

## Questions

### British Sign Language

**Jackie Baillie (Dumbarton) (Lab):** To ask the Scottish Executive what the outcome was of the pilot study of the online British Sign Language interpreting service. (S3W-24707)

**Alex Neil:** The Scottish Government funded Deaf Connections to conduct a time-limited online British Sign Language (BSL)/English interpreting pilot during 2007-08. The pilot was funded to test the new approach to interpreting provision and to start to explore if it could contribute to a better deployment of the limited number of interpreters available in Scotland.

Whilst the evaluation suggested that an online interpreting service can be useful in a number of situations, particularly in rural areas or when the interpreting assignment is of a short duration the service should not be seen as an alternative to the existing traditional, face-to-face service. The evaluation suggested that the deaf people who used the online interpreting service preferred it to online services delivered in English. Interpreters felt the pilot had allayed their initial professional concerns.

The pilot demonstrated that an online interpreting service can work and that technical difficulties and professional concerns can be overcome. The lessons from the pilot are helpful to policy makers and have contributed to the government's understanding of online services for people who use BSL.

A copy of the evaluation of the pilot carried out by Deaf Connections is available on the Scottish Government website at <http://www.scotland.gov.uk/Topics/People/Equality/disability/remit/projects/>

**Jackie Baillie (Dumbarton) (Lab):** To ask the Scottish Executive whether it supports the use of a multimedia platform for the provision of a British Sign Language interpreting service. (S3W-24708)

**Alex Neil:** The Scottish Government is interested to note the progress in multimedia technology which will benefit deaf people who use British Sign Language (BSL). A number of voluntary organisations and private companies in Scotland are testing the market by offering online BSL/English interpreting and other products. These services are at an early stage of development and while advancing technology will offer opportunities for online interpreting services to be developed, online interpreting may not be appropriate for all occasions and safeguards need to be built in to any future developments.

**Jackie Baillie (Dumbarton) (Lab):** To ask the Scottish Executive how it will develop and improve access to British Sign Language interpreting services. (S3W-24709)

**Alex Neil:** The Scottish Government is taking action to improve access to British Sign Language (BSL)/English interpreting services by supporting measures to increase the number of BSL/English interpreters available across Scotland. In 2003 there were 39 registered interpreters in Scotland and there are now 60 interpreters and 10 apprentices currently registered in Scotland.

Over the period 2008-11, the Scottish Government has committed £1.5 million to support an innovative package of measures to increase the number of registered BSL/English interpreters working in Scotland and to develop a work-based route to becoming an interpreter. This will complement the already established academic route, and make becoming an interpreter more accessible. Part of this funding will also support the teaching of BSL at all levels to increase access to services either directly through BSL, or through appropriately qualified interpreters.

**Mental Health**

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0603.htm>

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive how it will respond to the recommendations contained in the Audit Scotland report, *Overview of mental health services*. (S3O-7191)

**Shona Robison:** We have welcomed the Audit Scotland report, which gives a fair summary of the progress that has been made in improving mental health services in Scotland. The report recognises the strong support from stakeholders for the Scottish Government's policies, and the commitment we have given to change.

We are aware of the issues raised and recommendations made in the report and have already been taking action in particular on the integration of services, improving information, developing the workforce and reducing waiting times for child and adolescent services and psychological therapies.

**Swine Flu: BSL Health Education**

<http://www.publications.parliament.uk/pa/cm200809/cmhansrd/cm090512/text/90512w0017.htm>

**Malcolm Bruce:** To ask the Secretary of State for Health what steps have been taken to make swine influenza information distributed by the Government accessible to deaf people who use British Sign Language. [274725]

**Dawn Primarolo:** A British Sign Language version of the swine flu information leaflet will be available to download from the NHS Choices and Directgov websites from Thursday 14 May and by DVD from Wednesday 20 May.

**Malcolm Bruce:** To ask the Secretary of State for Health what provisions his Department will make to ensure that deaf and hearing-impaired people have access to the same information as hearing people in respect of the National Flu Helpline. [274940]

**Dawn Primarolo:** The Swine Flu Information helpline is automated. It offers recorded information but no interaction with call handlers and is not therefore accessible to deaf or hearing impaired people. However, deaf and hearing-impaired people may access the same information through websites and a British Sign Language version of the swine flu information leaflet, available from the NHS Choices and Directgov websites from Thursday 14 May and on DVD from Wednesday 20 May.

**Gaelic**

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0610.htm#6>

**Dave Thompson (Highlands and Islands) (SNP):** To ask the Scottish Executive, further to the answer to question S3O-7069 by Fiona Hyslop on 21 May 2009, whether it considers that bilingualism improves the cognitive abilities of children; whether this is the case with Gaelic-English bilingualism, and how many and what percentage of children in Gaelic-medium primary schools are taught French. (S3W-24538)

**Fiona Hyslop:** The Scottish Government is aware that there may be a number of benefits resulting from Gaelic-English bilingual education. No information is held centrally on the number or percentage of Gaelic-medium pupils in primary schools that are taught French. The Scottish Government would expect, however, local authorities to offer further language learning opportunities to Gaelic-medium pupils both at primary and secondary levels.

**Gaelic**

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0618.htm#8>

**Alasdair Allan (Western Isles) (SNP):** To ask the Scottish Executive what plans there are to increase the provision of education for adult learners of Gaelic. (S3O-7462)

**Fiona Hyslop:** The Scottish Government recognises the vital role which Gaelic adult education has to play in creating a secure future for the language in Scotland. The Scottish Government also recognises the importance of increasing the opportunities for and the effectiveness of Gaelic adult education. There are a number of Gaelic adult education options in place and it is the Government's intention that this provision should increase.

### Single Outcome Arrangements

**S3W-24679 - Jackie Baillie (Dumbarton) (Lab) (Date Lodged Wednesday, June 10, 2009):** To ask the Scottish Executive whether it considers that equality impact assessments should be applied to single outcome agreements.

**Answered by Alex Neil (Thursday, June 18, 2009):** It is not the Scottish Government's role to determine on whether an authority has appropriately complied with its public sector equality duties. However, as the Scottish Government is engaged with community planning partnerships (CPPs) in the development of single outcome agreements (SOAs), it recognises its responsibility to work with partners to ensure that equality is properly considered and reflected. To support this, in March 2009 the Scottish Government and COSLA issued advice on *Equality and Single Outcome Agreements "Getting to Best Practice"*. This advice is intended to help community planning partners to consider how they may move beyond fulfilling their individual equalities obligations and toward jointly incorporating

### NHS Waiting Times

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0608.htm>

**Nanette Milne (North East Scotland) (Con):** To ask the Scottish Executive what the average audiology waiting time has been for adults, broken down by NHS board, in each year since 1999. (S3W-24424)

**Nicola Sturgeon:** Information relating to audiology waiting times in NHS boards has been collected since April 2007 and Information Services Division (ISD) is actively working with the boards to improve the consistency, completeness and timeliness of these data. Progress was reviewed in November 2008 but fundamental problems remained with comparing data between NHS boards and a revised dataset was introduced in December 2008. Audiology waiting times will be included within the 18-week referral to treatment standard by 2011 and systems are being developed to report progress towards that target.

**Nanette Milne (North East Scotland) (Con):** To ask the Scottish Executive what the average audiology waiting time has been for neonates, broken down by NHS board, in each year since 1999. (S3W-24425)

**Nicola Sturgeon:** This data is not currently held centrally, however plans are being taken forward to develop a data link within boards between the Universal Newborn Hearing Screening (UNHS) system and NHS audiology departments. Once diagnostic work has been carried out on a referred baby by the audiologist, that data would be recorded on the UNHS system. Over time, this should allow waiting times data to be extrapolated and reports to provide other data such as around the number of deaf children being identified within boards.

### Influenza

**Cathy Jamieson (Carrick, Cumnock and Doon Valley) (Lab):** To ask the Scottish Executive, further to the answer to question S3W-24404 by Nicola Sturgeon on 9 June 2009, how many times the influenza A (H1N1) virus TV commercial *Lift* has been screened on Asian TV channels and what assessment it has made of the penetration of this commercial into Asian households. (S3W-24688)

**Cathy Jamieson (Carrick, Cumnock and Doon Valley) (Lab):** To ask the Scottish Executive, further to the answer to question S3W-24404 by Nicola Sturgeon on 9 June 2009, what other action has been taken to ensure that messages about the influenza A (H1N1) virus are covered in black and ethnic minority media outlets. (S3W-24689)

**Nicola Sturgeon:** The Swine Flu TV commercial *Lift* has been screened on 11 Asian TV channels delivering 913 "30 second" spots from 1 May to 14 May 2009. These stations cover Bangladeshi, Indian, South Asian, Pakistani and Afro Caribbean ethnic groups. There are no cover or frequency figures available for the ethnic TV channels as they are not on the Broadcasters' Audience Research Board (BARB).

**Cathy Jamieson (Carrick, Cumnock and Doon Valley) (Lab):** To ask the Scottish Executive, further to the answer to question S3W-24404 by Nicola Sturgeon on 9 June 2009, what additional advice and assistance is being provided to groups and organisations serving black and ethnic minority communities to help ensure that messages about the influenza A (H1N1) virus are being effectively communicated. (S3W-24690)

**Cathy Jamieson (Carrick, Cumnock and Doon Valley) (Lab):** To ask the Scottish Executive, further to the answer to question S3W-24404 by Nicola Sturgeon on 9 June 2009, whether it will list additional activities outlined in its communications strategy on the influenza A (H1N1) virus relating to black and ethnic minority communities. (S3W-24691)

**Nicola Sturgeon:** In addition to the national door drop, the National Swine Flu information leaflet was sent out to stakeholders who communicate specifically with black and ethnic minority communities. This includes people in education and training, advice centres, charities, cultural diversity and religious groups across Scotland.

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0619.htm>

**S3W-25176 Dr Richard Simpson:** To ask the Scottish Executive, in light of the *Review of Mobile Communication Devices as Potential Reservoirs of Nosocomial Pathogens* in *The Journal of Hospital Infection*, what steps it has taken to include the regular testing and decontamination of mobile phones, other mobile devices, static phones and computer keyboards as part of the healthcare-acquired infection hygiene measures.

<http://www.scottish.parliament.uk/business/businessBulletin/bb-09/bb-06-24e.htm>

## Prison Service

<http://www.scottish.parliament.uk/business/pqa/wa-09/wa0619.htm#12>

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive, further to the answer to question S3W-24343 by Kenny MacAskill on 8 June 2009, how it will ensure contact with community agencies for prisoners with mental health needs on release from prison. (S3W-24773)

**Kenny MacAskill:** I have asked Mike Ewart, Chief Executive of the Scottish Prison Service, to respond. His response is as follows:

The Scottish Prison Service has in place a range of health care audit and governance procedures. This includes a specific Healthcare Standard which defines prison mental health services, including provision for liberation and transfer of mental health care to the community.

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive, further to the answer to question S3W-24343 by Kenny MacAskill on 8 June 2009, whether it considers that contact with community agencies within eight weeks of release from prison is appropriate for ex-prisoners with mental health needs. (S3W-24774)

**Kenny MacAskill:** I have asked Mike Ewart, Chief Executive of the Scottish Prison Service, to respond. His response is as follows:

The Scottish Prison Service has processes for the case management for prisoners with significant needs, including those for mental health care. It makes contact with community agencies on behalf of prisoners with mental health needs eight weeks prior to release from prison. The Scottish Prison Service cannot and does not monitor community agencies that offer follow-up care, nor does it determine when an ex-prisoner will be seen by a community agency.

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive whether it considers that the provision of diagnostic and mental health services provided by the Scottish Prison Service meets the needs of all prisoners. (S3W-24779)

**Kenny MacAskill:** I have asked Mike Ewart, Chief Executive of the Scottish Prison Service, to respond. His response is as follows:

The Scottish Prison Service strives to meet all offenders' health care needs within available resources. The service acknowledges that there are geographical variations in the type, range and capacity of support services available in establishments and within the community for prisoners with mental health needs. These variations have a consequence on through-care, discharge arrangements and onward referrals to community services.

**\*S3M-4459 Stuart McMillan: Shared Surfaces and Disabled People—**That the Parliament supports the Guide Dogs for the Blind Association (Guide Dogs), Inclusion Scotland, RNIB, RNID, Capability Scotland, Scottish Accessible Transport Alliance and Scottish Disability Equality Forum in calling for a moratorium on new shared surface schemes in towns and cities until the results of the research currently being carried out by the UK Government's Department for Transport are published; recognises that in these schemes it is not possible for certain groups of vulnerable road users to use such areas independently because they cannot tell where the pavement ends and the road begins; welcomes the research that Guide Dogs has already carried out to highlight the issue and to try to find an effective solution for all disabled people, and also recognises that the Mobility and Access Committee for Scotland, in responding to the consultation, *Designing Streets*, requested that no new shared surface areas should be agreed by planners until the research commissioned by the Department for Transport is completed, analysed and commented on.  
<http://www.scottish.parliament.uk/business/businessBulletin/bb-09/bb-06-22f.htm>

## Mental Health

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive what services are available in each NHS board area for people with post-traumatic stress disorder. (S3W-24164)

**Shona Robison:** The information requested is not held centrally. Services for people with post traumatic stress disorder are planned and delivered by NHS boards and their partners to reflect the level of individual clinical need.

Support for Veterans with post-traumatic stress disorder is further enhanced by new arrangements from 1 April this year with the charity Combat Stress for improved access to specialist mental health services, and the Veterans First Point pilot service in Edinburgh for advice and support to Veterans and their families.

**Tom McCabe (Hamilton South) (Lab):** To ask the Scottish Executive, in light of Audit Scotland's report, Overview of mental health services, whether it considers its funding and policy initiatives in relation to mental health services to be correct. (S3W-24168)

**Shona Robison:** The Audit Scotland report acknowledges the priority, commitment and funding support we have given, and will continue to give, to transforming and modernising mental health services, and recognises the strong support given to our policies in this area by our key partners and stakeholders.

We are aware of the issues raised in the report and have already been taking action in particular on the integration of services, improving information, developing the workforce and reducing waiting times for child and adolescent services and psychological therapies.

We will continue to work with our partners in the NHS, local government and the voluntary sector to take forward the recommendations in the report and look forward to Audit Scotland's further work in this area.

## **Mental Health**

**Mary Scanlon (Highlands and Islands) (Con):** To ask the Scottish Executive how it will respond to the recommendations contained in the Audit Scotland report, Overview of mental health services. (S3O-7191)

**Shona Robison:** We have welcomed the Audit Scotland report, which gives a fair summary of the progress that has been made in improving mental health services in Scotland. The report recognises the strong support from stakeholders for the Scottish Government's policies, and the commitment we have given to change.

We are aware of the issues raised and recommendations made in the report and have already been taking action in particular on the integration of services, improving information, developing the workforce and reducing waiting times for child and adolescent services and psychological therapies.