The Committee will consider the following current petitions—

**PE776** Petition by John Macpherson, on behalf of Braemar Community Council, calling for the Scottish Parliament to investigate the merits of proposed new arrangements for “Out-of-Hours” Medical Services in remote rural communities such as Braemar.

**PE814** Petition by John MacPherson, on behalf of Killin Community Council, calling for the Scottish Parliament to consider and debate the implications for rural areas of the introduction of NHS24 services, particularly in relation to ambulance cover and timescales in getting medical assistance to patients in these areas.

**PE826** Petition by Mr W D R Chalmers urging the Scottish Executive to ensure that NHS Services in rural areas such as Mid and Upper Nithsdale are adequate, equitable and ‘acceptable’ as required by the NHS Reform (Scotland) Act 2004, especially in relation to Out of Hours Services.

**PE878** Petition by James A Mackie calling for the Scottish Parliament to urge the Scottish Executive to consider the need for a national strategy to address the impact of coastal and river erosion within Scotland.

**PE861** Petition by Bob Leitch, on behalf of the Board of Directors of the Ayrshire Chamber of Commerce, calling for the Scottish Parliament to urge the Scottish Executive to take immediate action to create a task force to integrate and develop all Burns’ assets, properties, and locations across Scotland resulting in a national Burns Heritage trail ready for the year of the homecoming in 2009 and available for promotion internationally by the end of 2006.

**PE824** Petition by Peter Watson on behalf of Alloway and Doonfoot Community Council calling on the Scottish Parliament to (a) review the policy and commitment of the Scottish Executive to place Robert Burns and his legacy at the heart of its culture and tourism policies; and (b)
urge the Scottish Executive to assume responsibility for bringing together all interested parties to ensure the flagship assets of our Burns heritage are properly restored and developed in good time for the major events planned for the 2009 Homecoming Year, marking the 250th anniversary of the birth of the national bard.

PE773 Petition by Wilma Gunn, on behalf of Scottish Heart at Risk Testing, calling on the Scottish Parliament to introduce the necessary legislation to ensure that provision is made to offer screening for cardiomyopathy and all heart disorders a) to all 16-year olds and over embarking on taking part in strenuous competitive sports and; b) to all families with a history of cardiac problems.

PE802 Petition by Mark Russell calling for the Scottish Parliament to express its deep concern that despite health being a devolved matter the regulation of Health Professionals has been reserved by the Westminster Parliament.

PE866 Petition by James Kelly calling on the Scottish Parliament to consider and debate the need for an independent body to be set up within Scotland to investigate claims of medical negligence.

PE791 Petition by Brian McAlorum calling for the Scottish Parliament to review the criteria and funding mechanisms for national specialist services provided to NHS Scotland by individual health boards as currently they are neither transparent nor effective as witnessed by the centre for integrative care at Glasgow Homeopathic Hospital.

PE811 Petition by Mark Mulholland, on behalf of Parents and Residents Against Masts, calling for the Scottish Parliament to consider and debate the Permitted Development Rights enjoyed by Network Rail in respect of the erection of 96ft GSM-R communication masts in residential areas.
Public Petitions Committee,
The Scottish Parliament,
Edinburgh,
EH99 1SP

Dear Sirs,

"Out-of-Hours" Medical Services in Braemar

Petition on behalf of Braemar Community Council calling for the Scottish Parliament to investigate the merits of proposed new arrangements for "Out-of-Hours" Medical Services in remote rural communities such as Braemar.

John Macpherson
Chairman
Public Petitions Committee – a template for public petitions

Should you wish to submit a public petition for consideration by the Public Petitions Committee please complete the template below. Please refer to the Guidance on submission of public petitions for advice on issues of admissibility before completing the template. You may also seek advice from the Clerk to the Committee whose contact details can be found at the end of this form.

Details of principal petitioner:
Please enter the name of person and organisation raising the petition, including a contact address where correspondence should be sent to, email address and phone number if available

Text of petition:
The petition should clearly state what action the petitioner wishes the Parliament to take in no more than 5 lines of text, e.g.
The petitioner requests that the Scottish Parliament considers and debates the implications of the proposed Agenda for Change legislation for Speech and Language Therapy Services and service users within the NHS

The petitioner requests that the Scottish Parliament considers and debates the implications and shortcomings arising in rural areas following the introduction of NHS 24 services. In particular with reference to ambulance cover and time scales involved in getting medical assistance to patients in these areas. Additional information is appended to the petition.

Additional information:
Any additional information in relation to your petition, including reasons why the action requested is necessary, should not be included here. However, it may be appended to the petition and will be made available to the Public Petitions Committee prior to its consideration of your petition. Please note that you should limit the amount of any additional information which you may wish to provide in support of your petition to no more than 4 sides of A4.
Action taken to resolve issues of concern before submitting the petition:

Before submitting a petition to the Parliament, petitioners are expected to have made an attempt to resolve their issues of concern by, for example, making representations to the Scottish Executive or seeking the assistance of locally elected representatives, such as councillors, MSPs and MPs. Please enter details of those approached below and append copies of relevant correspondence, which will be made available to the Public Petitions Committee prior to its consideration of your petition.

Numerous joint meetings with representatives from Forth Valley Health Board, Chief Executive and others, Scottish Ambulance Service Area managers, Dr S Jackson MSP, local GPs Dr C Holden and others, District Nurses and neighbouring Community Council representatives.

Request to speak:

All petitioners are given the opportunity to present their petition before the Public Petitions Committee. The Convener will then make a decision based on a number of factors including the content of the petition and the written information provided by the petitioner as to whether a brief statement from the petitioner would be useful in facilitating the Committee’s consideration of a petition.

Please indicate below whether you wish to request to make a brief statement before the Committee when it comes to consider your petition.

Yes *

*Delete as appropriate

Signature of principal petitioner:

When satisfied that your petition meets all the criteria outlined in the Guidance on submission of public petitions, the principal petitioner should sign and date the form in the box below. Other signatures gathered should be appended to this form.

Signature

Date 20 January 2005

Please note that any additional information, copies of relevant correspondence and additional signatures should be appended to this form and submitted to:

The Clerk to the Public Petitions Committee,
The Scottish Parliament,
Edinburgh
EH99.1SP
Tel: 0131 348 5186 Fax: 0131 348 5088
e-mail: petitions@scottish.parliament.uk
Public Petitions Committee – a template for public petitions

Should you wish to submit a public petition for consideration by the Public Petitions Committee please complete the template below. Please refer to the Guidance on submission of public petitions for advice on issues of admissibility before completing the template. You may also seek advice from the Clerk to the Committee whose contact details can be found at the end of this form.

Details of principal petitioner:

Please enter the name of person and organisation raising the petition, including a contact address where correspondence should be sent to, email address and phone number if available

Text of petition:

The petition should clearly state what action the petitioner wishes the Parliament to take in no more than 5 lines of text, e.g.

The petitioner requests that the Scottish Parliament considers and debates the implications of the proposed Agenda for Change legislation for Speech and Language Therapy Services and service users within the NHS

The Petitioner urges.... The Scottish Executive to ensure that NHS Services in Rural Areas such as Mid and Upper Nithsdale are adequate, equitable and 'acceptable' as required by the NHS Reform [Scotland] Act 2004, especially in relation to Out of Hours Services

Additional information:

Any additional information in relation to your petition, including reasons why the action requested is necessary, should not be included here. However, it may be appended to the petition and will be made available to the Public Petitions Committee prior to its consideration of your petition. Please note that you should limit the amount of any additional information which you may wish to provide in support of your petition to no more than 4 sides of A4.
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MSP’s Alex Fergusson and David Mundell have together with Representatives from Mid and Upper Nithsdale Association of Community Councils [MUNACC] met with John Burns CEO of D&G Health Board and Dr.Cameron Director of Medical Services and presented a stated case without achieving any resolution to the issues raised.

Accordingly,

This Petition has been endorsed by MUNACC by Minute of their Meeting on 16th February 2005

Request to speak:

All petitioners are given the opportunity to present their petition before the Public Petitions Committee. The Convener will then make a decision based on a number of factors including the content of the petition and the written information provided by the petitioner as to whether a brief statement from the petitioner would be useful in facilitating the Committee’s consideration of a petition.

Please indicate below whether you wish to request to make a brief statement before the Committee when it comes to consider your petition.

Yes

*Delete as appropriate

Signature of principal petitioner:

When satisfied that your petition meets all the criteria outlined in the Guidance on submission of public petitions, the principal petitioner should sign and date the form in the box below. Other signatures gathered should be appended to this form.

Signature ........................................................................................................................................

Date ................................................................................................................................................

Please note that any additional information, copies of relevant correspondence and additional signatures should be appended to this form and submitted to:

The Clerk to the Public Petitions Committee,
The Scottish Parliament,
Edinburgh
EH99 1SP
Tel: 0131 348 5186    Fax: 0131 348 5088
e-mail: petitions@scottish.parliament.uk
Additional Information

1 From the date of inception of the out of hours service the media have reported numbers of serious incidents where there has been failure of the NHS triage service in rural areas including Dumfries and Galloway.

Questions on relevant issues have been raised by MSP’s in Parliament and by other Petitions. These incidents are evidenced by press reports on specific instances as well as by local anecdotal sources, in particular:

2 NHS 24 Out of Hours

2.1 Phoneline – provision not user friendly – frequently the caller patient has been told they would be ‘phoned back’ and this has sometimes taken up to -- 5 hours.

2.2 Ooh – no relevant Doctor other than based in Dumfries some - 20 miles - from the central area of Upper Nithsdale and - up to 40 miles - from remote areas – thus giving some 5 hours plus for medical attention to reach the patient. This is provided a Session Doctor is immediately available which may not be the case, and there is no appreciable delay elsewhere eg in ‘phone[d] back’.

2.3 Ambulance and Paramedic attendance can also involve delay because of ambulance working in an adjoining area to its base or its being unavailable for use due to single manning.

3 This Petition has been endorsed, unanimously supported and Minuted by The Mid and Upper Nithsdale Association of Community Councils at their Meeting on 16th February 2005. A List of those Community Councils attending is appended. It has also been separately and unanimously approved by Kirkconnel Community Council and by Sanquhar & District Community Council of which latter the Petitioner is a Member.

4 Despite the raising of issues with Health Board Representatives during the periods of engagement no satisfactory progress was made, nor as indicated in the body of the Petition was there any outcome from Meeting with the Chief Executive and Medical Administrator of The Dumfries & Galloway Health Board.

5 The provision of services to the rural and outlying areas of Mid and Upper Nithsdale have not been properly addressed and some tragedy will inevitably be the outcome.

Accordingly: The Petitioner claims:

There is a ‘prima facie’ case that Scottish Ministers recognise that:
Under the statutory terms of Section 6 of The NHS Reform (Scotland) Act 2004 there is a failure to provide service to a standard which is ‘acceptable’ to them

AND

3
That the Scottish Ministers should direct NHS 24 and the Dumfries & Galloway Health Board to provide an acceptable service to the Rural Areas of Mid and Upper Nithsdale in consultation with the public as prescribed under Section 7 of the Act. taking into account the times required for delivery of essential services: eg ..... Ambulance and Doctor attendance Out of Hours.

To fail to do so will not only prejudice life in a medical emergency but will result in an inequitable distribution of services to areas of multiple deprivation [SIMD] with specific health needs, and result in a 2-tier NHS Service viz –a – viz the Urban area of Dumfries and the Rural areas of Mid and Upper Nithsdale

Appendix :

Members of MUNACC attending Meeting on 16th February 2005

Ae Community Council
Carrownbridge Community Council
Closeburn Community Council
Dunscore Community Council
Keir Community Council
Kirkconnel & Kelloholm Community Council
Moniaive Community Council
Penpont Community Council
Sanquhar & District Community Council
Tynron Community Council
Thank you for your letter of 22 September about Petitions PE776, PE814 and PE826 about the out-of-hours general medical services and NHS 24: John McPherson for the Braemar Community Council, John McPherson for the Killin Community Council and MR W D R Chalmers for rural areas such as Mid and Upper Nithsdale. Specifically you asked me to comment on the issues raised during the Committee's considerations of these petitions on 8 September 2005. You also sought an update on the work of the Independent Review Team which I established in February 2005 to review the operational performance of NHS 24. I wrote to you on 5 October enclosing a copy of the final report from the Review Team; a further copy is attached for your ease of reference.

I believe that the final report of the Review Team should, when considered with the update on service improvements which I understand you have sought from NHS 24, provide the Committee with relevant information on how the Health Department and the NHS is addressing the issues raised by these petitions.

The attached response focuses on 2 particular issues. Firstly, it describes the service improvements which have taken place within the Scottish Ambulance Service and which we have supported. Secondly, it provides a progress report on the preparation of this year's winter plans (especially over the Festive public holidays) for out-of-hours primary care services – which we had identified as an area of potential risk that required appropriate prioritisation and management.

I hope the Committee will find this helpful.
ANNEX


The responsiveness of the Scottish Ambulance Service to 999 calls to the emergency service has been steadily improving in recent years, bringing services more rapidly to those patients in greatest need. Prior to the introduction of the priority based dispatch system which rolled out across mainland Scotland between August 2002 and April 2004, 999 emergency calls to the Scottish Ambulance Service were dealt with on a “first come first served” basis. The speed of response depended not on the condition of the patient but on the volume of calls being responded to and the ambulance resources available at the time. The performance standards applied by the Scottish Ambulance Service varied according to population density – as with other ambulance services in the United Kingdom. These were known as the ORCON standards. In Scotland, to ensure that the standards reflected local demography, they were applied based on local authority areas. The standards were:

- High Density (more than 3.0 persons per acre) – 50% of calls to be responded to within 7 minutes and 95% within 14 minutes.
- Medium Density (less than 3.0 but more than 0.5 persons per acre) – 50% of calls to be responded to within 8 minutes and 95% within 18 minutes.
- Sparse Density (less than 0.5 persons per acre) – 50% of calls to be responded to in 8 minutes and 95% within 21 minutes.

Under the priority based dispatch system, which is used in all mainland Board areas, 999 emergency calls are processed using well proven, clinically approved, screen based software (called Advanced Medical Priority Dispatch System). Based on the responses of the caller, the software assigns the call a response category. The categories and standards applied are:

- Category A – clinically defined as “immediately life threatening”. The target is that by March 2008, 75% of such calls should be responded to within 8 minutes across mainland Scotland. The Ambulance Service has phased the introduction of priority based dispatch and is progressing towards this target.
- Category B – clinically defined as “not life threatening but still serious”. The target for this category of calls is that 95% should be responded to within either 14, 19 or 21 minutes depending on the population density of the Health Board.

In April 2005 the Scottish Ambulance Service achieved performance of 60.2% against the 8 minute target on Category A calls, up from 54.3% in the corresponding month of 2004. This improvement should also be seen against the background of a 3.6% increase in the demand on the 999 emergency service across the same period. This has been supported by a significant increase to the revenue allocation to the Scottish Ambulance Service – up from £103.5m in 2001/02 to £143m in 2005/06. This investment has enabled the Service to
recruit an extra 200 front-line staff into the 999 emergency service, taking the front-line complement to just over 2,000 in April 2005. Over the same period the number of paramedics has increased from 720 to 1,170.

The additional 9.5 (whole time equivalent) staff which the Scottish Ambulance Service have introduced into NHS Forth Valley to support the out-of-hours services have now completed their extended skills training and have been fully operational in Killin and surrounding areas since January 2005. This service was introduced following an extensive public consultation exercise as part of NHS Forth Valley’s awareness initiative. The service development, implementation and post implementation performance has been closely monitored in the Killin locality. The monitoring group membership includes senior management representation from the Scottish Ambulance Service, NHS Forth Valley managers, community council representatives, local GPs and Sylvia Jackson, MSP.

We understand that the Committee has asked NHS 24 to provide an update on service changes and improvements. In this connection, the recommendations of the Independent Review Team, which I appointed in February 2005, is significant. A particularly important and topical issue is the preparation of effective, co-ordinated plans for out of hours primary care services over the winter period, with special reference to the Christmas and New Year holidays, when in-hours family practitioner service are closed and pressure on NHS 24 and on out of hours services becomes intense. All NHS Boards, the Scottish Ambulance Service and NHS 24 have now submitted plans to the Department. I believe that good progress has been made in partnership among the NHS bodies concerned, and I am now more confident than it was possible to be at this stage last year that the NHS will provide a responsive, clinically sound and sustainable service to patients. Of course it will be very important that Boards continue to monitor these arrangements closely to ensure that they operate as planned. The Health Department is making this clear to Boards and I have emphasised the same point to Board chairs.

The Department is also acting on the Independent Review Group’s recommendation that clear, agreed, measurable targets should be developed, against which Boards and NHS 24 will be held to account in monitoring the delivery of responsive out-of-hours services. I took the opportunity of the annual review of NHS 24, held in public on 24 August this year, to discuss this issue. I have attached a copy of the Annual Review follow-up letter for the Committee’s information, from which you will see that the development of targets and milestones will be the focus of attention in 2006.
Dear Dr Johnston

Thank you for your letter dated 26 September 2005, regarding Considerations PE814, PE826 and PE776.

More specific information regarding Consideration PE776 should be referred to individual NHS Boards, as these organisations are now directly responsible for the modeling and provision of out-of-hours care in their areas.

However, NHS 24 continues to handle calls when GP practices are closed and we expect the service improvement initiatives for the national service, which I will outline here, to have a positive impact of the NHS 24 service provided to the populations of all NHS Board areas.

The public should continue to call 999 for an emergency ambulance – if, however, they call NHS 24 and it becomes apparent that an ambulance is required, NHS 24 will immediately transfer the call to the Scottish Ambulance Service for their action. NHS 24 does not dispatch ambulances – we ensure the caller is connected to the Scottish Ambulance Service (SAS) takes over the responsibility of care from that point. Likewise, the SAS refers callers who do not need an ambulance (Category C calls) to NHS 24 for a clinical assessment. NHS 24-referred calls to 999 account for a very small percentage of the ambulance service’s total calls, the vast majority of which are made directly to SAS without any routing through NHS 24.

Therefore, for issues relating to the management of ambulance services and response times, I would refer you to the Scottish Ambulance Service, which will be able to provide appropriate information.

In order to address issues faced by NHS 24, such as access to the service and the use of call-back, a major programme of work was established in March 2005. The work is consistent with the detail and recommendations as set out by the Independent Review of NHS 24, which published its final report on October 5 2005.

As part of this programme of work, NHS 24 has been working with a number of NHS Board partners to take forward the development of satellite centres or “mini-centres”. The programme also provides the foundations for further development of integrated services with other NHS Board partners in due course.

The satellite developments are progressing in partner NHS Board areas, with the current plan for establishing satellite centres being as follows:

- NHS Ayrshire & Arran
- NHS Highland
- NHS Tayside
- NHS Lanarkshire
- NHS Dumfries and Galloway

Agreement has been reached with these five NHS Boards around the following three core attributes:

- Callers continue to access the service through the NHS 24 single contact number
- The service is delivered through a single shared Information Communications Technology (ICT) platform
- The service is underpinned by nationally agreed clinical and service delivery standards

Chairman (Interim) George King
Chief Executive John McGuigan
• Clinical governance responsibilities have been agreed in line with staff contractual responsibilities and existing NHS 24 and local NHS Board infrastructures
• The operating framework and statement confirming clinical governance arrangements will underpin, and be part of, a Partnership Agreement which is being developed between NHS 24 and its NHS Board partners.

The key benefits of these satellite developments are seen for various stakeholders as:

Patients:
• Improved access to local out-of-hours services
• Reduced requirement for call-back
• Improved call-back timeframes
• Improved handling of remote and rural partner hand-offs

NHS Boards:
• Improved out-of-hours response
• Improved understanding of local geography and closer integration with local out-of-hours service
• Expanding skills of local workforce
• Shared ownership and improved confidence in out-of-hours services

NHS 24:
• Reduced need for call-back through increased capacity
• Improved recruitment through ability to recruit from new locations
• Improved staff retention
• Shared ownership of national service

The satellite centres will be operational by the end of November 2005 and will contribute to an increased NHS 24 nursing resource at peak times.

The recruitment process for each of the satellites was carried out jointly by NHS 24 and the partner NHS Boards. NHS 24 will fund and train the staff and provide ongoing operational and managerial support, in partnership with the local NHS Boards. In addition, the development in the Highland area is also a collaboration with the Scottish Ambulance Service. NHS Highland Board also provides the management and dispatch of referrals for the Island NHS Boards in the Western Isles, Orkney and Shetland.

The public in the satellite areas will continue to phone NHS 24 if they are ill when their GP practice is closed. Calls will continue to be answered at one of the main NHS 24 Contact Centres, but during peak times, calls will be transferred to the locally-based nurses for a clinical assessment, advice and onward referral to local face-to-face care and treatment as required.

The satellite initiative aims to improve patients' access to the service by increasing the number of nurses available at peak times across the whole national NHS 24 service. In addition, we aim to improve local knowledge by having those nurses based within a local setting, whilst maintaining national quality standards and competencies set for the national NHS 24 service.

As well as recruitment for five satellite centres, NHS 24 continues to recruit for the three main contact centres. The satellites will have a positive impact on the three main NHS 24 contact centres, by increasing overall peak time resource.

In addition to the new satellite centres, there are various other actions underway with the aim of improving access and providing a more efficient service. Always with patient safety uppermost, NHS 24 has been looking at the extent to which the length of time taken to clarify the caller's key reason for calling can be effectively reduced; thus, appropriately reducing the length of the patient experience.

This work includes:

Service Design – through this work, we are seeking to ensure that calls receive an appropriate level of assessment according to clinical need and that they are dealt with within a clinically appropriate timescale. Partners from NHS Boards with experience in out-of-hours care delivery joined the NHS 24 in-house team and have been active participants at all stages in the activity of this workstream. There are three definitive elements as follows:
• **Call categorisation** – this ensures that calls are dealt with according to clinical need through Call Handlers routing the call to the most appropriate resource (internal or external). In addition, the role of the Call Handler and Health Information Advisor is currently under review with a view to enhancing their competency in routing calls and carrying out assessments using structured protocols.

• **Rapid call distribution** – this will ensure that the appropriate telephony is in place in order to distribute categorised calls, with prioritisation to occur when required in a standardised manner, and consequently allowing a better management of resource

• **Differentiated call management** – this allows Nurses to carry out an assessment which is appropriate to the clinical need of the patient. This may mean that the use of an algorithm is not necessarily required and Nurses are being encouraged to decide whether their use is appropriate or not.

**Call Handler Recruitment** – the target recruitment figure for the festive period 2005/06 is 260 WTE, with the overall objective of answering 90% of calls within 30 seconds.

Between the achieved target call handler recruitment and the increased nursing resource, we aim to be able to answer calls more promptly and improve the patient’s access to both the service in the first instance and to a nurse when required.

Additional activities which are being put in place to positively impact on the nursing resource and call-back response s include:

• **Recruitment of Pharmacists** to deal with medicine-related calls.

• **Patient Group Direction development** will allow community Pharmacists to replace mislaid medication or re-stock patients who have inadvertently run out of their repeat medicines during the out-of-hours period.

• **Further development of the Health Information Service**, including the recruitment of additional Health Information Advisors (HIAs). This has been undertaken to increase the capacity to support, for example, enquiries such as emergency contraceptive advice. The potential to further develop the HIA role for other health issues is also being explored.

In addition, the Scottish Executive Health Department, NHS 24 and its partners in the NHS Boards are working together to develop a **patient education campaign** to be launched in November 2005, with a focus on self-care advice for minor winter ailments. The campaign is planned to draw attention to the fact that NHSScotland’s services are particularly busy at this time of year.

Guidance for the general public on how to use out-of-hours services appropriately will be offered, underpinned by advice on self-care, information and sources of hep and advice. The campaign will include radio and press advertising, a leaflet and poster as well as a website.

In order to ensure an appropriate focus on patient safety and service quality within NHS 24 and ‘across the partnership’ into NHS local Board services, NHS 24 requires to link formally with local and national clinical and healthcare governance arrangements. The newly implemented Clinical Governance Infrastructure is being developed to provide a structural link with local NHS Board clinical governance arrangements.

There are continued well-established links with the Scottish Ambulance Service, as evidenced in the development of the NHS Highland satellite, maximising the benefits of co-location. There will be further development of Category C/Omega transfer of calls from SAS, which means that calls coming into 999 which do not require an ambulance are transferred to NHS 24.

Although all NHS Boards have implemented their new out-of-hours services in relation to the new General Medical Services (nGMS) Contract, they are continuing to review and develop their models of care, as well as responding to national developments. NHS 24 is working closely with partners around the development of regional, unscheduled care systems which match the needs of the local population and the available resource.

Through feedback from partners and patients within remote and rural communities particularly, NHS 24 recognises the specific challenges of integrating with and providing a service to those communities. A commitment to assess and address these challenges has been made within our Operating Plan and prioritised within the key areas I have described, specifically around the Dispersed Model developments.

Additionally, in advance of the launch of the satellites, a “Protected Pod” was established in NHS 24’s existing North Contact Centre to improve handling of calls from the Highlands and the Islands. This pod is staffed by Nurses with specific local knowledge in order to provide a more bespoke service for patients in
NHS Highlands and the Islands NHS Boards. This has been in operation since 1st August 2005 and the staff involved undertook reciprocal site visits with colleagues in partner organisations. This pod is contributing to an increased understanding of remote and rural areas across the service.

NHS Boards with rural geography will be invited to be involved in an evaluation of the Highland satellite centre.

In NHS Forth Valley, specifically, a local development demonstrates sensitivity to local needs and a commitment to partnership developments. In the Breadalbane area, because of the distance from the nearest PCEC, NHS Forth Valley OOH services have, in conjunction with the SAS, arranged for a Rapid Response Unit (RRU) to serve this community in the out-of-hours period. This unit is staffed by paramedics with extra training in minor injuries and minor ailments. Up until now, the RRU would be contacted by the NHS Forth Valley OOH hub when a primary care disposition (GP Home Visit or PCEC attendance) was reached for patients in this area.

Up until recently, many minor injuries have not been dealt with locally and patients have been referred to Stirling Accident and Emergency for face-to-face care. We are close to reaching an agreement with SAS that we can list the RRU on our Health Information System as a MIU. This would mean that when staff are searching for the nearest A&E/PCEC for patients in this area, the RRU will be listed as the closest. As per the process for MIUs, the nurse will phone to check that the RRU can deal with this problem and, if this is the case, arrange an appointment for the patient. This will mean that many minor injuries which previously had to drive to Stirling and back can be seen locally.

Also, as part of NHS 24’s Patient Focus Public Involvement (PFPI) strategy, there has been a large number of visits both to NHS 24 centres and to a wide range of community groups across Scotland to raise awareness of NHS 24 and how it works with local services.

Feedback from individuals and groups from these events reinforces the importance of this work, which helps to demystify our service for people and increase understanding of how we link with local services during the out-of-hours period, the impact of the new GMS Contract on NHS 24 and on local NHS Boards and helps to build users’ confidence in what we do.

A partnership with Help the Aged, for example, has resulted in the publication of a booklet designed and written by older people for older people and is currently being piloted in the Lothian area.

The development of the new satellite centres is also consistent with feedback from patients and the public, in that a more locally-based service will improve local knowledge, particularly of geography in remote and rural areas.

NHS 24 continues to encourage feedback from individuals who have used our service and who feel that it was not up to the standard we would wish. In this way, we can appropriately address specific cases and address any learning points within our service as part of our overall approach to service improvement and clinical governance.

If you have any further points you wish to raise, please do not hesitate to contact me.

John McGuigan
Chief Executive
I, the undersigned, declare that Kingston-upon-Spey is a historic village, being the place where King Charles II landed and signed the Solemn League and Covenant. In the 1800’s it was the port for Elgin and a major ship building centre. Situated at the mouth of the River Spey and in the centre of the Spey Bay, it is built on and is surrounded by a large area of gravel, all washed down by the River Spey. During the 1940’s and 1950’s gravel was extracted from a large area behind the beach to the west of the village. This area measuring approximately 1 mile by half a mile lies below or close to sea level and is now a wild life sanctuary.

The action of the sea is pushing the gravel from the beach west of Kingston eastwards across the mouth of the River Spey. In recent decades some 20 metres of beach have been eroded by the sea. On at least one occasion in recent years the sea almost broke through the small gravel ribbon between the beach and the gravel extractions. Quick action by Moray Council stopped the wild life sanctuary being flooded by the sea. Should the sea finally break through into this area, Kingston-upon-Spey would become an island as land levels behind the village and wildlife sanctuary are low lying.

During extended periods of low rainfall the mouth of the River is almost closed by these gravel deposits. Salmon netting was carried out on the lower reaches of the River Spey for generations. While that was operational the salmon nets men monitored and controlled the course of the river before it entered the sea. That work involved the mechanical moving of gravel deposits and the building of groynes with large granite blocks, concrete blocks and Gabian cages filled with boulders from the river. That work maintained the natural environment while preventing the erosion and lost of agricultural and amenity land. Such maintenance is no longer carried out and the River Spey is now moving its course westwards towards Kingston-upon-Spey. On at least on two occasions when the River Spey was allowed to follow its natural course, houses in Kingston-upon-Spey were washed into the sea. The last occasion was in the late 1950’s.

Garmouth and Kingston Amenities Association, the representative community group for the area are seriously concerned at the lack of interest and responsibility for the current situation. They have held negotiations with Moray Council and other bodies to no avail. Involvement through Members of the Scottish Parliament have failed to generate any action to resolve the issue and apportion responsibility. Proposals by Garmouth Golf Club have been blocked by Scottish Natural Heritage who refuse to sanction the extraction of gravel to allow a new course for the river or the use of any obstruction to control the flow of the River Spey.

The Petitioner therefore requests that the Scottish Executive:

1. Uses the Spey mouth area as a model for control of coastal erosion;
2. Fund work to prevent further erosion of the beach to the west of Kingston-upon-Spey;
3. Approve the extraction of gravel from the course of the River Spey between the mouth and the former Spey Bay Railway bridge;
4. Ascertain why Scottish Natural Heritage refuses to sanction steps that will control the course of the River Spey in an environmentally sound way;
5. To put in place a strategy for the future control of the course of the River Spey and beach erosion in that area to protect Kingston and the surrounding SSSI’s.

Petitioner: -
Address

Signature Date 22nd February, 2005.
22\textsuperscript{nd} February, 2005.

The Convenor,
Petitions Committee,
Scottish Parliament,
Holyrood,
Edinburgh.
EH99 1SP.

Dear Sir,

\textbf{Petition about the River Spey}

Please find a Petition and information on the above subject. I was brought up in the two villages at the mouth of the River Spey and learnt to fish on it. My mother and other relatives still live in the villages and I still take great interest in that area.

Kingston-upon-Spey gets its name from shipbuilders that were encouraged to come to the village from Kinston-upon-Hull to build ships at the mouth of the River Spey. Trees were cut down in the Cairngorms and floated down stream in large rafts. Over 200 ships were build at Kingston-upon-Spey.

The River Spey is one of the longest rivers in the UK. It is the fastest river in the UK. During its course it picks up gravel, eventually depositing on the river bed over its last few miles before entering the sea between Kingston-upon-Spey and Speybay. As the gravel piles up the River Spey is forced to change course. As it changes course it erodes agricultural land and in recent years amenity land. The River is also prone to flooding in the lower reaches. When my father was a boy the house he lived in with his mother and brothers was flooded 19 times in 15 months. The River Spey enters the Moray Firth at the middle of the Spey Bay
which runs from Lossiemouth in the west to near Cullen in the east. The coast line for about 6 miles either side of the river mouth is shingle, presumably washed down over the centuries by the River Spey. Geologists believe that at one point in history the River Spey ran parallel to the beach and south of the village of Kingston-upon-Spey entering the sea near to Lossiemouth.

Over the centuries a large deposit of gravel built up and the River Spey worked its mouth back towards its present position. As a result there is a band of gravel about half a mile wide south of the current beach. Just after the Second World War a quarry was started up immediately to the west of Kingston-upon-Spey to extract the gravel for construction purposes. The old extractions stretch for about 1 mile west of the village and are now an SSSI owned by a Charity. The base of the extractions is just below high water mark. A band of gravel between 30 yards and 80 yards wide lie between the former gravel extractions and high water mark.

The prevailing winds are from the west. Due to the nature of the shore there is no protection to the beach. Tides, currents and waves are dragging the gravel from the beach on the west side of the village eastwards. The current from the River Spey entering the Spey Bay act as a natural barrier causing the drifting gravel to be deposited thus forming a natural obstruction to the River Spey. As a result the mouth of the River Spey becomes very narrow forming a lagoon at high tide and during flooding.

In the late 1800’s large granite boulders were used to build groynes at Speybay to protect the village. These had the effect of pushing the River mouth towards Kingston-upon-Spey. About the same time a railway bridge was build about three quarters of a mile upstream from the mouth. Again very large granite boulders were used at either end of the bridge for support for the railway line on the approach to the main span of the bridge. These had the effect of channelling the River.

In the 1930’s, the River altered its course up stream of the bridge washing what was known as Horn’s croft into the River Spey. Similar bull working was constructed at that point to guide the river towards the gap under the railway bridge. That part of the River is still know locally as Horn’s Pool.
As the River Spey passes under the railway bridge (now a public footpath), it losses momentum and deposits the gravel it has carried down stream. This acts as a dam and forces the River Spey to meander. In the 1960's bull working using part of a former aircraft runway was used to form some bull working north of the railway bridge and on the Kingston side of the River. That was done to protect part of the local golf course that was coming under threat.

At that time the River Spey was allowed to cut a course towards Kingston-upon-Spey. As is the case at the moment nobody took responsibility for the River Spey and it worked a course parallel to the beach and westwards. As a result, two house at the western end of Kingston-upon-Spey were washed into the River. When that happened the then locally authority cut a new mouth close to the village of Spey Bay, thus reducing the threat to the village of Kingston-upon-Spey.

The course cut by the River Spey at that time is still in place today. It lies between the village of Kingston-upon-Spey and the beach. It is connected to the mouth of the River Spey by the Kingston Burn and a series of channels and marsh land. Know locally as “The Hole” its level falls and rises with the tide and flooding from the River Spey. It is close to this area that the former harbour and ship yards were located.

The salmon fishing rights in this area are owned by the Crown Estates. Up until the early 1990's Gordon Castle Estates fished the lower section of the River Spey for salmon using the net and cobble method. While they were leasing the fishing rights, they maintained the River banks. During the low water levels in the summer they would use heavy machinery to cut new dry channels which the River Spey broke through into when in spate in the late summer/early autumn. Wire cages filled with large gravel from the river were also used to protect weak areas of the bank. Every few years when the River Spey started working its way back towards Kingston-upon-Spey, they would also cut a new mouth. This work has ceased since the salmon netting rights were given up.

Since that time, the River Spey has continued to drop gravel in its course between the former railway bridge and the sea. As a direct result the River Spey has been forced to cut a new course which is heading westwards towards Kingston-upon-Spey. In doing that it has washed away substantial areas of the Garmouth and Kingston Golf Course and is heading back towards “The Hole” and its old mouth to the west of Kingston-upon-Spey. Currently the
build up of gravel on the western side of the current mouth of the River Spey has forced the
river to turn eastwards and it runs parallel to the beach behind the village of Tugnet close to
Spey Bay Village. History has shown that unless remedial work is done it is only a matter of
time before the River Spey cuts a new mouth to the west of the current mouth and places the
whole of Kingston-upon-Spey under threat.

At the same time as this is happening the drifting current of the sea is cutting away at the beach
to the west of village threatening to break through into the former gravel workings. Some
years back the sea did indeed break through and it was only because of fast remedial work by
Moray Council that the former gravel workings were not flooded and the sea breach the narrow
shingle divide permanently.

Should the River Spey return to its course of the late 1950’s/early 1960’s and the sea breaches
the narrow shingle bank dividing it from the former gravel workings, the village of Kingston-
upon-Spey risks being cut off from the main land. As it is at the moment the road linking
Kingston-upon-Spey with the hinterland does flood during high tides and floods.

Garmouth and Kingston Ammenities Association, a non statutory body elected by the locals in
place of a Community Council recognises the threat to the local area. In recent years it has
tried to raise the issue with those individuals/local bodies that it thinks has responsibility for the
problem with no success. A private company has shown an interest in extracting gravel from
the banks of the River Spey but has been refused permission. Such work would not damage
the environment as has been shown by similar work in the past. Indeed such a proposal would
benefit larges areas of the local environment protecting scrubland and marsh land. Plans to
build bull working to guide the River Spey have been blocked by Scottish Natural Heritage.

Local and National politicians have had little success in trying to get anybody to take
responsibility for the current situation.

I hope this gives your Committee sufficient back ground information to help them in making a
decision about this Petition. Both myself and representatives of the Garmouth and Kingston
Amenities Association backed by Jamie McGregor, MSP, are prepared to give evidence to the
Committee if so required. I travel considerably in my business and sometimes do not receive
letters from your Committee in time to reply that I wish to give evidence. If required to do so, I am more than willing to appear in front of your Committee.

In resolving this problem, it can be used as a model for other areas similarly affected in Scotland.

James A Mackie.

Attached: -

Copy maps of the area.
Copy letter to Mary Scanlon, MSP.
Multimap.com is the European leader in online mapping services.

We hope that you find Multimap's mapping services helpful and easy to use. Please note, however, that the maps should be used as a guide only. In particular, the red circle may indicate the centre of the area covered by the postcode selected, rather than the precise location of an address. Multimap.com and its suppliers assume no responsibility for any loss or delay resulting from use of our services. If you do find an error or omission, please let us know; we try to provide the best service possible. Please also note that Multimap grants you permission to make up to 10 copies of our maps for personal use only; if you require more copies, please write to info@multimap.com with your request.
Dear Dr Johnston

Thank you for your letter of 16 September enclosing a copy of petition number PE878 on coastal erosion as raised by James A Mackie.

The Committee asked whether the Moray Council had approached the Scottish Executive for funding to address coastal erosion. The Executive has not received any proposals from the Council for approval by Scottish Ministers to address coastal erosion under the Coast Protection Act 1949 (under the provisions of the Act, the sea includes the waters of any river as far up as the tide flows). However, we are aware that the Council is developing a substantial flood prevention programme, under the Flood Prevention (Scotland) Act 1961, and the Executive has already provided grant funding to the Council for a scheme in Llanbryde.

We are not aware that local authorities are limiting their applications for funding for coast protection schemes because the availability of such funding is limited. Indeed, the Executive has substantially increased to £89 million for 2005-08, the resources available as grant support for the construction of local authorities' approved coast protection or confirmed flood prevention schemes. It is for local authorities to come forward with suitable schemes, which meet the Executive's technical, environmental and economic criteria, to take up these resources. To date, the Executive has met all requests from local authorities for funding to support the construction of approved coast protection schemes.

Due to the rocky nature of much of Scotland's coastline, erosion is concentrated in small, local areas and is best dealt with at a local level. To that end, the 1949 Act gives local authorities discretionary powers to take forward coast protection schemes to prevent erosion of land. The Executive's general policy on coastal erosion is only to intervene in natural processes where coastal erosion directly threatens homes or businesses. We have also published planning guidance NPPG13 on Coastal Planning, which states that it is important that planning authorities fully understand the potential impact of coast protection works on the environment and natural movement of material along the coast.

The Executive recognises that it is important for local authorities to have access to detailed information on coastal erosion. We published research on coastal erosion processes around the Scottish coast in 1997 in conjunction with Scottish Natural Heritage and Historic Scotland. The
Executive is also in discussion with the RSPB, SNH and SEPA about collaborative research on climate change impacts on the coast.

The petition suggests that the Spey be used as a model for the control of coastal erosion in Scotland. However, there is generally not much of a link between river and coastal processes around the Scottish coast. The Spey is a special case, given its delivery of significant volumes of river gravels to the coast and, as such, would not provide a good model for the rest of Scotland.

The Executive has recognised the need for an overall strategy for Scotland’s coasts and seas and in September 2005 launched its Marine and Coastal Strategy, which looks at more effective use of tools such as Integrated Coastal Zone Management (ICZM); a process for bringing together all those involved in the development, management and use of the coast to achieve sustainable development at local level. ICZM will be an integral part of delivering sustainable use of the coastal and marine environment. The local coastal partnerships, (which include local authorities) have been working to implement the principles of ICZM around Scotland. This includes integrating coastal defence issues with tourism, fisheries, planning and development amongst other things. By working in partnership they aim to come up with local solutions to local problems, and the Executive set up the Scottish Coastal Forum to provide support to these local partnerships.

The Committee also asked for the views of the Flooding Issues Advisory Committee (FIAC) on this matter. However, FIAC is set up to take forward the National Flooding Framework only and, as such, does not include coastal erosion within its remit. As the petition raises concerns over coastal/river erosion, particularly in the River Spey area, this petition has not been put to FIAC. I have, however, taken the opportunity to obtain the views of Scottish Natural Heritage (SNH) and the Scottish Environment Protection Agency (SEPA) in response to the petition.

SNH provided a very full response, a copy of which is attached. In summary, SNH has been in discussion with interested parties in the Kingston area but has never been contacted by the Garmouth and Kingston Amenities Association mentioned in the petition. SNH report that proposals put forward by Garmouth and Kingston Golf Club have not been blocked and permission for works by the Golf Club or Crown Estate have not been refused, in fact, SNH maintains that it has a positive relationship with the Golf Club.

SNH is of the view that there may have been a misunderstanding of a response by SNH to Moray Council in December 2003 about a preliminary enquiry received by the Council into the possibility of undertaking gravel extraction works in the River Spey. Whilst objecting to the proposal on a number of grounds, SNH observed that the proposal alone would not have helped to alleviate flooding.

Finally, both SNH and SEPA agree that using the River Spey as a model for the control of coastal erosion may not be appropriate, as the Spey is atypical in both Scottish and UK terms.

I hope you find this helpful.

Yours sincerely

David Brown
Environment and Rural Affairs Department
Our Ref: AK/GE
Your Ref:

10 November 2005

Dr James Johnston
Clerk to the Public Petitions Committee
The Scottish Parliament
TG.01
Parliamentary Headquarters
Edinburgh
EH99 1SP

Dear Dr Johnston

Scottish Parliament Public Petitions Committee - Consideration PE878

Further to my letter of 20 September 2005 regarding the above, I respond with the following:

The Environmental Services Committee of 26 October 2005 considered a report and approved a recommendation to commission a study of the outline business case for a scheme to protect the village of Kingston from the elements described in the petition. Consultants Jacobs Babbit, who have a historical involvement in the area from a commission dating back to the days of the former Grampian Regional Council, will undertake the work. They are scheduled to report by March 2006. A copy of the Committee Report is enclosed for your information.

Jacobs Babbit previously recommended a preferred option of constructing an offshore breakwater to protect the shingle ridge to the village frontage from erosion. I shall not address further in this letter the technical considerations raised by Mr Mackie because these would be subject to investigation and analysis as part of the scheme.

Grant funding for these schemes is shared with fluvial flood prevention schemes. It only becomes available when Scottish Ministers confirm the scheme and it demonstrates a positive economic return. It would be inappropriate to approach the Scottish Executive, even initially, without an outline business case.

I cannot comment on the extent to which Councils might be limiting coastal schemes because of limited funding. Officers involved in the national flooding forum through the Society of Chief Officers Transportation Scotland (SCOTS) indicate they are unaware of this being a factor. In respect of Moray Council, there are allocations within the Capital Plan currently for a scheme at Kingston. The key issue in this case is whether there is an economic scheme rather than availability of grant funding. After Jacobs Babbit conclude their study the appropriate Council Committee will decide the next steps.

The above, I believe, addresses most of Mr Mackie’s concerns relating to the Council but I shall comment on some of the issues in the Official Report.

Contd/1
1 The £89 million available for grant funding applies until 2008. Moray’s schemes will not be completed in this timescale, by when new arrangements will presumably be in place.
2 Clearly the Council cannot apply for grant before a scheme is confirmed by Ministers.
3 Mr Mackie’s comment that the Council has applied for funding for some schemes but is delaying further applications because of limited funding is without foundation. Lhanbryde Flood Prevention Scheme, the only one confirmed by Ministers to date, is the sole instance of a grant application and award.
4 The “experts”, should the scheme proceed, would be procured in accordance with EU procurement regulations.

I appreciate Mr Mackie’s concerns and the study that has been commissioned may go some way to addressing these concerns. I should concur with the view expressed by Jackie Ballie, MSP, in the Official Report that the petition “is probably ahead of its time”.

I trust you will find these comments and the enclosed report helpful.

Yours sincerely

Alastair Keddie
Chief Executive

enc

cc: George Borthwick, Transportation Manager
REPORT TO: ENVIRONMENTAL SERVICES COMMITTEE ON 26 OCTOBER 2005

SUBJECT: KINGSTON COAST PROTECTION

BY: DIRECTOR OF ENVIRONMENTAL SERVICES

1 Reason for Report

1.1 To seek Committee approval to commission a study of the outline business case for the Kingston Coastal Protection Scheme.

1.2 This report is submitted to the Committee in terms of Section D(22) of the Council's Administrative Scheme relating to the maintenance of piers and harbours and coastal protection and Section D (23) relating to the functions of the Council under the Flood Prevention (Scotland) Act 1961 as amended by the Flood Prevention and Land Drainage (Scotland) Act 1997

2 Background

2.1 The coastal strip to the West of the mouth of the River Spey consists of mobile shingle ridges and there has been a history of erosion and flood damage occurring at Kingston. Management of this coastline has historically been carried out by re-profiling of the shingle ridges and cutting a new mouth to the River Spey when necessary. The most recent engineering works were carried out in 1995 when a new mouth was cut and river profiling work carried out. There is ongoing monitoring of the estuary and adjacent shorelines.

2.2 A report to Technical & Leisure Services Committee of the Moray Council on 19th June 1997 (and ref. report of 27th June 1996) provided an update on the scheme and sought approval for design and site investigations to progress. The committee noted the position at Kingston and instructed the monitoring works to continue. They also, approved the offshore breakwater design and suspended Standing Orders to allow the Consultant Engineers (Babtie) to be engaged to investigate the design solution and prepare contract details including environmental consultations, planning consent, grant aid submission, and Scottish Office approvals (para 29 of Minute refers).

2.3 A marine ground investigation was completed in September 1998 and the design was further developed.
2.4 Scottish Natural Heritage (SNH) published the report "The geomorphology, conservation and management of the River Spey and Spey Bay SSSI's" in November 2001 prepared by the University of Glasgow. The SNH report will have an impact on the scope of works being proposed for the Kingston frontage and SNH will be consulted in the development of a suitable physical model.

3 The Proposals

3.1 It is proposed that the Committee consider the report entitled "Revised Stage 1 Proposal" contained as Appendix B to this report and the recommendations as noted in this report.

3.2 The proposal is to provide a sustainable Coastal Management Scheme for the Kingston frontage, which is currently at risk from erosion of the mobile shingle beach exposing properties to flooding and eventual loss due to wave action.

3.3 The current phase in the scheme is to prepare a detailed business case for consideration by the Committee and subject to further approval, thereafter carry out physical modelling of the preferred option. Modelling the coastal and fluvial processes at Kingston is required due to the complexity of the processes involved and to give the necessary confidence in the proposed options for application to the Scottish Executive for grant aid.

3.4 A procurement strategy for the scheme is required. The Council has to date retained the services of a consultant employed many years ago by the former Grampian Regional Council. EU Procurement Regulations necessitate that the contract be put to tender.

4 Financial Implications

4.1 The outline costs are considered in Appendix A. The proposals and recommendations in this report do not commit the Council to the costs involved beyond the Stage 1 of investigation, and development of the outline business case. There is allowance of £77,000 in the Capital Plan (2005-06) for this expenditure.

4.2 The funding mechanism for coast protection and flood alleviation schemes is the same as for other flood alleviation schemes, i.e., eligible for an 80% Grant from the Scottish Executive in line with current arrangements.

4.3 The estimated scheme costs are outlined in Appendix A with a detailed breakdown of the Stage 1 costs in Appendix B. The cost is estimated to be £6,052,000 which includes a 60% allowance for Optimism Bias (i.e. an allowance for risks associated with the fact that the design, based on the preferred option of an offshore breakwater, is at a very early stage; this optimism bias reduces as a scheme develops and the risks become better understood and mitigated) in the construction costs as required by the Scottish Executive. The key stages, estimated start dates and estimated costs are:

Estimated completion date – March 2006. Estimated cost - £46,000
Gateway: The Committee will need to consider the business case and all options before proceeding further.


Stage 4: Construction (assuming that an offshore breakwater would provide the best solution). Potential start date - May 2008 Estimated cost - £5,310,000

5 Staffing Implications

5.1 The procurement exercise and subsequent supervision of the project, should there be a business case for progressing it, will require staff resource. It is considered that this can be accommodated within the current establishment.

6 Environmental Implications

6.1 Environmental implications will be evaluated during the process and reported at the appropriate stage.

7 Sustainable Development Implications

7.1 Sustainable development implications will form part of the evaluation process in Stages 1 & 2 and reported back to this Committee.

8 Consultations

8.1 The Chief Financial Officer has been consulted and his comments have been incorporated in this report.

8.2 Alasdair McEachan, Senior Solicitor has been consulted and is in agreement with the contents of this report.

9 Corporate Development Plan

9.1 Kingston Coast Protection Scheme forms part of the implementation of the corporate priority of “Providing flood alleviation schemes for Moray Communities”.

10 Recommendations

10.1 It is recommended Committee approve the commissioning of a study of the outline business case for the Kingston Coastal Protection Scheme.

Author of Report: Brian Kinnear, Engineer, Environmental Services Consultancy
Background Papers:
Ref: BK/R4/18

Signature: "

Designation: Director of Environmental Services Name: Robert A Stewart
Public Petitions Committee – a template for public petitions

Should you wish to submit a public petition for consideration by the Public Petitions Committee please complete the template below. Please refer to the Guidance on submission of public petitions for advice on issues of admissibility before completing the template. You may also seek advice from the Clerk to the Committee whose contact details can be found at the end of this form.

Details of principal petitioner:
Please enter the name of person and organisation raising the petition, including a contact address where correspondence should be sent to, email address and phone number if available

Bob Leitch
Board of Directors, Ayrshire Chamber of Commerce

Text of petition:
The petition should clearly state what action the petitioner wishes the Parliament to take in no more than 5 lines of text, e.g.

The petitioner requests that the Scottish Parliament considers and debates the implications of the proposed Agenda for Change legislation for Speech and Language Therapy Services and service users within the NHS

The petitioner requests that the Scottish Parliament......

The petitioner requests that the Scottish Parliament urges the Scottish Executive to take immediate action to create a task force to integrate and develop all Burns’ assets, properties, and locations across Scotland resulting in a national Burns Heritage trail ready for the year of the homecoming in 2009 and available for promotion internationally by the end of 2006.

Additional information:
Any additional information in relation to your petition, including reasons why the action requested is necessary, should not be included here. However, it may be appended to the petition and will be made available to the Public Petitions Committee prior to its consideration of your petition. Please note that you should limit the amount of any additional information which you may wish to provide in support of your petition to no more than 4 sides of A4.
Action taken to resolve issues of concern before submitting the petition:
Before submitting a petition to the Parliament, petitioners are expected to have made an attempt to resolve their issues of concern by, for example, making representations to the Scottish Executive or seeking the assistance of locally elected representatives, such as councillors, MSPs and MPs. Please enter details of those approached below and append copies of relevant correspondence, which will be made available to the Public Petitions Committee prior to its consideration of your petition.

Request to speak:
Petitioners may request to appear before the Public Petitions Committee in support of their petition, although it should be noted that requests to speak will only be granted if the Convener considers that a brief statement from the petitioner would be useful in facilitating the Committee’s consideration of the petition. Due to the large volume of petitions being considered the Committee will usually only hear presentations on up to 4 new petitions at each meeting.

Please indicate below whether you wish to request to make a brief statement before the Committee when it comes to consider your petition.

Yes / No*

*Delete as appropriate

Signature of principal petitioner:
When satisfied that your petition meets all the criteria outlined in the Guidance on submission of public petitions, the principal petitioner should sign and date the form in the box below. Other signatures gathered should be appended to this form.

Signature

Date ........................................17/05/2005..................................................

Please note that any additional information, copies of relevant correspondence and additional signatures should be appended to this form and submitted to:

The Clerk to the Public Petitions Committee,
The Scottish Parliament,
Edinburgh
EH99 1SP
Tel: 0131 348 5186 Fax: 0131 348 5088
e-mail: petitions@scottish.parliament.uk
As the technology speeds up the volume and rate of communication, enabling people to become more interconnected, their interest in human rights grows, drawing more and more people to the wellspring of the humanitarianism – the work of Burns. Recent crisis meetings regarding the Burns Heritage Park in Alloway have raised public awareness of the dilapidated state of much of the Burns heritage products and properties. The conditions found in Alloway are indicative of the state of the rest of the assets and properties across Scotland.

If the Burns heritage was indigenous to any other country, then the quality of the assets and properties as well as the marketing and promotional support would be considerably higher than it is in Scotland, e.g. Shakespeare, James Joyce trail in Dublin, etc.

We call upon the Parliament to ensure this priceless asset of Scotland and all the world receives proper investment for the future. If the Burns heritage product was fully developed into an integrated tourism trail across Scotland, the potential could be enormous.
Mr. Richard Hough  
Public Petitions Committee  
The Scottish Parliament  
Edinburgh  
EH99 1SP

Dear Mr Hough

E-Petition - Culture and Tourism policies regarding Robert Burns

I have pleasure in submitting the following petition for consideration by the Petitions Committee.

The petitioner requests that the Scottish Parliament…
(a) review the policy and commitment of the Scottish Executive to place Robert Burns and his legacy at the heart of its culture and tourism policies
(b) urge the Scottish Executive to assume responsibility for bringing together all interested parties to ensure the flagship assets of our Burns heritage are properly restored and developed in good time for the major events planned for the 2009 Homecoming Year, marking the 250th anniversary of the birth of the national bard.

Signed

Peter Watson  
Chair
Eileen Martin
Public Petitions Committee Assistant
Public Petitions Committee
Parliamentary Headquarters
Edinburgh
EH99 1SP

14th November 2005

Dear Ms Martin

Scottish Parliament Public Petitions Committee – Consideration of PE861

Thank you for your letter of 13th October 2005 regarding the Committee’s consideration of our above petition enclosing the official extract of the Report.

May I say how pleased we are that the Minister has put so much weight behind the Burns issue and in particular how much personal commitment she is making with regard to the home coming in 2009 and the restoration and renovation of the assets here in Ayrshire.

We note that a Director is shortly to be appointed and that an Advisory Group is to be set up to provide direction and guidance during the development of events. We note that Allan Burns has been appointed as chair of this Board and again we welcome this development. Indeed, we would be most willing to serve on this board representing not only Ayrshire, but also Scottish Chambers of Commerce, of which I happen to be the past Director. We would of course be most willing to serve on any local partnership involved in these developments.

We also are pleased to note that the Minister has recognised the need to create a Burns Heritage Trail, which truly has joined up thinking and which will encourage better working together with all the Burns assets across Scotland. This was a central focus of our Petition. In this regard we are concerned that whatever happens the Trail and Heritage need to be sustainable not just until 2009, but for future generations. Does the Minister have any proposals to work with the Education Department and other education establishments to ensure this good work is promoted and included in curriculum so that it will become an integral part of the fabric of Scotland.

We are also delighted that it is the long term plan to return to Ayrshire those collection items removed from Ayrshire for safe curatorial keeping will be once suitable accommodation is available.
Lastly, we note the Minister has suggested a golf event to coincide with the celebrations, perhaps such an event could be organised by the Chamber.

I look forward to hearing from you.

Yours sincerely.

Bob Leitch
Chief Executive
ALLOWAY AND DOONFOOT COMMUNITY COUNCIL HAVING CONSIDERED THE REPLY TO THE PPC BY THE MINISTER P. FERGUSON THEIR PETITION ARE DELIGHTED BY HER RESPONSE EXCEPT IN ONE POINT WHICH DOES NOT SEEM CORRECT. IN COL 2044 THE MINISTER TALKS OF THE VARIOUS BODIES AND INDIVIDUALS SHE INTENDS TO HAVE ON THE ADVISORY GROUP BUT MAKES NO MENTION OF ANY LOCAL INVOLVEMENT. THE COUNCIL AND THE RESIDENTS HOPE THAT THIS IS AN OVERSIGHT BY THE MINISTER AND THAT LOCAL INVOLVEMENT WILL TAKE PLACE IN RECOGNITION OF THEIR WORK IN BRINGING THE PROBLEM TO PARLIAMENT.

THE COUNCIL WISH TO GO ON RECORD IN THANKING THE SCOTTISH PARLIAMENT PUBLIC PETITIONS COMMITTEE AND THEIR STAFF IN THEIR HELP AND SUPPORT OVER THE LAST YEAR.

JRS

P.R. WATSON (CHAIR)
ALLOWAY AND DOONFOOT COMMUNITY COUNCIL