
Committee Stage: Friday 23 July 2021

Health and Care Bill

(Amendment Paper)

This document lists all amendments tabled to the Health and Care Bill. Any withdrawn amendments are listed at the end of the document. The amendments are arranged in the order in which it is expected they will be decided.

Edward Argar

To move, That the Bill be considered in the following order, namely, Clause 1, Schedule 1, Clauses 2 to 13, Schedule 2, Clauses 14 to 16, Schedule 3, Clauses 17 to 25, Schedule 4, Clause 26, Schedule 5, Clauses 27 to 38, Schedule 6, Clauses 39 to 41, Schedule 7, Clauses 42 to 59, Schedule 8, Clauses 60 and 61, Schedule 9, Clauses 62 to 66, Schedule 10, Clause 67, Schedule 11, Clauses 68 to 72, Schedule 12, Clauses 73 to 93, Schedule 13, Clauses 94 to 106, Schedule 14, Clauses 107 to 118, Schedule 15, Clauses 119 to 125, Schedule 16, Clauses 126 to 135, new Clauses, new Schedules, remaining proceedings on the Bill.

Edward Argar

That, subject to the discretion of the Chair, any written evidence received by the Committee shall be reported to the House for publication.

Edward Argar

That, at this and any subsequent meeting at which oral evidence is to be heard, the Committee shall sit in private until the witnesses are admitted.

Anne Marie Morris 1

Schedule 2, page 119, line 24, leave out "three" and insert "five"

Member's explanatory statement

This amendment would require Integrated Care Boards to have at least 5 other members as well as the chair and chief executive.

Anne Marie Morris 6

Schedule 2, page 120, line 26, at end insert—

- "(d) one member nominated by the mental health trust or trusts that provide mental health services for the purposes of the health service within the Integrated Care Board's area; and
- (e) one member nominated jointly by the NHS Trust or Trusts and local authority or local authorities that provide social care services within the Integrated Care Board's area."

Member's explanatory statement

This amendment would require Integrated Care Boards to have members representing mental health trusts and social care providers.

Anne Marie Morris 4

Clause 19, page 17, leave out from beginning of line 7 to end of line 9 and insert—

- "(a) conduct research on matters relevant to the health service,
- (b) resource research on matters relevant to the health service,
- (c) promote the use in the health service of evidence obtained from research, and
- (d) collaborate with the Academic Health Science Network within the integrated care board's area."

Member's explanatory statement

This amendment would require integrated care boards to increase their research function and collaborate with Academic Health Science Networks.

Anne Marie Morris

2

Clause 33, page 40, line 6, leave out “at least once every five years” and insert “annually”

Member’s explanatory statement

This amendment would require the Secretary of State to publish a report on assessing and meeting the workforce need annually.

Anne Marie Morris

3

Clause 33, page 40, line 8, at end insert—

“(1A) The report under this section must set out how workforce integration has been achieved between physical health, mental health and social care.”

Member’s explanatory statement

This amendment would require the Secretary of State to set out how integrated working has been achieved.

Anne Marie Morris

5

Clause 85, page 76, line 34, at end insert—

“(1A) The appropriate authority must exercise the power in subsection (1) to make provision for the establishment and operation of an information system relating to every licensed human medicine.”

Member’s explanatory statement

This amendment would ensure that all licensed human medicines are considered.

Mr Richard Holden
 Jeremy Hunt
 Meg Hillier
 Jackie Doyle-Price
 Sarah Olney
 Dehenna Davison
 Simon Fell
 Lee Anderson
 Tracey Crouch
 Christian Wakeford
 James Daly
 Mr Robert Goodwill
 Paula Barker

Paul Howell
 Siobhan Baillie
 Liz Saville Roberts
 Brendan Clarke-Smith
 Duncan Baker
 Sarah Green
 Caroline Lucas

Alexander Stafford
 Laura Farris
 Stephen Metcalfe
 Mr Steve Baker
 Robert Largan
 Sir Peter Bottomley
 Fiona Bruce

NC1

To move the following Clause—

“Prohibition of virginity testing

- (1) A person is guilty of an offence if they attempt to establish that another person is a virgin by making physical contact with their genitalia.
- (2) A person is guilty of an offence if they provide another person with a product intended for the purpose, or purported purpose, of establishing whether another person is a virgin.
- (3) A person is guilty of an offence if they aid, abet, counsel or procure a person to establish that another person is a virgin by making physical contact with their genitalia.
- (4) No offence is committed by an approved person who performs—
 - (a) a surgical operation on a person which is necessary for their physical or mental health; or
 - (b) a surgical operation on a female who is in any stage of labour, or has just given birth, for purposes connected with the labour or birth.
- (5) The following are approved persons—
 - (a) in relation to an operation falling within subsection (4)(a), a registered medical practitioner; and
 - (b) in relation to an operation falling within subsection (5)(b), a registered medical practitioner, a registered midwife or a person undergoing a course of training with a view to becoming such a practitioner or midwife.
- (6) There is also no offence committed by a person who—
 - (a) performs a surgical operation falling within subsection (4)(a) or (b) outside the United Kingdom; and
 - (b) in relation to such an operation exercises functions corresponding to those of an approved person.
- (7) For the purpose of determining whether an operation is necessary for the mental health of a girl it is immaterial whether she or any other person believes that the operation is required as a matter of custom or ritual.
- (8) This section applies to any act done outside the United Kingdom by a United Kingdom national or resident.

- (9) A person who is guilty of an offence under this section is liable, on summary conviction, to imprisonment for a term not exceeding 12 months, to a fine, or to both.
- (10) The court must refer the case of any person guilty of an offence under this section who is subject to statutory professional regulation for investigation by the relevant regulator.”

Mr Richard Holden
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NC2

To move the following Clause—

“Prohibition of hymenoplasty

- (1) A person is guilty of an offence if they undertake a surgical procedure for the purpose of re-attaching membrane tissue, creating scar tissue or otherwise attempting to re-create the hymen in the vagina of a patient.
- (2) A person is guilty of an offence if they advertise the service of hymenoplasty or any service that purports to “re-virginise” or otherwise re-create or re-attach the hymen of a patient by way of surgical procedure.
- (3) A person is guilty of an offence if they aid, abet, counsel or procure a person to undertake a surgical procedure for the purpose of re-attaching membrane tissue, creating scar tissue or otherwise attempting to or re-creating the hymen in the vagina of a patient.
- (4) This section applies to any act done outside the United Kingdom by a United Kingdom national or resident.
- (5) A person who is guilty of an offence under this section is liable, on conviction, to imprisonment for a term not exceeding 5 years.
- (6) The court must refer the case of any person guilty of an offence under this section who is subject to statutory professional regulation for investigation by the relevant regulator.”

Anne Marie Morris

NC3

To move the following Clause—

“Annual parity of esteem report: spending on mental health and mental illness

Within six weeks of the end of each financial year, the Secretary of State must lay before each House of Parliament a report on the ways in which the allotment made to NHS England for that financial year contributed to the promotion in England of a comprehensive health service designed to secure improvement—

- (a) in the mental health of the people of England, and
- (b) in the prevention, diagnosis and treatment of mental illness.”

Member’s explanatory statement

This new clause would require the Secretary of State for Health and Social Care to make an annual statement on how the funding received by mental health services that year from the overall annual allotment has contributed to the improvement of mental health and the prevention, diagnosis and treatment of mental illness.

Anne Marie Morris

NC4

To move the following Clause—

“Annual parity of workforce training report

- (1) The Secretary of State must, annually, publish a report setting out what steps have been taken to integrate and standardise training programmes across health and social care settings.
- (2) NHS England and Health Education England must assist in the preparation of a report under this section, if requested to do so by the Secretary of State.”

Member’s explanatory statement

This new clause would require the Secretary of State for Health and Social Care to make an annual statement on what progress has been made on integrating training across the health and social care workforce.

Anne Marie Morris

NC5

To move the following Clause—

“Support provided by the NHS to victims of domestic abuse

- (1) Each Integrated Care Board must—
 - (a) assess, or make arrangements for the assessment of, the need for support for victims of domestic abuse using their services;
 - (b) prepare and publish a strategy for the provision of such support in its area;
 - (c) monitor and evaluate the effectiveness of the strategy;

- (d) designate a domestic abuse and sexual violence lead; and
 - (e) publish an annual report on how it has discharged its duties relating to the provision of services to victims of domestic violence under the Care Act 2014.
- (2) An Integrated Care Board that publishes a strategy under this section must, in carrying out its functions, give effect to the strategy.
- (3) Before publishing a strategy under this section, an Integrated Care Board must consult—
 - (a) any local authority for an area within the relevant Integrated Care Board's area;
 - (b) the domestic abuse local partnership board appointed by the local authority for an area within the relevant clinical commissioning group's area under section 58 of the Domestic Abuse Act 2021; and
 - (c) such other persons as the relevant local authority considers appropriate.
- (4) For the purposes of subsection (4), "local authority" means—
 - (a) a county council or district council in England; or
 - (b) a London borough council.
- (5) An Integrated Care Board that publishes a strategy under this section—
 - (a) must keep the strategy under review;
 - (b) may alter or replace the strategy; and
 - (c) must publish any altered or replacement strategy.
- (6) The Secretary of State may by regulations make provision about the preparation and publication of strategies under this section.
- (7) The power to make regulations under subsection (7) may, in particular, be exercised to make provision about—
 - (a) the procedure to be followed by an Integrated Care Board in preparing a strategy;
 - (b) matters to which an Integrated Care Board must have regard in preparing a strategy;
 - (c) how an Integrated Care Board must publish a strategy;
 - (d) the date by which an Integrated Care Board must first publish a strategy; and
 - (e) the frequency with which an Integrated Care Board must review its strategy or any effect of the strategy on the provision of other provision in its area.

- (8) Before making regulations under this section, the Secretary of State must consult—
- (a) all Integrated Care Boards; and
 - (b) such other persons as the Secretary of State considers appropriate.”

Member’s explanatory statement

This new clause would require Integrated Care Boards to publish a strategy for the provision of support for victims of domestic abuse using their services and designate a domestic abuse and sexual violence lead.

Anne Marie Morris

NC6

To move the following Clause—

“Report on assessing and meeting parity of outcomes

- (1) The Secretary of State must publish an annual report describing the system in place for assessing and achieving parity of esteem between care types.
- (2) In this section “care types” means—
 - (a) care for physical health;
 - (b) care for mental health; and
 - (c) social care.
- (3) The report must contain an assessment of how parity of esteem between care types has been pursued in the measurement and tackling of—
 - (a) excess mortality;
 - (b) burden of disease;
 - (c) number of patients with a diagnosis who are receiving treatment;
 - (d) waiting times;
 - (e) readmission rates; and
 - (f) any other matters the Secretary of State considers appropriate.”

Member’s explanatory statement

This new clause would require the Secretary of State to set out how parity of esteem has been achieved between physical health, mental health and social care.

Order of the House

[14 July 2021]

That the following provisions shall apply to the Health and Care Bill:

Committal

1. The Bill shall be committed to a Public Bill Committee.

Proceedings in Public Bill Committee

2. Proceedings in the Public Bill Committee shall (so far as not previously concluded) be brought to a conclusion on Tuesday 2 November 2021.
3. The Public Bill Committee shall have leave to sit twice on the first day on which it meets.

Proceedings on Consideration and Third Reading

4. Proceedings on Consideration shall (so far as not previously concluded) be brought to a conclusion one hour before the moment of interruption on the day on which proceedings on Consideration are commenced.
5. Proceedings on Third Reading shall (so far as not previously concluded) be brought to a conclusion at the moment of interruption on that day.
6. Standing Order No. 83B (Programming committees) shall not apply to proceedings on Consideration and Third Reading.

Other proceedings

7. Any other proceedings on the Bill may be programmed.
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