mean that we are more predisposed to such illnesses. That is a pattern that we are finding at this committee.

Dr Robson: Certain environmental risk factors are associated with the disease, which mean that some people have a genetic predisposition to develop haemochromatosis. Alcohol consumption and obesity also contribute to that. If a population tends to enjoy the odd dram, they are not helping themselves.

15:45

The Convener: We have no idea who you might be referring to there, what with me being strictly abstemious—as I will be tomorrow night. Are there any other ideas about with whom we could explore these issues?

Robin Harper: It is important to ask the Government pertinent questions about the level of awareness among GPs, levels of testing, what action it has taken—if any—and, in the light of the evidence that we shall be presenting to it through the petition, what action it intends to take.

Nanette Milne: It would be good to get a response from the Scottish National Blood Transfusion Service, the British Society for Haematology and the molecular haematology unit.

The Convener: You mentioned France, Dr Robson. Are there any other international comparators?

Dr Robson: The Australians have a group in Melbourne. If you are looking for scientific papers, the first author to look for is called Katie Allen. The Australians have found that 30 per cent of adult males who have the C282Y homozygote go on to require treatment.

The Convener: Some of the notes that we looked at in preparation for this meeting mentioned a Canadian society as well. Would it be appropriate to contact it?

George Scott: Yes. It is fairly active and keen to move forward with a screening programme. That is the feedback that we have been getting.

I have a point to make to Mr Butler, who asked whether the disease is penetrating more into society. In 2000 in Ireland, the penetration was one in 200, and in 2009 it is one in 64. Because of the one in eight people who have one copy of the gene, that trend is going to continue.

Nanette Milne: It is interesting if Australia and Canada have a significant incidence of the disease because quite significant parts of the populations of those countries originated here, so maybe the genetic thing is part of it.

George Scott: Some screening has recently been carried out of 15 to 16-year-old children in 32 schools across Australia. What was found was absolutely consistent with the kind of numbers that we are experiencing here. The screening was done using cheek-brush DNA testing, and it covered 10,000 children.

John Wilson: Based on Dr Robson's comments, I suggest that we also contact the medical ethics committee to ask for its view. It would be useful to find out whether it still holds the same view, and if it does, why. Mass screening at an early age would clearly be beneficial to everyone concerned.

The Convener: Okay. We have identified a number of actions that we want to take on the petition. We hope that they will further benefit exploration of the issues. The petition will return to the committee along with information, we hope, that will allow us to take it to the next stage and get some more proactive responses from the various individuals and organisations. I thank all three of the witnesses for their time this afternoon. We hope to make progress on your behalf.

15:48

Meeting suspended.

15:54

On resuming—

Ur Dùthchas (Land Tenure) (PE1297)

The Convener: The next new petition is PE1297, by Randal Alasdair MacDonald of Keppoch, which calls on the Scottish Parliament to urge the Scottish Government to investigate Scottish land ownership and tenure under the ur dùthchas, or native title, system of land tenure. Background information has been provided. Do members have any comments?

Nigel Don: I thought that English land law was complicated. It is. I guess that all that we can do is hold up our hands, probably collectively, and say that we have never heard of the issue. Someone might correct me, but I suspect that the issue is new to all members. On that basis, we have to ask the Scottish Government to investigate what is being said and come back with a view.

John Farquhar Munro: I agree with Nigel Don. The law seems to be a very complicated one from centuries back. We should ask the legal people in the Scottish Parliament to clarify the situation.

Bill Butler: We should also ask the Law Society of Scotland to help us out.

John Wilson: We also need to write to Registers of Scotland and the Scottish Land Court.

I also suggest that we write to Andy Wightman, who has written several books on land ownership in Scotland, to ask whether he is aware of the issue that is raised in the petition and whether the law still applies in Scotland today.

The Convener: We want information on the subject of the petition in order to find out whether we can respond more effectively to it.

Myoclonic Dystonia (Care Standards) (PE1299)

The Convener: The next petition is PE1299, by Geraldine MacDonald, which calls on the Parliament to urge the Government to set national standards of care for all myoclonic dystonia sufferers, and to issue guidance to local authority social work and housing departments to ensure that they provide adaptive service provision and environmental adaptations to sufferers based on a fair assessment of their condition. We have had several similar petitions, on which we have explored particular issues. Do members have comments?

Nanette Milne: This is another very worthy classic case that indicates the postcode lottery of care throughout the country for people who have various health conditions. Standards of care tend to vary significantly. I do not know whether there is a National Institute for Health and Clinical Excellence guideline on treatment of the condition, but we should ask questions about it.

The Convener: This is another relatively new issue for all of us. We need to explore how different local authorities respond to individuals' presenting with the condition. We should certainly write to a selection of local authority social work departments. Are there any other suggestions?

Bill Butler: We could write to the Scottish Government to ask whether it will set national standards of care for all sufferers and whether it will issue guidance to national health service boards and local authorities to ensure that we have a consistent and uniform approach.

Nanette Milne: I notice that there is the Dystonia Society, which I presume has a lot of knowledge about the condition, so it would be worth seeking its opinion.

John Wilson: We should write to the Association of Directors of Social Work and the Social Work Inspection Agency. I reiterate the convener's point about writing to local authorities. I assume that one of them will be North Lanarkshire Council, given that the petition emanates from that area.

The Convener: No problem. Again, we want to process the petition and get the responses in.

Scottish Water (Executive Bonuses) (PE1300)

The Convener: The final new petition is PE1300, by Drew Cochrane, which calls on the Parliament to urge the Government to issue a direction to Scottish Water under the Water Industry (Scotland) Act 2002 to discontinue the practice of paying bonuses to its senior executives. One or two members might wish to give their views.

16:00

Bill Butler: I am not against bonuses per se, but the bonuses seem, on the face of it, to be wholly excessive. The papers show that the top person—Mr Ackroyd—has a salary of £263,000 and a bonus of £101,000. Other senior people in the organisation also receive very large bonuses. We should write to the Scottish Government with a number of questions. Does it support the practice of awarding high bonuses on top of much higher than average salaries? If so, why? What is the evidence that such levels of bonus are reflected in better productivity? Is this practice socially valuable? Does awarding such bonuses retain people of very high talent? I have never been persuaded of the argument that bonuses should be paid in any field—to bankers, for instance, although I do not really want to bring them into the debate. We should also ask whether the absence of such levels of bonus means that senior executives are less productive. What is the evidence on all of that?

I note from the background papers that Scottish Water executives are being paid top dollar—they are getting a great deal of money. At a time when the bonus culture has been thoroughly discredited, why should we pay well-paid public officials between 35 per cent and 50 per cent of their already very generous salaries as a bonus? On the face of it, the petitioner has made a very good point. We should pursue it.

Bill Wilson: Over the past couple of decades, the strong and growing evidence—indeed, it is a massive body of evidence from a wide range of scientific research—is that inequality in society is actively damaging to society. There are clear links between inequality and shorter life span, not only for the poor but the rich; inequality and crime; and lower levels of trust and social cohesion. Bill Butler asked what the social value of bonuses is—I suspect that he did so rhetorically. My answer is that large bonuses are socially damaging—they increase levels of inequality in society.

Obviously, Scottish Water has been paying these bonuses for some time—I think that the original contracts date back to 2002—but there is no time like the present to deal with the matter.

We should approach the Government and ask whether such bonuses are healthy for our society. Bill Butler may not have spelled this out, but he clearly hinted at it: we do not need to pay these vast salaries to ensure the best people. Indeed, it is notable that there is no correlation whatever between the wage of the chief executive officer of a commercial company and the success of the company.

John Wilson: I support everything that my two colleagues have said thus far. In widening the debate, I thank Kenneth Gibson MSP for supplying the table that we received today on the benefits that these senior officials also receive. I refer in particular to Scottish Water's long-term incentive plan for its senior executives. As the table clearly shows, we seem to have got into a culture of paying senior executives bonuses on top of bonuses on top of benefits on top of fringe benefits without any clear justification for doing so.

I also sit on the Local Government and Communities Committee, which has heard much evidence on the value that Scottish Water places on its incentive schemes and how it operates a lot better nowadays than it used to. That said, the salaries that some Scottish Water executives receive have almost doubled in five or six years. Why is a public sector body paying large bonuses to its senior executives at a time when it is also paying off some of its lowest-paid workers? I know that that is the case. I ask the committee to consider that matter. We should ask the Water Industry Commission for Scotland, Waterwatch Scotland and the Scottish Consumer Council whether they think that those bonuses are justified and, if so, how.

I hope that we can progress the matter. The bonus culture is not only creeping into Scottish Water in the public sector; it seems to apply in a number of areas. Scottish Water, which the petition is about, is just the tip of the iceberg. We seem to have fallen into having a bonus culture without there being any reason behind having it. I ask members to progress the petition.

Robin Harper: As has been said several times, it is not only Scottish Water that has a bonus culture. I wonder whether it might be appropriate for this committee or another parliamentary committee to run a full-scale inquiry into bonuses in Scotland.

Nanette Milne: I am tempted to make a short political comment. The money in question currently comes out of the public purse, but it would not necessarily have to come out of the public purse if my party's policy were followed. However, I agree with what has been said about the bonus culture in general.

Bill Butler: My good colleague Nanette Milne should not be so shy about saying that her party's policy is privatisation of Scottish Water. Some time ago, a referendum was held in Strathclyde that showed that 90-odd per cent of people were against that. I am a democrat and I am for minority policies being able to be put forward and then defeated.

Such bonuses in the public sector are just as unacceptable as they are in the private sector. The whole bonus culture is wrong-headed. My constituents and, I am sure, other members' constituents cannot for the life of them fathom the rationale for that culture having been allowed to grow in the public and private sectors. I agree with them. I cannot fathom the rationale, either.

To try to be helpful, we should also write to Scottish Water and ask it to set out its rationale for its approach and to defend itself. On the face of it, it seems to me that what is happening is indefensible. A letter to Scottish Water should form part of our initial correspondence. People are sick to the back teeth of a bonus culture that does not connect with any kind of reality that they experience in their day-to-day lives. However, I would not want to be political about the matter.

Bill Wilson: In some ways, the petition does not go far enough. I argue that we should pay according to ratios in public bodies. We should limit the payments to the top paid to a ratio of what the lowest paid receive.

I noticed in *The Herald* today that a consultant has called for top consultants to take a wage cut. The consultant said that a more unequal society also creates a less comfortable environment for the wealthier. In our letter, perhaps we could draw Scottish Water's attention to the consultant's comments. We could suggest that its senior executives might want to make a similar sacrifice, which would benefit them in the long term. Let us not forget that the rich also die younger in a more unequal society.

Nanette Milne: For the record, I hope that Bill Butler noted that I agree with him on the bonus culture.

Bill Butler: For the record, I accept that Nanette Milne said that, and I hope that she accepts what I said in the way that it was meant.

The Convener: Okay.

Let us explore the issues that the petition raises. I am not sure that we can reach a conclusive decision today on Robin Harper's suggestion, but I would like members to think about it. We are talking about a public interest issue and public resources, never mind the broader debate that we should have about how people are rewarded in our society. Yesterday, Ricky Gervais said that he

is being rewarded extremely well for doing certain things compared with what people who work in the health service or the public sector receive. He does not see the logic of that; the only logic seems to be that he is in the entertainment industry. Mind you, I observed that that did not stop him having a £3 million house. That was quite comic.

We need to have a debate about this issue, because it is clearly of concern to the wider public. Even if there is justification for bonuses—which may well be disputed by members around the table and by the wider public—that justification has not been demonstrated. We want to explore that. We can perhaps think about it and discuss with the committee clerks whether other committees wish to explore it, too. We might wish to bring the petition back. I am conscious that Scottish and UK ministers have made public statements about these issues.

Nigel Don: I support the idea that we have some sort of parliamentary inquiry into what has been described as the bonus culture. We have to recognise that although, in our minds, there might not be much scope for paying bonuses to people who are just paying out public money to do things, there is a completely different side to life, which is that people in enterprise businesses who are making profits, and taking risks to do so, should not immediately be debarred from deriving some benefit from having made good decisions. There are places where bonuses or performance-related pay might be entirely appropriate. The bit that we, and the public, are struggling with is where bonuses are paid for disbursing public funds.

Bill Butler: Or for failure in the private sector.

The Convener: We would like to explore that. We might want to bring back some observations early in the new year.

Current Petitions

Magazines and Newspapers (Display of Sexually Graphic Material) (PE1169)

16:11

The Convener: We come to consideration of current petitions. The first is PE1169, by Margaret Forbes, on behalf of Scottish Women Against Pornography, which asks the Parliament to urge the Government to introduce and enforce measures that ensure that magazines and newspapers with sexually graphic covers are not displayed at children's eye level or below or adjacent to children's titles and comics, and are screen sleeved before being placed on the shelf.

We heard from the Cabinet Secretary for Justice and from Scotland's Commissioner for Children and Young People at our meeting in early October. We wanted to explore further some issues that arose from their evidence. We have received a letter from the cabinet secretary, which states that the Government would be happy for the committee to take forward its own research on the issues that the petition raises. We should take this matter forward and perhaps ask for a scoping paper.

Nigel Don: I agree. If the Government feels that this issue is not its priority at the moment—we have to understand that—and we have the option of doing some serious research on it, we should try to do so. I have no idea what we can do and what budgets are available to us, so perhaps the first step would be to ask the clerk to provide that basic information as soon as possible.

The Convener: We are making progress on this petition, which struck a chord in relation to the public perception of how things are displayed.

Police Informants (PE1260)

The Convener: PE1260, by Derek Cooney, calls on the Scottish Parliament to urge the Government to advise all police forces to discontinue the practice of entering into agreements with police informants. Are there any observations on the petition?

Robin Harper: Given the evidence that we have taken, I would be happy to close the petition on the basis that the Government supports the police in their role of using particular informants and it has no plans to change the current system of regulation. The use of informants is an operational matter for the police. Submissions from the Scottish Government, the Association of Chief Police Officers in Scotland and the Scottish Police Federation detail the reasons why the use of police informants is vital to tackle crime. The

authorisation for the use of covert human intelligence sources does not provide immunity from prosecution.

The Convener: I find it hard to disagree with Robin Harper. We should consider closing the petition on those grounds, unless any member thinks otherwise.

Bill Butler: I agree to close the petition. If an individual has a grievance about the use of an informant, they have the ability to make a formal complaint to the Investigatory Powers Tribunal, which is another safeguard. The committee cannot fruitfully do much more. I agree with Robin Harper.

The Convener: We will formally close the petition.

Blood Donation (PE1274)

16:15

The Convener: Regarding the final two petitions on the agenda, I am conscious that we have with us some school students who gave evidence on those petitions during our visit to Alness academy who have, literally, a journey and a half back home. Therefore, with the support of members, we will bring forward those two petitions so that the students, for whom this might be their first visit to the Parliament, can have a chance to see the other parts of the Parliament building before their journey back home.

PE1274, by Andrew Danet, calls on the Scottish Parliament to urge the Scottish Government to introduce a scheme to pay people each time they donate blood and to consider other measures to encourage more people to donate. Andrew Danet is with us today in the public gallery. I know that he spoke very powerfully to us when the committee visited his high school. We also heard from Andrew Page, who lodged PE1275, when we visited Alness academy in September.

In November, Robin Harper, Anne McLaughlin and I held a videoconference with the French blood transfusion service. Through the clerk, we have also been able to engage with the German blood transfusion service. We have also had the opportunity to engage with Greece's national blood centre in Athens. We have made those European links to gain greater awareness not just of the course of action that the petition seeks but of the broader issue underlying the petition, which is about how we increase donations. Members might have a different opinion from that of the petitioner—most members would rather not offer payment for blood donation—but we all want to find better ways of raising awareness and contribution levels among the public.

I am in members' hands on how to deal with the petition. I think that the petition raises issues that are worth exploring. Robin Harper, Anne McLaughlin and I had a very good discussion with our French colleagues, who identified different ways of promotion that have perhaps not been fully explored in Scotland and the United Kingdom.

Robin Harper: With the purpose only of finding out what the best practice is and whether there are good lessons that we can learn, I think that it is a good idea to keep the petition open so that we come to know much more about the situation. It would not be for us to make a recommendation on the issue anyway, but we should assemble as much evidence as possible before we pass on the petition.

The Convener: Yes, I think that we should continue with the petition.

Bill Butler: I agree. Perhaps we could write to the Scottish Government to ask whether it has any ideas or research on how, other than by payment, blood donation might be better promoted. That would be handy. I think that we made it clear to the Alness students that, despite their eloquence, none of us on the committee is in favour of paying people to give blood, but we are all right behind better promotion of blood donation.

The Convener: Let us keep the petition open. We have received good evidence from other parts of Europe on the age profile of donors and on how blood donation can be promoted. We will raise those points with both the Government and the Scottish National Blood Transfusion Service. We will explore those matters. I think that the petitioner, Andrew Danet, has been quite happy with the response so far and would support the continuation of the petition.

School Visits (Funding) (PE1275)

The Convener: Our final petition from those young men from Alness academy is PE1275, by Andrew Page, which calls on the Parliament to urge the Government to ensure that all pupils at schools in remote areas such as the Highlands are not limited in or prevented from visiting educational, cultural or study events in the central belt or lowlands, to demonstrate financial equity in meeting the costs of such visits and to ensure that location does not limit the opportunity to have such experiences.

We discussed the petition when we visited the high school in Alness and we have explored matters since then. Do members have any comments on the petition?

Bill Butler: It would be helpful and provide greater access if organisations such as national

museums and galleries made travelling exhibitions available.

Robin Harper: By continuing the petition, we could be pushing at an open door. National museums and many art organisations already travel the country much more than they used to. It is generally accepted that there should be equity of access to a large number of things, not just sport, exhibitions and art.

Nanette Milne: Given the on-going rapid development of information technologies, there is scope for central activities to be beamed out to the more remote parts of the country.

The Convener: Around the time that we considered the petition, there was a broader debate about the curriculum in Scotland and accessing key locations of historical events. By ensuring that children experience places such as Culloden and Bannockburn, we can improve their understanding and awareness. Have we received any responses that indicate how the initiative will be rolled out formally in schools across Scotland?

Fergus Cochrane (Clerk): The Scottish Government touched on the issue in its response.

The Convener: Understandably, we have received the front story on the initiative, but have we received details of how it will operate for high schools in more remote locations, such as Alness, or even the other way around, so that youngsters from the west of Scotland can visit Culloden and understand better what happened there? I think that some of us were up there. Do members wish to keep the petition open?

John Farquhar Munro: We should keep the pressure on and get as much information as possible from the Government. There is no doubt that many peripheral areas of the country are deprived because they are distant from museums and exhibitions in the central belt.

The Convener: Robin Harper made the key point that a number of national organisations are seeking more effective ways of operating. The national collections are concentrated in Edinburgh, but there is an understandable concern that they should be shared with the whole country. Are organisations seeking proactively to redress the balance through outreach and exhibition work? The central collections may be located here, in Glasgow or in other major population areas, but how do we ensure that National Museums Scotland, the National Library of Scotland and others do more to get them to other parts of the country? I do not think that we have received any responses on that issue.

Fergus Cochrane: The Scottish Parent Teacher Council made a similar point about the potential

for travelling exhibitions by nationally funded organisations to go to more places.

The Convener: Given the collections that chairpersons and chief executives of national bodies have and the approaches that they are developing, we should ask a number of them how they can respond to this petition from youngsters in Alness.

Robin Harper: If our major galleries can bring in major art collections from Europe—I am thinking of the Tutankhamun exhibition in Edinburgh and Glasgow—surely we should encourage museums in Scotland to make specific exhibitions available locally. The question is: where do we find the funding for that?

Bill Butler: The Scottish Government must support such activity with funding. To be fair, it is doing valuable work in the area, but the issue is how opportunities can be extended to the whole country, including the more remote parts.

The Convener: Thank you for your comments. If the students want to explore other parts of the Parliament they should feel free to do so—do not be detained here before you start your journey home. This is a bit of a surreal conversation, because you are not sitting at the committee table. I feel as if I am back home, trying to talk to my two children—I am speaking to someone who is not quite there. I hope that the discussion has been helpful. We want to keep both petitions open and to keep pressing matters on your behalf. Have a safe journey back to Alness.

Small-scale Redundancies (Government Support) (PE1265)

The Convener: PE1265, by Matthew Goundry, calls on the Scottish Parliament to urge the Scottish Government to deliver the same level of responsiveness and support to those individuals who are part of small-scale redundancy as is delivered to those who face large-scale redundancy.

John Wilson: I propose that we keep the petition open and write to the Scottish Government to ask it to comment on the response from the Scottish Trades Union Congress, in particular paragraph 3.4, on how partnership action for continuing employment is operating. We also need to find out how the Government is measuring the success of PACE, not just after redundancy happens but during the statutory consultation period prior to redundancy, when there should be consultation with employees. We should ask what mechanisms are in place if PACE is not triggered in small-scale redundancies and what support there is for employees who face redundancy.

Nigel Don: When a business goes under or downsizes, its subcontractors also shed labour, of necessity. A host of businesses are attached to businesses that go under; they might decide to struggle on, but it is usually wiser not to do so. That can be predicted; the original business knows the names of the businesses that are affected. To what extent is the Government picking up on that issue before the worst happens?

John Wilson: Not just subcontractors but agency workers are affected. How are agency workers dealt with and what interventions are in place for them? All too often we hear that the bulk of a workforce is made up of agency workers, because employers think that they are not legally required to treat them in the way that they treat normal employees. It would be useful to ask the Government whether PACE is picking up on what happens to agency workers when redundancies are proposed in their workplace.

The Convener: Okay. We will keep the petition open on those grounds.

A96 Safety Improvements (Mosstodloch) (PE1271)

The Convener: PE1271, by Councillor Anita McDonald, calls on the Scottish Parliament to urge the Scottish Government to investigate the case for a reduced speed limit on the A96, to improve road safety for schoolchildren and the wider public. We have considered the petition on a number of occasions.

Nanette Milne: I do not think that it is necessary to keep the petition open. What the petitioner is asking for is, to a large extent, being dealt with by an assessment of the current speed limit through Mosstodloch, which will be completed by the end of March; by the bypass, which is designed to reduce traffic volumes by providing better overtaking facilities in both directions; by the construction of underpasses for pedestrians and cyclists; and by traffic calming proposals for Fochabers and Mosstodloch. The issues that concerned the petitioner are actively being addressed, so we can probably close the petition.

16:30

Nigel Don: There is one remaining issue. In the petitioner's message dated 1 December, she asks why, if traffic calming measures can be introduced in Fochabers and Mosstodloch once the bypass is there, such measures cannot be introduced now. I am no expert, but I suspect that that cannot be done simply because sleeping policemen cannot be installed on a trunk route. Could somebody write to Transport Scotland, asking it to make that clear if it has not already done so? The message does not seem to have got through. I suspect that

it is that simple, but perhaps nobody from Transport Scotland has told the petitioner.

Bill Butler: I take Nigel Don's point, but I still think that we should close the petition. The point is important, but it is not huge.

Nigel Don: I am not denying that we should close the petition.

The Convener: Okay, we will close the petition but ask Transport Scotland to write to the petitioner on that issue, which may resolve the matter.

New Petitions (Notification)

16:32

The Convener: The final agenda item is notification of new petitions, which was provided to us in advance. If we accept them, the appropriate petitions will be brought to the committee at its first meeting in the new year.

John Wilson: We have received notification of three new petitions, convener. I question the validity of the third, which calls on the Scottish Government to carry out enhanced disclosure checks on all candidates for public office. I do not disagree with the principle or the intention behind the petition, but I do not know whether the committee could take the matter forward. There are issues concerning the democratic rights of people in this country to seek election, although there are some restrictions on individuals. The petition also opens up the debate on enhanced disclosure being carried out by the Government, and where the information is stored and how it is used.

As I understand it, the petitioner is asking for enhanced disclosure checks to be carried out and for the Scottish Government to use that information for some purpose. The difficulty is in what the purpose of carrying out an enhanced disclosure check would be and what the Government would do with the information that was gathered. That could almost take us towards a Big Brother state, with the Government of the day carrying out enhanced disclosure checks and being able to use that information to debar people from seeking election to public office. Local authorities already carry out disclosure checks on newly elected members, so why is the petitioner asking for enhanced disclosure checks on those who seek election? Perhaps Fergus Cochrane has some further information on that.

Fergus Cochrane: I do not have a copy of the petition in front of me, but I recall that it concerns those who are seeking election. We looked at the provisions in the Scotland Act 1998 that deal with the disqualification of members. We also had a look at members' code of conduct, although that comes into effect when a person has been elected. I am happy to have another look at the petition and reflect on what John Wilson has said.

The Convener: John Wilson has raised some legitimate issues. We can have another look at the petition and reassess its validity.

Over the course of the year, we have had 18 meetings, 15 of which have taken place in the Scottish Parliament building and three of which have taken place in outlying parts of Scotland—Easterhouse, Fraserburgh and Alness. We have

debated 79 new petitions and 277 current petitions, and we have sent out 2,000 letters of inquiry—today's meeting has added to that number significantly. We have also lost a member of the committee—Bashir Ahmad is missed by us all. We acknowledge the contribution that he made as a committee member as well as the contributions that he made before he became an MSP on behalf of the areas that he represented.

It has been an eventful year, and we will have further journeys to make in the early part of the new year—we are still determining the locations. Our next meeting will be on Tuesday 12 January at 2 pm. I wish everyone a peaceful and merry Christmas and new year.

Meeting closed at 16:35.

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