

# Committee for Health

# OFFICIAL REPORT (Hansard)

Hospital Parking Charges Bill: Miss Aisling Reilly MLA

10 February 2022

### NORTHERN IRELAND ASSEMBLY

## Committee for Health

Hospital Parking Charges Bill: Miss Aisling Reilly MLA

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#### Members present for all or part of the proceedings:

Mr Colm Gildernew (Chairperson)
Mrs Pam Cameron (Deputy Chairperson)
Ms Paula Bradshaw
Mr Gerry Carroll
Mr Alan Chambers
Mrs Deborah Erskine
Ms Órlaithí Flynn
Mr Colin McGrath
Miss Aisling Reilly

#### Witnesses:

Miss Reilly MLA - West Belfast

Ms Catherine Kelly Sinn Féin

**The Chairperson (Mr Gildernew):** I welcome Aisling Reilly MLA, the sponsor of the Bill. We are also joined by Catherine Kelly, Sinn Féin party support officer. Aisling, would you like to go ahead with your briefing? We can then go to Committee members for any questions that they may have. Thank you.

Miss Aisling Reilly (Northern Ireland Assembly): Go raibh míle maith agat, a Chathaoirligh. Ar dtús, ba mhaith liom buíochas a ghabháil libh as an chuireadh teacht os bhur gcomhair inniu. Thank you very much for the invitation to come in front of the Committee today. I will keep my remarks extremely brief, and, if it is OK, a Chathaoirligh, I will then be open to questions.

First, good morning. I start by thanking all members for their scrutiny to this point of the private Member's Bill on abolishing hospital car parking charges. I also thank everyone who gave evidence to the Committee, whether that was oral or written. Some of the information about the struggles for and pressures on workers and patients I already knew about, but I think that we can all agree that that was reaffirmed in the evidence sessions.

Members, as you know, the Bill is extremely short, with three clauses. Its objective is to abolish hospital car parking charges for workers, patients and their families. I listened intently to your evidence sessions over the past number of weeks, and we heard again and again that hospital car parking charges are an unfair additional tax on everyone. The charges pose a real barrier, even more so now during a cost-of-living crisis and with high energy costs that will continue to rise.

I also thank the departmental officials who gave evidence at the start of this week or the end of last week. I should let members know that I met them this week to discuss the Minister's proposed amendment. I welcome the Minister's support of the intent of the Bill and his willingness to investigate

the optimal way to deliver its stated outcome. I reiterated to the Department that I am focused on making sure that the Bill becomes law by the end of the mandate.

Via the evidence sessions, we heard how abolishing hospital car parking charges would positively impact on people. It would ease financial burdens that they should not have to face as a result of hospital car parking.

I reiterated to the Department that I will work with it and that I will consider its proposed amendment, subject to seeing it first. We will also keep our door open to conversations over the coming days and weeks. I also asked the Department to discuss and look at possible ways of reducing the burden on workers in the interim period, similar to what was done during the pandemic.

Chair, those were my brief opening remarks. I am happy to take questions.

The Chairperson (Mr Gildernew): Thank you, Aisling. On your engagement with the Department and that review, is it your position or thought that you will be able to work with the Department on that and that there is potential for that to be worked through? You do not see that as being problematic in getting the Bill out.

**Miss Reilly:** I am very supportive of the review. I think that the last one was done in 2012. We all agree and the Department has agreed that a 10-year period between reviews is far too long.

We, of course, support some of the things that were mentioned as being included in the review. As you stated in the last evidence session, Chair, we are not reinventing the wheel; this has been done in other jurisdictions. One of the key parts is the link between us and Scotland and Wales. That interaction will be key, and the Department will have to seek information from colleagues in other jurisdictions on best practices elsewhere. Scotland and Wales have abolished hospital car parking charges. We need to learn from them, adapt and see what works and, potentially, what does not work. That will be a key part of the review. We say it all the time when we come to the Committee: we want to make good legislation that works for everybody. Therefore, the review that, the Department said, it wants to undertake is, of course, welcome.

Departmental officials also talked about climate change and their commitment to tackling that, and, of course, we want to encourage people to travel to work sustainably. We want to encourage people to walk and cycle if they can — absolutely. Departmental officials also talked about how some of the revenue that is generated from car parking goes towards park-and-rides, but we all agree that the park-and-ride system is just not fit for purpose. I have spoken to staff who said that it is really a nine-to-five service. That is no use to anybody who works from 8.00 am to 8.00 pm or someone who leaves work late in the evening or early in the morning. That service really is not fit for purpose, so an overhaul of the park-and-ride system would be welcome.

Of course, the public transport infrastructure is also not fit for purpose. It does not help anybody from rural areas who needs to make it into the cities. I had a quick look yesterday at some of the pricing of public transport. A single train ticket costs £8, so that is £16 return. That is just not sustainable for someone who is going back and forward to hospital five times a week, whether they be a worker or a patient.

The review will, of course, get the stakeholders around the table to discuss all of those points. That is welcome. I absolutely support the review and the intent of what the Department is looking to do.

The Chairperson (Mr Gildernew): OK. Thank you.

**Ms Bradshaw:** My question is about the Minister's amendment. Did you get an indication of the timescale for that? What the Department proposes in the review is really welcome and would address a lot of my concerns about your Bill and the whole premise of charging for car parking. I am concerned, however, that, if we were to support the Minister's amendment, it might be like so many of the workforce reviews that take years and years to complete. How committed do you think the Department is to delivering it?

**Miss Reilly:** Thanks, Paula. That is one of our concerns as well: that there is no stated time frame. When we spoke to the Department this week, we said that that was one of the areas that we wanted to discuss and engage on. When the Department was at the Committee last week, again, there was no answer about a time frame, and I very much want to have an indication of that. That discussion is

ongoing. There will be some communication back and forth between the Department and me in the coming days. We absolutely want to see a start point for and an end point to the review. As you said, having the reviews dragging on for a long time would not be favourable to me.

**Ms Bradshaw:** Did you get any indication from the Department about the suggestion from, I think, one of the trade unions about hospital letters having a code for parking? It is a bit of a hybrid model of what you propose. Did you get any feedback from the Department on that?

**Miss Reilly:** There was no direct feedback on specifics. I think that, when the Department does the review, it will look at all possible models. When we were looking at Scotland and Wales and how they work their systems, there was talk of automated number plates and codes on the letters that are sent out. All of those options will be in the review, I hope. There was no precise indication, but those are the finer details that I would like to discuss with the Department. I think that the Committee wrote to other jurisdictions and found it quite hard to get information. A key piece of the jigsaw will be how other jurisdictions are rolling this out and looking at what we can do here.

Ms Bradshaw: Thank you.

**Mrs Erskine:** Hello, Aisling. Hello, Catherine. It is good to have you at the Committee to talk about this. I do not think that anybody on the Committee does not agree with the intention of the Bill. It is important that we look at the issue.

We have heard from trusts and the Department about the issue of how we square the circle of the shortfall of money — the budget aspect. How do you envisage trusts being able to maintain free parking facilities if they are unable to allocate money from other budget streams? Might that come at a cost to maintenance? We welcome the fact that the Department having a review is part of the amendment, but have you had any discussions with the Department about that?

**Miss Reilly:** Thank you, Deborah. We have not had those discussions on the nitty-gritty parts of the work, such as where the funding would come from. As mentioned previously at the Committee, hundreds of millions of pounds are going to agency staff. The £8-8 million cost that the Department mentioned last week would be just a drop in the ocean relative to that.

When the Department of Health allocates its budget, this issue needs to be seriously considered. There is a knock-on effect on staff retention. Charging is really hitting people hard in the pocket. The Department of Health has budget constraints, but so do people and workers. To be perfectly honest, we have not discussed the finer details of where the money would come from. Given the tens of millions of pounds that go to agency staff, I hope that we might be able to allocate some money to car parking. That would, in turn, have a knock-on effect on retaining the Health and Social Care (HSC) staff whom we already have.

**Mrs Erskine:** The car park and related infrastructure the South West Acute Hospital will be different from, for example, those at the Mater Hospital or the Ulster Hospital. Have you looked at whether a bespoke, sector- or site-specific approach would provide more added value?

**Miss Reilly:** No, we have not. Hospitals and different infrastructure will have different areas that they need to work within. Having a complete review of the situation in all five trusts will be really beneficial. Yes, trusts have different niches, and that will need to be taken into consideration. Again, I am willing to have that conversation with the Department as part of its review. I will jot down that point, and we will definitely take that back for discussion.

**Mrs Erskine:** Perfect. Thank you. Finally, we touched on the importance of climate change and making sure that we reduce emissions and encourage more sustainable modes of travel. Have you had any discussions with organisations outside the Department of Health, such as DFI, about whether free car parking would encourage that? Would ending car parking charges really help the environment or encourage sustainable travel?

**Miss Reilly:** To be perfectly honest, if free car parking were introduced tomorrow, it would not encourage anyone to use hospital car parks, other than those who need to go there. You are right to mention the environment. I keep going back to the review. I have mentioned climate change and sustainability to the Department. We want to encourage people to seek alternatives, if they are fit and able to do so. The Department has said that DFI will be a stakeholder, and it will look at how everyone

can work together to put systems in place that will benefit everyone and encourage people to use public transport where possible. I referred to looking at the price of public transport, and we might look at a possible reduction. At the minute, the public transport infrastructure is not suitable for everyone, but the Department indicated that DFI, along with other Departments, will be a stakeholder, and that will be talked through.

Mrs Erskine: Thank you.

**Mr Carroll:** I have a couple of points. Sorry, I did not hear your opening comments, Aisling, so I may have missed something that you said at the start. The fact that there is to be a review shows that the Department and Minister are under pressure on car parking charges. Fair play to you for introducing the Bill. Have you indicated whether you will support the Minister's amendment, or are you still considering that? What is your view on that amendment?

**Miss Reilly:** We have not seen the amendment. When we see it, we will determine our position. The Minister is in favour of the Bill and has signalled that he is supportive of its intentions. The fact that we are having the conversation and looking at actioning the review is positive. The last review was in 2012, and we are all of the opinion that a 10-year gap is far too long, especially when it comes to an issue such as parking for staff and patients. It is positive that the Department and the Minister have signalled that they welcome the intentions of the Bill and are willing to work with us. To be perfectly honest, however, we have not seen the amendment. Once we see the amendment, we will be able to take a position on it.

**Mr Carroll:** No problem. I appreciate that. For the record, I intend, probably, to oppose the amendment, but, like you, I will wait until I see the detail.

I have two other quick points. From memory, the argument from all the trusts — you touched on it with Deborah — is that people will park in hospitals for the craic because there is no cost. We represent the same constituency, and the Royal is the biggest hospital. I have no evidence and I take it that you have no evidence that people park in the Royal for the craic and then go to work in the city centre or elsewhere. Is that your experience, Aisling?

**Miss Reilly:** Yes, 100%, Gerry. We have no evidence to suggest that, as you describe it, people park in the hospital for the craic. As I said, I do not foresee anybody, if the Bill were to come into effect tomorrow, outside of the people who need to go to hospital parking there to make use of free parking. There is no evidence of it, and I am of the same opinion as you, Gerry.

Mr Carroll: Thanks. The trust said that there was no evidence of that during its presentation.

Finally, like you, I am an urban MLA. Rural people find it difficult to use public transport to go to hospitals. Even in an urban area like the west of the city, as you will know, there are obstacles. If you live in Mount Eagles, parts of Dunmurry or elsewhere and you are trying to get into work for 9.00 am by using public transport, there are obstacles. There are people who are unable to walk, and some have to walk long distances as well. People who are able to use public transport should do so, but it is not suitable, as you said, outside the hours of 9.00 am to 5.00 pm. You do not have to answer that; it is just a comment.

Miss Reilly: Gerry, again, you are 100% right. We have to encourage people who can use public transport to do so. If you can walk or cycle, use more sustainable methods to get to wherever you need to go, whether that be to hospital or anywhere else. That applies to any worker anywhere and wherever they need to go. I 100 % agree with you there, but there are issues for people in the likes of Mount Eagles and even further afield. I spoke to a family in Fermanagh who had to come to Belfast. There is no train or bus, and there is no sustainable way for them to make that journey daily, so a car is the only option. For people whose only option is a car, we cannot penalise them, and we cannot have an unfair tax. We cannot take the money out of their pockets. Hopefully, when the Bill is passed, it will put that money back into people's pockets.

The Chairperson (Mr Gildernew): I can certainly concur with that, as a rural rep. If we had public transport here, we would absolutely use it. It is an inequity in the sense that we not only have to have a car but families have to have multiple cars, because, when one person goes off to their job, that car is out of the picture. The lack of infrastructure around public transport in rural areas is absolutely harmful to all these ambitions and aims.

I want to bring Catherine in. I think that Catherine had been looking in at a slightly earlier point. Catherine, were you looking in there? Go ahead.

Ms Catherine Kelly (Sinn Féin): Yes. Thanks, Chair, and thanks to the Committee.

The intention of the Bill stands. Aisling, the party and I very much believe that this is an unfair additional tax on workers and raises a significant inequality for people from rural communities. We are open to working with the Department to get the Bill right, because it is important, and we are determined to get it through in this mandate, hopefully with an acceptable amendment from the Department.

In answer to Paula's question, we are open to discussion about a time-limited review, and we would like that time to be as short as possible. We want to get the Bill right, as I said. The Department signalled, in our discussions with it, its intention to work with the Department for Infrastructure and its colleagues in Scotland and Wales to see how they have made their Bills work. The intention of the Bill stands, Gerry, which is to deal with the inequalities that we have all identified and to take care of patients' and workers' needs.

The Chairperson (Mr Gildernew): Thank you, Catherine.

Mrs Cameron: Thank you, Aisling, for your time today on what is a really important subject. We all want to see changes in this area. We are all aware of the postcode lottery across what, let us face it, is a tiny place — Northern Ireland — and we would like parking policy to be fair and equal across the Province. I would also like to see more on the evidence and outworking of what they have done in Scotland, and perhaps the Committee could request that we have an evidence session on that. There are challenges in the outworkings of the Bill, Aisling, and, certainly in Belfast, there are particular problems with capacity. I welcome the Department's proposed amendment to review the whole scenario. That is good news.

I will ask you some questions, Aisling. What about patients who have large pieces of medical equipment so may need full and proper access to parking spaces? Are there any bespoke arrangements for those people, who may not be fit or able to use public transport, so that there is not a free-for-all for spaces at hospitals? It is important that those who really need close access to premises get it.

**Miss Reilly:** When I spoke to the Department during the week, it signalled that similar processes are in place in other jurisdictions. The Department does not know the details of those processes, but — you referenced this, and we will reference it — we would really love to get in touch with those other jurisdictions to see how they cope and how they manage those things with patients who have bigger pieces of medical equipment and need to get as close to the hospital as possible. We really want to work with the Department to iron out some of those things. We do not want to put any barriers in place. We want to make legislation that is workable for people; we do not want to make people's lives harder.

Speaking with other jurisdictions about how they cope and how they work around this stuff and deal with the needs of the patients will be key. The needs of the patients and how they can get as close as possible to the hospital are also high on the priority list. The key piece is to speak with those other jurisdictions in order to see how they rolled out their systems.

**Mrs Cameron:** Thank you. Did you consider placing a statutory requirement on the Department to bring forward a uniform policy that all trusts should abide by?

**Miss Reilly:** That is not a specific point that we have brought to the Department, but, again, I am happy to jot it down and bring it to it, Pam. I will absolutely do that. I am due to meet the Department again at the end of this week or the beginning of next week, and I will certainly raise that. I know that the amendment to the Bill that the Department is seeking to table will include a requirement to undertake a full review of all five trusts.

**Mrs Cameron:** OK, thank you. This is my final question, Aisling. I am on record saying many times in the Committee how close we are to the end of the mandate and how we have a duty to properly scrutinise all legislation. I have every sympathy for you, as I am also the sponsor of a private Member's Bill that, I hope, will get through. It is important, however, that we take the proper time to scrutinise legislation and to ensure that there are no unintended consequences as a result of rushing

the legislation. I just want to put that on the record. We need to hear more so that we can ensure that there are no unintended consequences, which would not be good for the service users in particular. Thank you for your time on this.

This is my final question. Is the Bill a little premature, given that the Department is talking about reviewing car parking anyway? Would it not be appropriate to have that review before we go ahead with this legislation?

**Miss Reilly:** I do not think that the review would have come about had it not been for the legislation coming forward. As I said, the last review was in 2012, and it has taken almost 10 years for the next review to be looked at. The review is in the proposed amendment, but there would be a timescale for it. I am absolutely working towards getting the legislation through in this mandate, and I will absolutely work with the Department on the time frame of the review. As you said, we do not want to rush legislation through; we want good legislation that works for people. We want to see a time frame in the amendment, but we want a time frame that is suitable and that works for people.

At the end of the day, people are hit heavily in their pockets by parking charges. We need to keep coming back to the fact that people fork out hundreds of pounds from their wages on a monthly basis. Patients may have to pay up to £500 to go to hospital every day, sometimes multiple times, for treatment. While we want to make legislation that works, we also have to keep bringing it back to the people it will really affect and whose pockets the charges really hit. At the end of the day, although we want legislation that is good and that works, we also want to make sure that people really see the benefit of it.

**Mrs Cameron:** Thanks, Aisling. I have one final thought. Have you had any discussions with the community transport sector about what it may have to contribute? If it were given appropriate funding, it may well be able to help us to look after the environment and ease the pressure on the parking issue.

**Miss Reilly:** We have not, but the Department has indicated that, again under the review, that is one of the key stakeholders that it will bring around the table to see how the Bill will work. There is talk of bringing DFI, public transport and other key stakeholders around the table. One of the main issues is the park-and-ride system and whether it will be fit for purpose. I have not spoken to the sector, but I will jot that down; it is something that I am open to. I know that the Department is bringing those key stakeholders around the table and that that will be part of the review.

The Chairperson (Mr Gildernew): We have had significant evidence sessions already on the Bill. It is clear that there are inherent inequities, challenges and unfairnesses in hospital parking. I welcome the approach that the Department is now taking to the Bill by working with you, the Bill sponsor. The Minister has said directly that he is looking to work with you on the mechanics and the individual pieces that will make a good Bill. That is welcome and good practice, and it is the basis on which we should move forward.

The idea of putting in extra sessions for the sake of additional time would badly let down all the people we have heard about who pay £60 a week in the Belfast Trust. Macmillan has identified that some people are not turning up for appointments. That is a serious concern. There are also issues for staff with the costs of public transport, which you identified, Aisling. It is good practice for a Bill sponsor and a Department to work closely together. That seems to be the case here. If the Department is willing and prepared to provide an amendment that satisfies it, the work is certainly something that we should continue with at pace in order to put in place legislation that helps people.

**Mr Chambers:** The Bill is certainly well intentioned. It is easy to support the thinking behind it, particularly that on staff having to pay to park their car at their place of work. I certainly accept that. I also agree with Pam's comments. We are coming towards the end of the mandate. Everybody — I mean the Departments and Members — wants their legislation to be pushed through by the end of the mandate. There is a rush to get as much through as we can. I am sure that all of us will work hard to get as much of that legislation as possible through before the end of the mandate. As Pam said, we have to be careful that, in that rush, we do not allow little bits of bad legislation to slip through because we have not scrutinised things as closely as we could or should have done. We also need to make sure that we identify unintended consequences in our rush to get legislation on the books.

The sponsor said that the Department is working closely with her. I hope that that is reciprocated and that, equally, the sponsor of the Bill works with the Department to identify and understand the problems that the legislation may initially present for trusts and the Department. We have no detailed

information whatsoever on how such measures work in other jurisdictions. We have heard some talk about that, but we have not really seen the detail, and that is important so that we know how it works in other jurisdictions.

In that spirit, I note that the Bill states that the scheme will come into action six months after the legislation receives Royal Assent. I mentioned that at the last meeting. If six months is felt to be a tight turnaround time for the Department of Health and the trusts to put in place all the logistics that are required, would the Bill sponsor view favourably an amendment to add a short extension to those six months? Considering that we are still in the midst of a pandemic, maybe nine months would give the trusts more time to do that. Would the sponsor consider that sympathetically?

The other thing that you talked about and that Gerry mentioned is that we have absolutely no evidence, we are told, of any abuses in the car parks at the moment, but we cannot with any certainty say that there will not be any abuses under the new system. Time will tell. Neither you nor the trusts — in fact, nobody can do this — can provide evidence that there will or will not be abuses until we see the system in operation. We know what human nature is like, and, if there is a trick or a stroke to be pulled, there are people who will willingly pull it. Maybe there are other ways of dealing with that, but is there or should there be something in the Bill to give trusts some sort of redress against anybody found to be abusing the system? Could there be a system whereby those people are fined or banned from the car park or whatever? Does that need to be in the Bill, or do the trusts already have such a thing in their by-laws or whatever they have to allow them to deal with anybody who abuses free car parking?

Miss Reilly: Before Catherine comes in. I want to touch on a couple of things that Alan said.

Yes, absolutely, working with the Department is reciprocated. I have said to the Department that it is an open door. We want to go back and forth. You said that we do not want to rush or push any legislation through, but I do not feel that that is what we are doing here. There have been evidence sessions, and the Bill does not divide opinion. Everybody is of the same opinion, which is that car parking charges are an unfair tax on workers and patients. We know that, and the Bill does not divide opinion on it. It is really positive and welcome that the Department and the Minister are willing to understand the Bill's intentions and what we are trying to get out of it and that the Minister is willing to work with me on the Bill.

You mentioned that we do not know how free car parking works in other jurisdictions, and you are absolutely right. That is why we are trying to get information from those other jurisdictions. Although we do not know exactly how it works right now, it is important to know and to say that it is working in other places. As I said, we are not reinventing the wheel. It is being done in Scotland and Wales, and it is going through in England. They have much bigger cities with bigger hospitals than we have here. Yes, I absolutely agree that we need to get the information on how it works there, but it is important to know that it is working. I agree with you, Alan, that we need to get the finer details.

Although we do not have any evidence of abuse of car parking, I do not know of or foresee anybody going to the hospital to park their car, have a cup of coffee and nip into town. At the minute, car parking in the town is cheaper than it is at some of the hospitals. I do not foresee that anybody will park in the Royal and then go somewhere else. There are people travelling from Fermanagh to Belfast. I do not foresee that happening, and there is no evidence to suggest that it does, nor is there evidence to suggest that there was any abuse of car parking when charges were scrapped briefly during the pandemic. Do you want to come in on that, Catherine?

**Ms Kelly:** I will be brief. The amendment is still under consideration. We are open to working with the Department. The Bill sponsor and the Department have the same objective, which is that we want to address the inequality and the unfair tax on our Health and Social Care workers. I think that we all share that objective. The amendment is still under consideration, and we are open to working with the Department.

You asked about fines. In my reading on this — I am not sure whether it was in Scotland or Wales; I cannot recall the exact details — I found that there is a system of fines for such abuse. The fines are quite high, and they are used to offset the cost of running the car parks. Practical things are being done in other jurisdictions. Of course, the review that the Department proposes would investigate all that. I hope that that answers your questions, Alan.

**Mr Chambers:** We do not have any information about how the system works in other areas, and you have told us that there are fines in other areas. It would be interesting to see how they physically apply the logistics, but it may also be worth looking at what legislation they have so that, if there was something that we had missed, like fines or whatever, we could incorporate that into our legislation to make it that little bit stronger. Please do not get me wrong, Aisling: I am not trying to score points or being facetious when I say that I admire your faith in human nature when you say that people will not seek to abuse the situation. That is not my experience of society sometimes.

I asked whether you would be sympathetic if the Department or the trusts asked you to give them nine months or whatever after Royal Assent rather than the six months that is in the Bill. I am not sure that you answered that. Would you be amenable to that, or would you find it difficult to live with?

**Miss Reilly:** I am sorry, Alan. I had that written down, and I wanted to come back to it. We would be open to whatever length that period would be. The grey area at the moment is that we do not know how long the review will take, so we need to iron that out first. I would be open to chatting with the Department about the six-month time frame.

Mr Chambers: Thank you.

Miss Reilly: Thanks, Alan.

The Chairperson (Mr Gildernew): It is important to remind members that we have asked the Research and Information Service (RalSe) to do a piece of work on the Scottish and Welsh models. We have also heard evidence from others about some of their solutions. Again, the matter boils down to control and cost. The questions are these: how do you control parking spaces; who should do that; and how do you pay for it? To me, the Bill addresses how we pay for it. The Department's review is looking, on a site-by-site basis, at how to provide the controls. There is, clearly, a need to have some control over it, but the question is whether that should prevent you moving to address the unfairness of staff paying for the cost of it.

I will just check with the Committee Clerk that we are waiting for that briefing document to go back. We could suggest an additional session in which RalSe could brief us on the Scottish and Welsh models. I will check that with the Committee Clerk in a moment.

The other thing to say is that, in some ways, whether the Bill gets through the mandate is outwith the Committee's control. Our job is to do our scrutiny, take the relevant evidence and apply it. We have largely done that. If it is useful to have an additional session with RalSe, either on Tuesday or at next Thursday's meeting, so be it, but I think that there is an overall mood in the Committee that we should keep progressing the Bill and allow the Department and the Bill sponsor to do their work. Members are at liberty, when the Bill goes back to the Assembly, to table their own amendments, raise their concerns and amend the Bill. That is all part of the process, and whether the Bill gets through before the end of the mandate will all depend on that.

As a Committee, we have a target of reporting on the Bill. We have taken a significant amount of evidence, and we can take a bit more if necessary, but I would like to keep us on track if we can. Those are my thoughts on it.

Aisling, do you have further comments on any of that? Sorry, Aisling, before you come in, I want to check with the Clerk about the research paper on Scotland and Wales. Clerk, can we arrange a briefing on that for the Committee?

**The Committee Clerk:** We certainly can, Chair. We can look at either next Tuesday or next Thursday, depending on when RalSe gets that paper completed.

**The Chairperson (Mr Gildernew):** Aisling or Catherine, do you want to make any final remarks? I do not have any other members indicating that they want to speak.

**Miss Reilly:** I do not have any final remarks other than to thank the Committee for its scrutiny up to this point. We will certainly take back some of the points that you raised today and have a conversation and look at some of those points. I take your points on board. Thank you all for the scrutiny over the past number of weeks. Go raibh míle maith agaibh.

**The Chairperson (Mr Gildernew):** Likewise, Aisling and Catherine, we thank you for coming back and forward to the Committee and for answering Committee members' questions. We wish you all the very best in the time ahead. We can let you go at that. Thank you for today. Go raibh míle maith agaibh.

Miss Reilly: Thanks, Chair.