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**Committee Stage: Tuesday 2 November 2021**

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# Health and Care Bill

## (Committee Stage Decisions)

This document sets out the fate of each clause, schedule, amendment and new clause considered at committee stage. A glossary with key terms can be found at the end of this document.

First to Twenty-second Sitings

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### *FIRST AND SECOND SITTINGS*

Edward Argar

**Agreed to**

That—

1. the Committee shall (in addition to its first meeting at 9.25 am on Tuesday 7 September) meet—
  - (a) at 2.00 pm on Tuesday 7 September;
  - (b) at 11.30 am and 2.00 pm on Thursday 9 September;
  - (c) at 9.25 am and 2.00 pm on Tuesday 14 September;
  - (d) at 11.30 am and 2.00 pm on Thursday 16 September;
  - (e) at 9.25 am and 2.00 pm on Tuesday 21 September;
  - (f) at 11.30 am and 2.00 pm on Thursday 23 September;
  - (g) at 9.25 am and 2.00 pm on Tuesday 19 October;
  - (h) at 11.30 am and 2.00 pm on Thursday 21 October;
  - (i) at 9.25 am and 2.00 pm on Tuesday 26 October;
  - (j) at 9.25 am and 2.00 pm on Wednesday 27 October;
  - (k) at 11.30 am and 2.00 pm on Thursday 28 October;
  - (l) at 9.25 am and 2.00 pm on Tuesday 2 November;
2. the Committee shall hear oral evidence in accordance with the following Table:

<b>Date</b>	<b>Time</b>	<b>Witness</b>
Tuesday 7 September	Until no later than 10.30 am	NHS Employers; Health Education England
Tuesday 7 September	Until no later than 11.25 am	NHS England and NHS Improvement
Tuesday 7 September	Until no later than 2.30 pm	NHSX
Tuesday 7 September	Until no later than 3.15 pm	NHS Providers; NHS Confederation

<b>Date</b>	<b>Time</b>	<b>Witness</b>
Tuesday 7 September	Until no later than 4.00 pm	Care Quality Commission; Healthcare Safety Investigation Branch
Tuesday 7 September	Until no later than 4.45 pm	Local Government Association; Faculty of Public Health
Tuesday 7 September	Until no later than 5.15 pm	Welsh Government
Thursday 9 September	Until no later than 12.15 pm	UNISON; British Medical Association
Thursday 9 September	Until no later than 1.00 pm	Royal College of General Practitioners; Royal College of Nursing; Academy of Medical Royal Colleges
Thursday 9 September	Until no later than 2.45 pm	The King's Fund; Nuffield Trust
Thursday 9 September	Until no later than 3.15 pm	Gloucestershire Integrated Care System; NHS Confederation's ICS Network Advisorate
Thursday 9 September	Until no later than 4.00 pm	Centre for Governance and Scrutiny; Centre for Mental Health
Thursday 9 September	Until no later than 4.30 pm	Healthwatch England
Thursday 9 September	Until no later than 5.15 pm	Association of Directors of Adult Social Services; British Association of Social Workers;

3. proceedings on consideration of the Bill in Committee shall be taken in the following order: 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; and
4. the proceedings shall (so far as not previously concluded) be brought to a conclusion at 6.00 pm on Tuesday 2 November.

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Edward Argar

**Agreed to**

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

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Edward Argar

**Agreed to**

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.

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**The following Witnesses gave oral evidence:**

Danny Mortimer, Chief Executive, NHS Employers, and Dr Navina Evans CBE, Chief Executive, Health Education England

Amanda Pritchard, Chief Executive, NHS England, and Mark Cubbon, Chief Operating Officer, NHS England & NHS Improvement

Simon Madden, Director for Data Policy, NHSX

Saffron Cordery, Deputy Chief Executive, NHS Providers, and Matthew Taylor, Chief Executive, NHS Confederation

Ian Trenholm, Chief Executive, Care Quality Commission, and Keith Conradi, Chief Investigator, Healthcare Safety Investigation Branch

Cllr James Jamieson, Chair, Local Government Association, and Professor Maggie Rae, President, Faculty of Public Health

Eluned Morgan, Minister for Health and Social Services, Lyn Summers, Head of Health and Social Services Central Legislation Team, and Mari Williams, Senior Lawyer (Health), Welsh Government.

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*THIRD AND FOURTH SITTINGS*

**The following Witnesses gave oral evidence:**

Sara Gorton, Head of Health, UNISON; Dr Chaand Nagpaul CBE, Chair of Council, British Medical Association

Professor Martin Marshall, Chair of Council, Royal College of General Practitioners; Pat Cullen, General Secretary & Chief Executive, Royal College of Nursing; Professor Helen Stokes-Lampard, Chair, Academy of Medical Royal Colleges

Richard Murray, Chief Executive, and Nick Timmins, Senior Fellow, Policy, The King's Fund; Nigel Edwards, Chief Executive, Nuffield Trust

Dame Gill Morgan, Chair, Gloucestershire Integrated Care System and NHS Confederation's ICS Network Advisorate; Louise Patten, ICS Network Lead, NHS Confederation's ICS Network Advisorate

Ed Hammond, Deputy Chief Executive, Centre for Governance and Scrutiny; Andy Bell, Deputy Chief Executive, Centre for Mental Health

Sir Robert Francis QC, Chair, Healthwatch England

Stephen Chandler, President, Association of Directors of Adult Social Services (ADASS); Gerry Nosowska, Chair, British Association of Social Workers

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*FIFTH AND SIXTH SITTINGS*

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Justin Madders

**Withdrawn after debate 18**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

Margaret Greenwood

Clause 1, page 1, line 5, at end insert—

“(1A) The Board of NHS England shall be made up of—

- (a) a Chair appointed by the Secretary of State,
- (b) five other members so appointed of which—
  - (i) one shall be appointed to represent Directors of Public Health,
  - (ii) one shall be appointed to represent the Local Government Association,
  - (iii) one shall be appointed to represent the interest of patients,
  - (iv) one shall be appointed to represent the staff employed in the NHS, and
  - (v) one shall be appointed to represent the Integrated Care Partnership.
- (c) one further member shall be appointed by the Secretary of State after being recommended by the Health Committee as a person with appropriate knowledge and experience
- (d) executive members as set out in Schedule 1 of the Health and Social Care Act 2012.

(1B) In making the appointments in (1A) (a) and (b) above the Secretary of State must have due regard to—

- (a) the need to ensure diversity and equality of opportunity and must publish a list of at least 5 persons considered for each appointment and the reasons why the particular individual appointment was made, and
- (b) that no person who could be perceived to have a conflict of interest by virtue of their current or recent employment or investment holding in any organisation with any role in the

delivery of services to the NHS may be considered for appointment.”

*Clause agreed to.*

*Schedule 1 agreed to.*

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Justin Madders	<b>Withdrawn after debate</b>	<b>36</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Margaret Greenwood		

Clause 2, page 1, line 9, at end insert—

“(1A) In subsection (1), leave out “it” and insert “the Secretary of State”.”

*Clause agreed to.*

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Justin Madders	<b>Negatived on division</b>	<b>19</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		

Clause 3, page 2, line 12, leave out paragraph (e) and insert—

“(e) after subsection (6) insert—

(6A) The Secretary of State may revise the mandate should urgent or other unforeseen circumstances arise.

(6B) If the Secretary of State revises the mandate, the Secretary of State must publish and lay before Parliament the mandate as revised with a written explanation of the urgent or other unforeseen circumstances that justify the revision and an impact assessment of the proposed change.”

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Justin Madders	<b>Not called</b>	<b>20</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		

Clause 3, page 2, line 30, at end insert—

“(6) No mandate may be laid before Parliament unless the Secretary of State has supplied a statement on how the mandate will be funded.”

*Clause agreed to.*

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Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Jonathan Ashworth	<b>Negated on division</b>	<b>21</b>
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Clause 4, page 3, line 5, at end insert—  
“(d) health inequalities.”

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Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Jonathan Ashworth Margaret Greenwood	<b>Not called</b>	<b>22</b>
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Clause 4, page 3, line 5, at end insert—

“(1A) In making a decision about the exercise of its functions, the health and well-being of the people of England must be NHS England’s primary consideration.”

*Clause agreed to.*

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Margaret Greenwood	<b>Not selected</b>	<b>73</b>
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Clause 6, page 3, line 38, leave out “person” and insert “relevant public body”

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Margaret Greenwood	<b>Not selected</b>	<b>74</b>
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Clause 6, page 3, line 40, leave out “person” and insert “public body”

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Margaret Greenwood	<b>Not selected</b>	<b>75</b>
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Clause 6, page 4, line 2, after “employees”, insert “, within their terms and conditions of employment,”

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Margaret Greenwood **Not selected** 76

Clause 6, page 4, line 9, at end insert—

“(5) In subsection 1(a) “relevant public body” means a public authority listed under the title “Health, social care and social security” in Part 1 of Schedule 19 to the Equality Act 2010.”

*Clause agreed to.*

*Clauses 7 to 12 agreed to.*

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Justin Madders **Not selected** 92  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

★ Clause 13, page 8, line 19, leave out from beginning to end of line 20 and insert—

“(3) The area for which an integrated care board is established—

- (a) must not coincide or overlap with the area of any other integrated care board,
- (b) must not be such that it fails to include the entire area of any local authority,
- (c) must be agreed by all local authorities within the area for which the integrated care board is established, and
- (d) must be approved by resolution of each House of Parliament before an order may be made under subsection (2).”

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Justin Madders **Withdrawn after debate** 49  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

Clause 13, page 8, line 34, after “board”, insert “NHS trust, NHS foundation trust, trade union, patient representatives and local authority”.

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Edward Argar **Agreed to** 10

Clause 13, page 9, line 44, leave out from beginning to end of line 12 on page 10 and insert—

“(1) NHS England may, in connection with the abolition of a clinical commissioning group under section 14Z27, make a scheme for the

transfer of the group's property, rights or liabilities to NHS England or an integrated care board.

- (2) NHS England may, in connection with the establishment of an integrated care board, make a scheme for the transfer of property, rights or liabilities to the board from—
- (a) NHS England,
  - (b) an NHS trust established under section 25,
  - (c) an NHS foundation trust, or
  - (d) a Special Health Authority established under section 28.
- (2A) NHS England may, in connection with the variation of the constitution of an integrated care board or the abolition of an integrated care board, make a scheme for the transfer of the board's property, rights or liabilities to NHS England or an integrated care board.
- (2B) The reference in subsection (2A) to the variation of the constitution of an integrated care board is to its variation by order under section 14Z25 or under provision included in its constitution by virtue of paragraph 14 of Schedule 1B."

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Edward Argar **Agreed to** **11**

Clause 13, page 10, line 13, after "(1)" insert "or (2A)"

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Justin Madders **Withdrawn after debate** **38**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 13, page 11, line 10, at end insert—

*"Accountability*

**14Z28A Reporting: duties on integrated care boards and the Secretary of State**

- (1) Integrated care boards must report annually to the Secretary of State on their actions and policies and the outcomes for patients of the services they commission.
- (2) The Secretary of State must prepare and publish a report each year on the actions and policies of integrated care boards and the outcomes for patients of the services they commission and must lay a copy of the report before Parliament.
- (3) A Minister of the Crown must, not later than one month after the report has been laid before Parliament, make a motion in the House of Commons in relation to the report."



*Clause, as amended, agreed to.*

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Justin Madders **Withdrawn after debate** 48  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 2, page 119, line 18, at end insert—

“(c) the process by which any proposed changes to the policies of the clinical commissioning groups within the area for which the integrated care board is established will be consulted upon and agreed.”

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Anne Marie Morris **Not selected** 1  
 Schedule 2, page 119, line 24, leave out “three” and insert “five”

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Justin Madders **Negated on division** 31  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 2, page 119, line 28, leave out from “for” to end of line 29 and insert “an initial chair to be appointed by NHS England, with the approval of the Secretary of State, for a period of no more than 2 years and for subsequent chairs to be elected by the voters in the area for which the integrated care board is established in accordance with regulations made by the Secretary of State for that purpose”

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Justin Madders **Negated on division** 50  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 2, page 119, line 29, leave out “, with the approval of the Secretary of State”.

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Justin Madders **Not called** 51  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

Schedule 2, page 119, line 29, at end insert—

“4A The constitution must provide for all members of the integrated care board to be consulted, and for any views expressed to be taken into account, before a chair is appointed.”

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Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Jonathan Ashworth Margaret Greenwood	<b>Not called</b>	<b>52</b>
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Schedule 2, page 120, line 2, at end insert—

“(1A) The constitution must provide for all members of the integrated care board and of the integrated care partnership to be consulted, and for any views expressed to be taken into account, before a chief executive is appointed.”

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Anne Marie Morris	<b>Not selected</b>	<b>6</b>
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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.”

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Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Jonathan Ashworth Dr Philippa Whitford	<b>Negatived on division</b>	<b>32</b>
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Schedule 2, page 120, line 26, at end insert—

- “(d) at least one member nominated by the mental health trust or trusts that provide mental health services within the integrated care board’s area;
- (e) at least one member nominated by the Directors of Public Health that serve each local authority within the integrated care board’s area;
- (f) at least one member nominated jointly by any NHS trust, NHS foundation trust and local authority that provides social care services within the integrated care board’s area;
- (g) at least one member nominated by the trade unions representing the health and social care workforce that serves the integrated care board’s area;
- (h) at least one member appointed to represent the voice of patients in the integrated care board’s area.”

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Anne Marie Morris **Not selected** 57

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

“(d) one member with specific expertise in commissioning and uptake of medicines and medical devices innovations.”

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Justin Madders **Withdrawn after debate** 30  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

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

“(2A) The constitution must prohibit representatives of GP practices with active Alternative Provider Medical Services contracts from becoming members.”

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Justin Madders **Not called** 33  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Dr Philippa Whitford  
 Mike Amesbury  
 Anneliese Dodds  
 Paula Barker

Rachel Hopkins  
 Rosie Cooper

Barbara Keeley  
 Margaret Greenwood

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

“(2B) Representatives of private providers of healthcare services, other than general practitioners who hold a contract for the provision of primary medical services in the area, may not be appointed to integrated care boards.”

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### SEVENTH AND EIGHTH SITTINGS

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Justin Madders **Withdrawn after debate** 34  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

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

“(2C) The constitution must require integrated care boards, and any committee or sub-committee of the board, to meet in public and publish all papers and agendas at least 5 working days before each meeting is held.”

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Justin Madders **Negated on division** 43  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 2, page 123, line 2, at end insert—

- “(5) An integrated care board must apply all relevant collective agreements for staff pay, conditions and pensions.
- (6) An integrated care board must ensure that all relevant collective agreements for staff pay, conditions and pensions are applied throughout the area for which it is responsible.
- (7) Any integrated care board which wishes to employ anyone directly on an annual salary greater than £161,401 must receive approval from their integrated care partnership before confirming the appointment.”

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Karin Smyth **Withdrawn after debate** 17

Schedule 2, page 124, line 14, at end insert—

- “(7) An integrated care board may enter into an externally financed development agreement in respect of any Local Improvement Finance Trust relevant to the area for which it has responsibility and receive the income related to that agreement.
- (8) An integrated care board may enter into an externally financed development agreement in respect of any proposed Local Improvement Finance Trust relevant to the area for which it has responsibility.”

*Schedule agreed to.*

*Clause 14 agreed to.*

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Justin Madders **Not called** 37  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

Clause 15, page 13, line 18, leave out “it” and insert “the Secretary of State”

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Edward Argar **Agreed to** 12

Clause 15, page 13, line 22, at end insert—

- “(ba) medical services other than primary medical services (for primary medical services, see Part 4),”

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Edward Argar **Agreed to** 13

Clause 15, page 13, line 24, at end insert—

“(ca) ophthalmic services other than primary ophthalmic services (for primary ophthalmic services, see Part 6),”

*Clause, as amended, agreed to.*

*Clause 16 agreed to.*

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Justin Madders **Negated on division** 28

Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Dr Philippa Whitford

Schedule 3, page 126, line 28, leave out “person” and insert “general practitioner, GP partnership or social enterprise providing primary medical services”

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Justin Madders **Not called** 29

Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Dr Philippa Whitford

Schedule 3, page 126, line 32, leave out “person” and insert “general practitioner, GP partnership or social enterprise providing primary medical services”

*Schedule agreed to.*

*Clauses 17 and 18 agreed to.*

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Margaret Greenwood **Not selected** 77

Clause 19, page 15, line 41, leave out “promotes” and insert “secures the rights set out in”

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Justin Madders **Negated on division** 45  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

Clause 19, page 16, line 2, at end insert—

- “(c) make arrangements to ensure that patients can access services within maximum waiting times in accordance with their rights in the NHS Constitution.”

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Margaret Greenwood **Not selected** 78  
 Clause 19, page 16, line 31, leave out “promote” and insert “enable”

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Margaret Greenwood **Not selected** 79  
 Clause 19, page 16, line 31, after “their”, insert “paid and unpaid”

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Anne Marie Morris **Withdrawn after debate** 58  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 19, page 17, line 4, at end insert “through working with innovation and life sciences ecosystems, facilitated by Academic Health Science Networks, to ensure patients and the public have timely access to transformative innovation.”

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Anne Marie Morris **Not selected** 4  
 Clause 19, page 17, line 7, leave out from beginning 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.”

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Chris Skidmore **Withdrawn after debate** 7  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

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

- “(a) support the conduct of research on matters relevant to the health and care system,
- (b) work with universities and other research settings to support the development of the health research workforce and careers, and
- (c) promote the use in the health and care system of evidence obtained from research.”

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Anne Marie Morris **Not selected** 56

Clause 19, page 17, line 9, at end insert—

“(2) An integrated care partnership must support research programmes within its catchment area considering the efficacy of—

- (a) new and existing medicines,
- (b) new and existing medical devices,
- (c) public health and,
- (d) social care.

(3) An integrated care partnership must, in each financial year, prepare a report to demonstrate how it has supported research programmes considering the areas specified in subsection (2).”

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Chris Skidmore **Not called** 8  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 19, page 17, line 13, after “1F(1)”, insert “and work with universities and colleges”

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Justin Madders **Not called** 23  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Dr Philippa Whitford

Clause 19, page 18, line 13, at end insert—

“(d) health inequalities.”

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Justin Madders **Not called** 24  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

Clause 19, page 18, line 13, at end insert—

“(1A) In making a decision about the exercise of its functions, the health and well-being of the people it serves must be the primary consideration of an integrated care board.”

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Margaret Greenwood Not selected 80  
 Clause 19, page 22, line 12, leave out “in a way that they consider to be significant.”

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Margaret Greenwood Not selected 81  
 Clause 19, page 23, line 31, after “must”, insert “publish a copy of the plan on their website and”

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Margaret Greenwood Not selected 82  
 Clause 19, page 24, line 9, leave out “in a way that they consider to be significant”

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Justin Madders Withdrawn after debate 46  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 19, page 25, line 37, at end insert—

**“14Z58A Power of the Domestic Abuse Commissioner to obtain information**

- (1) The Domestic Abuse Commissioner may require an integrated care board to provide the Domestic Abuse Commissioner with information.
- (2) The information must be provided in such form, and at such time or within such period, as the Domestic Abuse Commissioner may require.”

*Clause agreed to.*

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Edward Timpson Withdrawn after debate 55  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 20, page 29, line 7, at end insert—



“(2A) When appointing members to the integrated care partnership, the integrated care partnership must pay particular attention to the range of services used by children and young people aged 0-25.”

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Justin Madders	<b>Not called</b>	<b>27</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Dr Philippa Whitford		
Margaret Greenwood		

Clause 20, page 29, line 9, at end insert—

“(4) Representatives of private providers of healthcare services, other than general practitioners who hold a contract for the provision of primary medical services in the area, may not be appointed to integrated care partnerships.”

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Edward Timpson	<b>Not called</b>	<b>54</b>
Justin Madders		
Alex Norris		
Karin Smyth		
Mary Kelly Foy		

Clause 20, page 29, line 32, at end insert—

“(c) include specific consideration of how it will meet the needs of children and young people aged 0-25.”

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Justin Madders	<b>Negatived on division</b>	<b>47</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		

Clause 20, page 31, line 31, at end insert—

“(3) The Secretary of State must make regulations which set out the procedure to be followed should an integrated care partnership believe that an integrated care board has failed in its duty under this section.”

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Justin Madders	<b>Not called</b>	<b>83</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		

Clause 20, page 31, line 31, at end insert—

“(3) Where—

- (a) in exercising its functions a responsible local authority or integrated care board diverges from an assessment or strategy mentioned in subsection (1), or
  - (b) in exercising any functions in arranging for the provision of health services in relation to the area of a responsible local authority NHS England diverges from an assessment or strategy mentioned in subsection (2),
- that local authority, that integrated care board or (as the case may be) NHS England must—
- (i) within 30 days, make a public statement of its divergence from the assessment or strategy, and
  - (ii) within 60 days, publish its reasons for the divergence, together with any supporting evidence.”

*Clause agreed to.*

*Clauses 21 and 22 agreed to.*

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Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood

**Withdrawn after debate 53**

Clause 23, page 35, line 14, at end insert—

“(5) NHS England must publish guidance on the means by which an integrated care board, NHS trust or NHS foundation trust which believes its capital resource limit or revenue resource limit risks compromising patient safety may object to the limit set.”

*Clause agreed to.*

*Clause 24 agreed to.*

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#### ***NINTH AND TENTH SITTINGS***

*Clause 25 agreed to.*

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Edward Argar

**Agreed to 14**

Schedule 4, page 151, line 34, at end insert—

“107A In section 187 (charges for designated services or facilities), for “section 3(1)(d) or (e)” substitute “section 3(1)(e) or (f)”.”

*Schedule agreed to.*

*Clause 26 agreed to.*

*Schedule 5 agreed to.*

*Clauses 27 to 32 agreed to.*

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Chris Skidmore

**Withdrawn after debate 94**

Clause 33, page 40, line 6, leave out from beginning to end of line 11 and insert—

- “(1) The Secretary of State must, at least once every two years, lay a report before Parliament describing the system in place for assessing and meeting the workforce needs of the health, social care and public health services in England.
- (2) This report must include—
- (a) an independently verified assessment, compliant with the National Statistics Authority’s Code of Practice for Statistics, of health, social care and public health workforce numbers, current at the time of publication, and the projected workforce supply for the following five, ten and 20 years.
  - (b) an independently verified assessment, compliant with the National Statistics Authority’s Code of Practice for Statistics, of future health, social care and public health workforce numbers based on the projected health and care needs of the population for the following five, ten and 20 years, consistent with the Office for Budget Responsibility long-term fiscal projections.
- (3) NHS England and Health Education England must assist in the preparation of a report under this section.
- (4) The organisations listed in subsection (3) must consult health and care employers, providers, trade unions, Royal Colleges, universities and any other persons deemed necessary for the preparation of this report, taking full account of workforce intelligence, evidence and plans provided by local organisations and partners of integrated care boards.”

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Anne Marie Morris **Not called** 2  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

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

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Justin Madders **Negated on division** 40  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Margaret Greenwood  
 Paula Barker

Clause 33, page 40, line 7, leave out ‘the health service’ and insert ‘health and social care services’

---

Anne Marie Morris **Not selected** 3  
 Paula Barker

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.”

---

Justin Madders **Negated on division** 41  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

Clause 33, page 40, line 11, at end insert—

“(3) Health Education England must publish a report each year on projected workforce shortages and future staffing requirements for health and social care services in the following five, ten and twenty years.

(4) The report must report projections of both headcount and full-time equivalent for the total health and care workforce in England and for each region, covering all regulated professions and including those working for voluntary and private providers of health and social care as well as the NHS.

(5) All relevant NHS bodies, arm’s-length bodies, expert bodies, trade unions and the National Partnership forum must be consulted in the preparation of the report.

- (6) The assumptions underpinning the projections must be published at the same time as the report and must meet the relevant standards set out in the National Statistics Authority’s Code of Practice for Statistics.
- (7) The Secretary of State must update Parliament each year on the Government’s strategy to deliver and fund the long-term workforce projections.”

---

Justin Madders **Not called** **42**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

Clause 33, page 40, line 11, at end insert—

“(3) The annual report must include an assessment by the Secretary of State of safe staffing levels in the health service in England and whether those levels are being met.”

---

Hywel Williams **Withdrawn after debate** **85**

Clause 33, page 40, line 11, at end insert—

“(3) The Secretary of State must consult the Welsh Ministers before the functions in this section are exercised.”

*Clause agreed to.*

*Clauses 34 and 35 agreed to.*

---

Justin Madders **Negatived on division** **108**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

Clause 36, page 42, line 33, at end insert—

“(10) Nothing in subsection (2) supersedes Part 4 of the Health and Care Act 2021.”

*Clause agreed to.*

*Clause 37 agreed to.*

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Justin Madders	<b>Not selected</b>	<b>35</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Margaret Greenwood		
Paula Barker		

Page 46, line 23, leave out Clause 38

*Clause agreed to.*

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Karin Smyth	<b>Not called</b>	<b>102</b>
Paula Barker		

Schedule 6, page 180, line 12, at end insert—

““relevant Health Overview & Scrutiny Committee” means any Health Overview and Scrutiny Committee in an area to which the proposal for a reconfiguration of NHS services relates.”

---

Karin Smyth	<b>Not called</b>	<b>103</b>
Paula Barker		

Schedule 6, page 180, line 41, at end insert—

“(3A) Before taking a decision under sub-paragraph (2)(a), the Secretary of State must—

- (a) consult all relevant Health Overview & Scrutiny Committees, and
- (b) have regard to, and publish, clinical advice from the Integrated Care Board’s Medical Director.”

---

Karin Smyth	<b>Not called</b>	<b>104</b>
Paula Barker		

Schedule 6, page 180, line 43, at end insert—

“(aa) publish a statement demonstrating that the decision is in the public interest,”

*Schedule agreed to.*

---

Justin Madders	<b>Not called</b>	<b>25</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Paula Barker		

Clause 43, page 47, line 32, at end insert—  
“(d) health inequalities.”

---

Justin Madders	<b>Not called</b>	<b>26</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Margaret Greenwood		
Paula Barker		

Clause 43, page 47, line 32, at end insert—

“(1A) In making a decision about the exercise of its functions, the health and well-being of the people it serves must be the primary consideration of an NHS trust.”

*Clause agreed to.*

*Clauses 40 to 50 agreed to.*

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#### *ELEVENTH AND TWELFTH SITTINGS*

*Clauses 51 to 59 agreed to.*

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Edward Argar	<b>Agreed to</b>	<b>15</b>
Schedule 8, page 185, line 29, at end insert—		
“(ia) any integrated care board in whose area the trust has hospitals, establishments or facilities, and”		

---

Edward Argar	<b>Agreed to</b>	<b>16</b>
Schedule 8, page 185, line 36, at end insert—		

“(aa) any integrated care board in whose area the trust has hospitals, establishments or facilities,”

*Schedule, as amended, agreed to.*

*Clauses 60 and 61 agreed to.*

*Schedule 9 agreed to.*

*Clauses 62 to 66 agreed to.*

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Justin Madders	<b>Negated on division</b>	<b>84</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Paula Barker		

Schedule 10, page 197, line 17, at end insert—

“(1A) The NHS payment scheme must ensure that the price paid to any provider of services which is neither an NHS Trust nor an NHS Foundation Trust cannot be different from the price paid to an NHS Trust or NHS Foundation Trust.”

---

Justin Madders	<b>Not called</b>	<b>100</b>
Alex Norris		
Karin Smyth		
Mary Kelly Foy		
Jonathan Ashworth		
Paula Barker		

Schedule 10, page 197, line 17, at end insert—

“(1A) NHS England must obtain the agreement of the Secretary of State before publishing the NHS payment scheme.”

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Margaret Greenwood	<b>Not selected</b>	<b>105</b>
Paula Barker		
Mick Whitley		
Richard Burgon		
Bell Ribeiro-Addy		
John McDonnell		
Dan Carden		

Schedule 10, page 197, line 46, after “(1),” insert “not undermine an NHS provider’s ability to provide a service whilst maintaining the pay rates in Agenda for Change, pensions and the other terms and conditions of all eligible NHS staff and”



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Margaret Greenwood **Not selected** 106  
Paula Barker  
Mick Whitley  
Richard Burgon  
Bell Ribeiro-Addy  
John McDonnell  
Dan Carden

Schedule 10, page 198, line 32, after “following” insert “on the likely impact of the proposed scheme”

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Margaret Greenwood **Not selected** 107  
Paula Barker  
Mick Whitley  
Richard Burgon  
Bell Ribeiro-Addy  
John McDonnell  
Dan Carden

Schedule 10, page 198, line 34, at end insert—

“(ba) all relevant trade unions and other organisations representing staff who work in the health and care sectors;”

*Schedule agreed to.*

---

Karin Smyth **Withdrawn after debate** 93

Clause 67, page 60, line 15, at end insert—

“(1AA) The regulations must make provision—

- (a) for anyone with a diagnosis of terminal illness to be offered a conversation about their holistic needs, wishes and preferences for the end of their life, including addressing support for their mental and physical health and wellbeing, financial and practical support, and support for their social relationships,
- (b) that where that individual lacks capacity for such a conversation, it is offered to another relevant person, and
- (c) that for the purposes of section 12ZB a relevant authority must have regard to the needs and preferences recorded in such conversations in making decisions about the procurement of services.”

*Clause agreed to.*

*Schedule 11 agreed to.*

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Justin Madders **Negatived on division** 95  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

Clause 68, page 61, line 32, leave out "health care services" and insert "services required" —

---

Justin Madders **Negatived on division** 99  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 68, page 61, line 35, at end insert—

"(1A) The regulations must provide that no contract for the provision of the services specified in subsection (1)(a) and subsection (1)(b) may be awarded other than to a relevant authority unless a formal competitive tendering process provided for by the regulations has been followed."

---

Justin Madders **Negatived on division** 96  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Paula Barker

Clause 68, page 62, line 1, at end insert—

"(3A) The regulations must—

- (a) include the power for integrated care boards to continue to commission the services provided by an NHS trust or Foundation Trust without any requirement for any re-tendering process,
- (b) require that, prior to commencing any formal procurement process for a service provided by an NHS provider, where the contract value exceeds a threshold set by the relevant integrated care partnership, the integrated care board must conduct a public consultation and publish the business case for opening the service to a competitive tender process,
- (c) require an assessment to be made of alternative ways of providing a service using NHS providers before a contract with a non-NHS provider may be extended or renewed,
- (d) be based on the assumption that the NHS is the preferred provider of services, and
- (e) require providers to pay staff in line with NHS rates of pay and to provide terms and conditions of employment at least equivalent to NHS terms and conditions.

- (3B) NHS England must publish a report each year on the proportion of contracts subject to the regulations which are awarded to each of NHS, third sector, local authority and independent sector providers.
- (3C) NHS England and each integrated care board must publish a plan every three years on reducing the provision of NHS services by private providers and increasing the capacity of NHS providers to provide those services.
- (3D) Integrated care boards must publish, in full and without any recourse to commercial confidentiality, all—
- (a) bids received for contracts,
  - (b) contracts signed, and
  - (c) reports of routine contract management.”

*Clause agreed to.*

---

Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

**Withdrawn after debate 97**

Clause 69, page 62, line 26, at end insert—

“(1A) In the National Health Service Act 2006, in section 272(6), after paragraph (za), insert the following paragraph—

“(zaa) regulations under section 12ZB,””

*Clause agreed to.*

*Clauses 70 to 72 agreed to.*

*Schedule 12 agreed to.*

*Clauses 73 to 77 agreed to.*

---

Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Negated on division 98**

Clause 78, page 68, line 22, at end insert—

- “(2A) A social care needs assessment must be carried out by the relevant local authority before a patient is discharged from hospital or within 2 weeks of the date of discharge.
- (2B) Each integrated care board must agree with all relevant local authorities the process to apply for social care needs assessment in hospital or after discharge, including reporting on any failures to complete required assessments within the required time and any remedies or penalties that would apply in such cases.
- (2C) Each integrated care board must ensure that—
- (a) arrangements made for the discharge of any patient without a relevant social care assessment are made with due regard to the care needs and welfare of the patient, and
  - (b) the additional costs borne by a local authority in caring for a patient whilst carrying out social care needs assessments after a patient has been discharged are met in full.
- (2D) The Secretary of State must publish an annual report on the effectiveness of assessment of social care needs after hospital discharge, including a figure of how many patients are readmitted within 28 days.”

*Clause agreed to.*

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*THIRTEENTH AND FOURTEENTH SITTINGS*

<hr style="width: 10%; margin-left: 0;"/> <p>Edward Argar</p> <p>Clause 79, page 69, line 15, leave out “services” and insert “care”</p>	<p><b>Agreed to</b> 117</p>
<hr style="width: 10%; margin-left: 0;"/> <p>Edward Argar</p> <p>Clause 79, page 69, line 21, at end insert—</p> <p style="padding-left: 2em;">“(aa) in subsection (3), for “services” substitute “care”;</p>	<p><b>Agreed to</b> 118</p>
<hr style="width: 10%; margin-left: 0;"/> <p>Edward Argar</p> <p>Clause 79, page 70, line 2, at end insert—</p> <p style="padding-left: 2em;">“(d) in subsection (7)—</p> <p style="padding-left: 4em;">(i) at the appropriate place insert—</p> <p>““health care” includes all forms of health care whether relating to physical or mental health and also includes procedures that are similar to forms of medical or surgical care but are not provided in connection with a medical condition;”;</p> <p style="padding-left: 4em;">(ii) omit the definition of “health services” .”</p>	<p><b>Agreed to</b> 119</p>

---

Edward Argar

**Agreed to 120**

Clause 79, page 70, line 29, at end insert—

“(3A) In section 251C (continuity of information: interpretation)—

(a) after subsection (6) insert—

“(6A) “Health services” means services which must or may be provided as part of the health service in England; and for that purpose “the health service” has the same meaning as in the National Health Service Act 2006 (see section 275(1) of that Act).”;

(b) for subsection (7) substitute—

“(7) “Adult social care” and “public body” have the same meaning as in section 250; and “processes” and “processed” are to be read in accordance with the meaning of “processing” in that section.”

*Clause, as amended, agreed to.*

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Justin Madders

**Withdrawn after debate 109**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

Clause 80, page 71, line 15, at end insert—

“(4A) Before the power in subsection (1) may be exercised, and every five years thereafter, the Secretary of State must review, and lay before Parliament a report of that review, the possibility of combining the exercise of that power with the exercise of the powers under which—

(a) the General Practice Data for Planning and Research programme, and

(b) other data-sharing programmes are run.”

---

Edward Argar

**Agreed to 121**

Clause 80, page 71, line 20, leave out “250(7)” and insert “251C(6A)”

*Clause, as amended, agreed to.*

*Clauses 81 and 82 agreed to.*

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Justin Madders **Withdrawn after debate** 143  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 83, page 73, line 23, after “assistance” insert “or any form of reablement and rehabilitation provided under section 2 of the Care Act 2014 to reduce the need for care and support”

*Clause agreed to.*

*Clause 84 agreed to.*

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Anne Marie Morris **Not moved** 59

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 within two years of licensing for each medicine.”

---

Dr Philippa Whitford **Withdrawn after debate** 65  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Paula Barker

Clause 85, page 77, line 3, at beginning insert “Subject to subsection (3A),”

---

Dr Philippa Whitford **Not called** 66  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 85, page 77, line 12, at end insert—

“(3A) The provision mentioned in subsection (2)(b) must enable those required to provide information to provide information in pseudonymised form.”

---

Dr Philippa Whitford **Not called** 64  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 85, page 77, line 33, at end insert—

“(5A) The Scottish Ministers may exempt persons to whom subsection (5) applies and who are in Scotland from any requirements imposed by regulations under this section.”

---

Dr Philippa Whitford **Not called** 61  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 85, page 77, line 34, at beginning insert “Subject to subsection (6A),”

---

Dr Philippa Whitford **Not called** 62  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy

Clause 85, page 77, line 47, at end insert—

“(6A) Provision under subsection (6)(c) and (d) may only provide for the disclosure, use or (as the case may be) further disclosure of information for purposes of public health analysis, and must prohibit disclosure, use or further disclosure of information for commercial use.”

---

Dr Philippa Whitford **Not called** 63  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Hywel Williams

Clause 85, page 78, line 1, leave out “includes power to vary or revoke the directions by a subsequent direction” and insert “—

- (a) includes power to vary or revoke the directions by a subsequent direction, and
- (b) is subject to the consent of—
  - (i) the Scottish Ministers insofar as the direction makes provision for any matter which falls within the legislative competence of the Scottish Parliament,
  - (ii) the Welsh Ministers insofar as the direction makes provision for any matter which falls within the legislative competence of Senedd Cymru, and

- (iii) the Northern Ireland Ministers insofar as the direction makes provision for any matter which falls within the legislative competence of the Northern Ireland Assembly.”

---

Dr Philippa Whitford **Not called** 60  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Hywel Williams

Clause 85, page 78, line 9, at end insert—

“(8A) Regulations under subsection (1) may not be made without the consent of the Scottish Ministers, the Welsh Ministers and the Northern Ireland Ministers.”

---

Dr Philippa Whitford **Not called** 67  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Hywel Williams

Clause 85, page 79, line 8, at end insert—

“(4) Provision under subsection (3) which changes the territorial extent of provisions of Chapter 2 of Part 9 of the Health and Social Care Act 2012 (constitution and functions etc of the Health and Social Care Information Centre) and—

- (a) relates to Scotland may only be made with the consent of the Scottish Ministers,
- (b) relates to Wales may only be made with the consent of the Welsh Ministers, and
- (c) relates to Northern Ireland may only be made with the consent of the Northern Ireland Ministers.”

*Clause agreed to.*

*Clause 86 agreed to on division.*

---



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Dr Philippa Whitford **Withdrawn after debate** 69  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy

Clause 87, page 80, line 7, at end insert—

“(2A) Regulations under this section which make provision affecting the functions of Scottish Ministers may not be made unless the Secretary of State has consulted the Scottish Ministers on that provision.”

---

Dr Philippa Whitford **Not called** 68  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Hywel Williams

Clause 87, page 80, line 33, at end insert—

“(5A) Regulations under this section to which subsection (5) applies may not be made without the consent of—

- (a) the Scottish Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Scotland,
- (b) the Welsh Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Wales, or
- (c) the Northern Ireland Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Northern Ireland.”

*Clause agreed to on division.*

---

Dr Philippa Whitford **Not called** 70  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Hywel Williams

Clause 88, page 81, line 17, at end insert—

“(4A) Regulations under this section to which subsection (4) applies may not be made without the consent of the—

- (a) Scottish Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Scotland,
- (b) Welsh Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Wales, or

- (c) Northern Ireland Ministers, if they contain provision for a body to exercise a function that is exercisable in relation to Northern Ireland.”

*Clause agreed to on division.*

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Dr Philippa Whitford Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Hywel Williams	<b>Not called</b>	<b>71</b>
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Clause 89, page 82, line 13, at beginning insert “Subject to subsection (6A),”

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Dr Philippa Whitford Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Hywel Williams	<b>Not called</b>	<b>72</b>
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Clause 89, page 82, line 19, at end insert—

“(6A) Regulations under section 87 or 88 containing provision by virtue of section 131(1)(a) and repealing, revoking or amending provision made by or under—

- (a) an Act of the Scottish Parliament may only be made with the consent of the Scottish Ministers,
- (b) a Measure or Act of Senedd Cymru may only be made with the consent of the Welsh Ministers, and
- (c) Northern Ireland legislation may only be made with the consent of the Northern Ireland Ministers.”

*Clause agreed to on division.*

*Clauses 90 to 92 agreed to on division.*

*Clause 93 agreed to.*

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Justin Madders **Not called** 127  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Schedule 13, page 204, line 7, leave out "Secretary of State" and insert "Chief Executive of NHS England"

---

Justin Madders **Not called** 128  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Schedule 13, page 204, line 18, leave out "with the consent of the Secretary of State"

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Justin Madders **Not called** 129  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Schedule 13, page 204, line 21, after "HSSIB" insert ", one of whom is to be the Chief Finance Officer,"

---

Justin Madders **Negatived on division** 130  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Schedule 13, page 204, line 32, leave out "The Secretary of State" and insert "A majority of non-executive members following a vote"

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Justin Madders **Negatived on division** 131  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Schedule 13, page 204, line 37, leave out sub-paragraph (4)

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Justin Madders **Not called 132**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 13, page 206, line 12, leave out "Secretary of State" and insert "Chief Finance Officer of HSSIB"

---

Justin Madders **Not called 133**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 13, page 206, line 14, leave out "Secretary of State" and insert "Chief Finance Officer of HSSIB"

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Justin Madders **Not called 134**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 13, page 206, line 16, leave out "Secretary of State" and insert "Chief Finance Officer of HSSIB"

---

Justin Madders **Not called 135**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 13, page 206, line 19, leave out "Secretary of State" and insert "Chief Finance Officer of HSSIB"

*Schedule agreed to.*

*Clause 94 agreed to.*

---

Justin Madders **Negatived on division 101**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 95, page 86, line 37, at end insert—

- “(10) Following any direction under subsection (2) the HSSIB may—
- (a) request additional funding in order to carry out the investigation; and
  - (b) at the discretion of the chief investigator, decline to carry out the investigation.
- (11) Following any direction under subsection (2) the Secretary of State—
- (a) must have no further involvement with how the investigation is pursued;
  - (b) may not give a direction which directs the outcome of an investigation; and
  - (c) must have no involvement in the formulation of the investigation’s recommendations.”

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Justin Madders

**Withdrawn after debate 122**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

Clause 95, page 86, line 37, at end insert—

- “(10) The Secretary of State must by regulations lay out a process to challenge a decision made by HSSIB not to investigate a qualifying incident.”

*Clause agreed to.*

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Justin Madders

**Withdrawn after debate 123**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

Clause 96, page 87, line 22, after “State,” insert—

- “(aa) trade unions,
- (ab) patients,”

*Clause agreed to.*

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Justin Madders **Withdrawn after debate** 124  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Clause 97, page 88, line 15, leave out subsection (7) and insert—

“(7) The final report must be sent to the Secretary of State.

(8) Within 12 months of each final report being sent to the Secretary of State under subsection (7), a report must be laid before Parliament setting out the steps the Secretary of State has taken as a result.”

*Clause agreed to.*

*Clauses 98 to 101 agreed to.*

---

Justin Madders **Withdrawn after debate** 125  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Clause 102, page 90, line 21, leave out subsection (6)

*Clause agreed to.*

*Clauses 103 to 105 agreed to.*

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**FIFTEENTH SITTING**

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Edward Argar **Agreed to**  
That the Order of the Committee of Tuesday 7 September be amended, in paragraph 1(h), by leaving out “and 2.00 pm”.

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## SIXTEENTH AND SEVENTEENTH SITTINGS

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Dr Philippa Whitford **Negated on division 86**  
 Sir Bernard Jenkin  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jeremy Hunt

Clause 106, page 92, line 26, leave out subsection (2) and insert—

“(2) In this Part “protected material” means—

- (a) all statements taken from persons by the HSSIB during a safety investigation or in the course of deciding whether an incident is going to be subject to an HSSIB investigation,
- (b) records revealing the identity of persons who have given evidence in the context of the safety investigation,
- (c) information that has been collected by the HSSIB which is of a particularly sensitive and personal nature, such as (but not limited to) copies taken by the HSSIB of health records, care records, clinical notes, or personnel records,
- (d) material subsequently produced during the course of an HSSIB investigation such as (but not limited to) notes, drafts and opinions written by the investigators, or opinions expressed in the analysis of information obtained through the investigation,
- (e) drafts of preliminary or final reports or interim reports,
- (f) information that would be subject to legally enforceable commercial privileges.”

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Dr Philippa Whitford **Not called 87**  
 Sir Bernard Jenkin  
 Jeremy Hunt

Clause 106, page 93, line 6, leave out “information, document, equipment or other item held by that individual” and insert “protected material”

*Clause agreed to.*

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Dr Philippa Whitford **Negated on division 91**  
 Sir Bernard Jenkin  
 Jeremy Hunt

Schedule 14, page 212, line 14, leave out paragraph 6

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Justin Madders **Not called** 136  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 14, page 213, line 3, at end insert—

*“Disclosure to families*

6A The Chief Investigator may disclose findings to any patient involved in any incident which HSSIB is investigating, or the family of any such patient, on the condition of confidentiality and any other condition the Chief Investigator sees fit.”

*Schedule agreed to.*

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Dr Philippa Whitford **Negatived on division** 88  
 Sir Bernard Jenkin  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jeremy Hunt

Clause 107, page 93, line 17, leave out from “Part” to the end of line 41

*Clause agreed to.*

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Dr Philippa Whitford **Not called** 89  
 Sir Bernard Jenkin  
 Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jeremy Hunt

Clause 108, page 94, line 15, leave out paragraph (c)

*Clause agreed to.*

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Dr Philippa Whitford **Not called** 90  
 Sir Bernard Jenkin  
 Jeremy Hunt

Clause 109, page 95, line 6, leave out subsection (7)

*Clause agreed to.*

*Clauses 110 to 112 agreed to.*

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Justin Madders **Not selected** 126  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Page 97, line 18, leave out Clause 113

*Clause agreed to on division.*

*Clauses 114 to 119 agreed to.*

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Dr Philippa Whitford **Withdrawn after debate** 110  
 Clause 120, page 101, line 15, at end insert "but does not include a Scottish Minister, a Welsh Minister or a Northern Ireland Minister"

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Dr Philippa Whitford **Not called** 111  
 Clause 120, page 101, line 22, at end insert—  
 "(5A) In section 5 (Requirement for consultation with devolved authorities) in subsection (1), for "consult" substitute "gain the consent of"."

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Justin Madders **Negated on division** 146  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth  
 Clause 120, page 101, line 22, at end insert—  
 "(5A) In section 7 (Regulations and directions)—"

- (a) in subsection (4), after “under”, insert “section 2 or”;
- (b) after subsection (4), insert—

“(4A) A draft instrument which contains regulations under section 2 may not be laid before Parliament under subsection (4) unless a document containing a proposal for such regulations and an impact assessment of the costs and the demand placed on the NHS have been laid before Parliament.””

*Clause agreed to.*

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<p>Justin Madders Alex Norris Karin Smyth Mary Kelly Foy Jonathan Ashworth</p>	<p><b>Withdrawn after debate</b>    <b>145</b></p>
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Clause 121, page 102, line 40, at end insert—

“(11A) When conducting a review under subsection (1), the Commission must ensure the direct involvement of both users and providers of services.”

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<p>Edward Argar</p> <p>Clause 121, page 102, line 46, leave out “or”</p>	<p><b>Agreed to</b>    <b>147</b></p>
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<p>Edward Argar</p> <p>Clause 121, page 103, line 3, leave out “or”</p> <p><i>Clause, as amended, agreed to.</i></p>	<p><b>Agreed to</b>    <b>148</b></p>
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<p>Dr Philippa Whitford</p> <p>Clause 123, page 105, line 13, at end insert—</p> <p>“(f) after subsection (3) insert—</p> <p>“(3A) An Order in Council under this section—</p> <ul style="list-style-type: none"> <li>(a) which affects Scotland may only be made with the consent of the Scottish Ministers;</li> <li>(b) which affects Wales may only be made with the consent of the Welsh Ministers;</li> </ul>	<p><b>Withdrawn after debate</b>    <b>112</b></p>
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- (c) which affects Northern Ireland may only be made with the consent of the Northern Ireland Ministers.””

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Justin Madders **Withdrawn after debate 142**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 123, page 105, line 13, at end insert—

“(f) After subsection (2B) insert—

“(2C) The regulation of health professions and social care workers must be used where possible to raise professional awareness of rare and less common conditions.””

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Margaret Greenwood **Not selected 144**  
 Bell Ribeiro-Addy  
 John McDonnell  
 Kim Johnson  
 Apsana Begum  
 Sir George Howarth  
 Geraint Davies Zarah Sultana Paula Barker  
 Debbie Abrahams Ian Byrne Dan Carden  
 Tony Lloyd Richard Burgon

Page 104, line 26, leave out Clause 123

*Clause agreed to on division.*

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Justin Madders **Withdrawn after debate 116**  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 124, page 106, line 34, at end insert—

“(4A) In subsection (4) in paragraph (e), after “examiners” insert “including the requirement to investigate stillbirths and deaths related to childbirth”.”

*Clause agreed to.*

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Dr Philippa Whitford **Withdrawn after debate** 113

Clause 125, page 107, line 12, at end insert—

“(2) Regulations made by the Secretary of State under any section of the Communications Act 2003 inserted by Schedule 16 may only be made with the consent of the Scottish Ministers, the Welsh Ministers and the Northern Ireland Ministers.”

*Clause agreed to.*

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Justin Madders **Not called** 139  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 16, page 216, line 5, at end insert—

“(da) a drink product is “less healthy” if it is an alcoholic product in accordance with the Department for Health and Social Care’s Low Alcohol Descriptors Guidance, published in 2018, or future versions of that guidance;”

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Justin Madders **Not called** 140  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 16, page 217, line 3, at end insert—

“(da) a drink product is “less healthy” if it is an alcoholic product in accordance with the Department for Health and Social Care’s Low Alcohol Descriptors Guidance, published in 2018, or future versions of that guidance;”

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Justin Madders **Not called** 141  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Schedule 16, page 218, line 27, at end insert—

“(fa) a drink product is “less healthy” if it is an alcoholic product in accordance with the Department for Health and Social Care’s Low Alcohol Descriptors Guidance, published in 2018, or future versions of that guidance;”

*Schedule agreed to.*

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Justin Madders **Withdrawn after debate** 137  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 126, page 107, line 18, leave out "hospital"

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Justin Madders **Not called** 138  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 126, page 107, line 28, leave out paragraph (c)

*Clause agreed to.*

*Clause 127 agreed to.*

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Justin Madders **Withdrawn after debate** 149  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 128, page 108, line 22, at end insert—

“(za) in subsection (3)(a)(i), after “Secretary of State” insert “or relevant local authority”;

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Justin Madders **Not called** 150  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 128, page 108, line 26, after “Secretary of State” insert “or relevant local authority”

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Justin Madders **Not called** 151  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

Clause 128, page 108, leave out lines 33 to 36

*Clause agreed to.*

*Clause 129 agreed to.*

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### EIGHTEENTH AND NINETEENTH SITTINGS

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Dr Philippa Whitford **Negated on division** 114  
 Clause 130, page 111, line 15, at beginning insert "Subject to subsection (4),"

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Dr Philippa Whitford **Not called** 115  
 Clause 130, page 111, line 25, at end insert—

"(4) Regulations may only be made under this section with the consent of—

- (a) the Scottish Ministers insofar as they make provision for any matter which falls within the legislative competence of the Scottish Parliament,
- (b) the Welsh Ministers insofar as they make provision for any matter which falls within the legislative competence of Senedd Cymru, and
- (c) The Northern Ireland Ministers insofar as they make provision for any matter which falls within the legislative competence of the Northern Ireland Assembly."

*Clause agreed to.*

*Clauses 131 to 135 agreed to.*

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Edward Argar **Added NC59**  
 To move the following Clause—

**“Care Quality Commission reviews etc of integrated care system**

- (1) Chapter 3 of Part 1 of the Health and Social Care Act 2008 (quality of health and social care) is amended as follows.
- (2) After section 46A (inserted by section 121 of this Act) insert—

**“46B Reviews and performance assessments: integrated care system**

- (1) The Commission must, in accordance with this section—
  - (a) conduct reviews of—
    - (i) the provision of relevant health care, and adult social care, within the area of each integrated care board, and
    - (ii) the exercise of the functions of the following in relation to the provision of that care within the area of each integrated care board: the board; its partner local authorities; and registered service providers,
  - (b) assess the functioning of the system for the provision of relevant health care, and adult social care, within the area of each integrated care board (taking into account, in particular, how those mentioned in paragraph (a)(ii) work together), and
  - (c) publish a report of its assessment.
- (2) The Secretary of State—
  - (a) must set, and may from time to time revise, objectives and priorities for the Commission in relation to assessments under this section, and
  - (b) must inform the Commission of the objectives and priorities.
- (3) The Commission—
  - (a) must determine, and may from time to time revise, indicators of quality for the purposes of assessments under this section, and
  - (b) must obtain the approval of the Secretary of State in relation to the indicators.
- (4) The Secretary of State may direct the Commission to revise the indicators under subsection (3).
- (5) Different objectives and priorities may be set, and different indicators of quality may be determined, for different cases.
- (6) The Commission—
  - (a) must prepare, and may from time to time revise, a statement—
    - (i) setting out the frequency with which reviews under this section are to be conducted and the period to which they are to relate, and
    - (ii) describing the method that it proposes to use in assessing and evaluating the functioning of the system for the provision of relevant health care, and adult social care, within the area of an integrated care board, and
  - (b) must obtain the approval of the Secretary of State in relation to the statement.
- (7) The statement may—

- (a) make different provision about frequency and period of reviews for different cases, and
  - (b) describe different methods for different cases.
- (8) Before preparing or revising a statement under subsection (6) the Commission must consult—
- (a) NHS England, and
  - (b) any other persons it considers appropriate.
- (9) The Secretary of State may direct the Commission to revise the statement under subsection (6).
- (10) The Commission must publish—
- (a) the objectives and priorities under subsection (2),
  - (b) the indicators of quality under subsection (3), and
  - (c) the statement under subsection (6).

(11) For the purposes of this section—

“adult social care” means social care for individuals aged 18 or over;

“partner local authority”, in relation to an integrated care board, means any English local authority whose area coincides with, or includes the whole or any part of, the area of the integrated care board;

“registered service provider” means a person registered under Chapter 2 as a service provider;

“relevant health care” means—

- (a) NHS care, or
- (b) the promotion and protection of public health.

(12) Regulations may amend the definition of “relevant health care” to include health care which is provided or commissioned by a public authority (but which does not amount to NHS care).”

(3) In section 48 (special reviews and investigations), in subsection (2), after “46A” (inserted by section 121 of this Act) insert “or 46B”.

(4) In section 50 (failings by English local authorities), in subsection (1), after “46A” (inserted by section 121 of this Act) insert “or 46B”.

(5) In section 162 (orders and regulations: parliamentary control), in subsection (3), after paragraph (c) insert—

- “(c) regulations under section 46B(12) (amendment of definition of relevant health care),”.

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Edward Argar

Agreed to on division NC60

To move the following Clause—

**“Default powers of Secretary of State in relation to adult social care**

- (1) In section 7D of the Local Authority Social Services Act 1970 (default powers of Secretary of State as respects social services functions of local authorities)—



- (a) in subsection (1), for the words from “imposed” to “2002” substitute “referred to in subsection (4)”;
  - (b) after subsection (3) insert—
- “(4) Subsection (1) does not apply in relation to a duty imposed by or under—
- (a) the Children Act 1989,
  - (b) section 1 or 2(4) of the Adoption (Intercountry Aspects) Act 1999,
  - (c) the Adoption and Children Act 2002, or
  - (d) Part 1 of the Care Act 2014.”
- (2) The Care Act 2014 is amended in accordance with subsections (3) and (4).
- (3) After section 72 insert—

*“Default by local authority*

**72A Default power of Secretary of State**

- (1) Where the Secretary of State is satisfied that a local authority is failing, or has failed, to discharge any of its functions under or by virtue of this Part to an acceptable standard, the Secretary of State may give to the local authority any directions that the Secretary of State considers appropriate for the purpose of addressing the failure.
- (2) The directions may include provision requiring the local authority—
  - (a) to act in accordance with advice given by the Secretary of State or a person nominated by the Secretary of State,
  - (b) to collaborate with the Secretary of State or a person nominated by the Secretary of State in taking steps specified in the directions, or
  - (c) to provide the Secretary of State or a person nominated by the Secretary of State with information of a description specified in the directions, on request or otherwise.
- (3) If the Secretary of State considers it necessary for the purpose of addressing the failure, the directions may include provision—
  - (a) for specified functions of the local authority to be exercised by the Secretary of State or a person nominated by the Secretary of State for a period specified in the direction or for so long as the Secretary of State considers appropriate, and
  - (b) requiring the local authority to comply with any instructions of the Secretary of State or the nominee in relation to the exercise of the functions.
- (4) So far as is appropriate in consequence of directions given by virtue of subsection (3), a reference (however expressed) in an enactment, instrument or other document to a local authority is to be read as a reference to the person by whom the function is exercisable.
- (5) If directions given by virtue of subsection (3) expire or are revoked without being replaced then, so far as is appropriate in consequence of the expiry or revocation, a reference (however expressed) in an instrument or other document to the person by whom the function was

exercisable is to be read as a reference to the local authority to whom the directions were given.

- (6) The Secretary of State may, for the purposes of cases in which directions are given under subsection (3)(a), make regulations disapplying or modifying an enactment which confers a function on the Secretary of State in respect of a function of a local authority.
- (7) Directions under this section may require the local authority to provide financial assistance to the Secretary of State, or a person nominated by the Secretary of State, for the purpose of meeting costs incurred by the Secretary of State or the nominee as a result of the directions.

#### **72B Default power of Secretary of State: supplementary**

- (1) Before giving directions under section 72A the Secretary of State must give the local authority concerned an opportunity to make representations about the proposed directions, except so far as the Secretary of State considers that it is impractical to do so for reasons of urgency.
- (2) The power to give directions under section 72A includes a power to vary or revoke the directions by subsequent directions.
- (3) Subsection (1) does not apply in relation to proposed directions varying previous directions if the Secretary of State does not consider the variations to be significant.
- (4) Directions under section 72A must be in writing.
- (5) The Secretary of State must publish—
  - (a) any directions given under section 72A, and
  - (b) the reasons for giving them.
- (6) Directions under section 72A are enforceable, on the Secretary of State's application, by a mandatory order."
- (4) In section 125(4) (regulations and orders subject to affirmative procedure), after paragraph (k) insert—
  - "(ka) regulations under section 72A(6) (modification of enactments where local authority functions are exercised by the Secretary of State or a nominee);"."

Edward Argar

Agreed to on division NC61

To move the following Clause—

#### **"Care Quality Commission's powers in relation to local authority failings**

- (1) The Health and Social Care Act 2008 is amended as follows.
- (2) In section 48 (special reviews and investigations), in subsection (6) omit "or (3)".
- (3) In section 50 (failings by English local authorities)—
  - (a) in subsection (2), in the words before paragraph (a), omit "subject to subsection (3)";

(b) for subsections (3) and (4) substitute—

“(3A) Nothing in subsection (2) prevents a report published under section 46(1)(c), 46A(1)(c), 46B(1)(c) or 48(4) from specifying respects in which the Commission considers a local authority to be failing and making recommendations to the local authority for addressing the failure.”

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Edward Argar

Added NC62

To move the following Clause—

**“Pharmaceutical services: remuneration in respect of vaccines etc**

- (1) Section 164 of the National Health Service Act 2006 (remuneration for persons providing pharmaceutical services) is amended as follows.
- (2) In subsection (8A) for “special medicinal products” substitute “any of the following—
  - (a) drugs or medicines used for vaccinating or immunising people against disease,
  - (b) anything used in connection with the supply or administration of drugs or medicines within paragraph (a),
  - (c) drugs or medicines, not within paragraph (a), that are used for preventing or treating a disease that, at the time the regulations are made, the Secretary of State considers to be a pandemic disease or at risk of becoming a pandemic disease,
  - (d) anything used in connection with the supply or administration of drugs or medicines within paragraph (c), or
  - (e) a product which is a special medicinal product for the purposes of regulation 167 of the Human Medicines Regulations 2012 (S.I. 2012/1916).”
- (3) In subsection (8D)—
  - (a) for “special medicinal products are” substitute “anything within subsection (8A)(a) to (e) is”;
  - (b) in paragraph (b), for “special medicinal products” substitute “that thing,”.
- (4) In subsection (8E), omit the definition of “special medicinal product”.
- (5) After subsection (8E) insert—
 

“(8F) Where regulations include provision made in reliance on subsection (8A)(c) or (d) and the Secretary of State considers that the disease to which it relates is no longer a pandemic disease or at risk of becoming a pandemic disease, the Secretary of State must revoke that provision within such period as the Secretary of State considers reasonable (taking into account, in particular, the need for any transitional arrangements).”

Mr Richard Holden  
 Jeremy Hunt  
 Dame Meg Hillier  
 Jackie Doyle-Price  
 Sarah Olney  
 Dehenna Davison  
 Simon Fell  
 Lee Anderson  
 Tracey Crouch  
 Christian Wakeford  
 James Daly  
 Mr Robert Goodwill  
 Paula Barker  
 Mr Virendra Sharma  
 David Johnston  
 Rosie Cooper  
 Crispin Blunt  
 John Spellar  
 Kate Griffiths  
 Mrs Pauline Latham  
 Dr Jamie Wallis  
 Sara Britcliffe  
 Alex Norris

Paul Howell  
 Siobhan Baillie  
 Liz Saville Roberts  
 Brendan Clarke-Smith  
 Duncan Baker  
 Sarah Green  
 Caroline Lucas  
 Sarah Champion  
 Mick Whitley  
 Shaun Bailey  
 Steve Brine  
 Tony Lloyd  
 Caroline Nokes  
 Giles Watling  
 Tonia Antoniazzi  
 Peter Gibson  
 Karin Smyth

**Withdrawn after debate NC1**

Alexander Stafford  
 Laura Farris  
 Stephen Metcalfe  
 Mr Steve Baker  
 Robert Langan  
 Sir Peter Bottomley  
 Fiona Bruce  
 Chris Loder  
 Mrs Emma Lewell-Buck  
 Jill Mortimer  
 Marsha De Cordova  
 Antony Higginbotham  
 Mary Kelly Foy  
 Jess Phillips  
 Sir Roger Gale  
 Justin Madders

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  
 Jeremy Hunt  
 Dame Meg Hillier  
 Jackie Doyle-Price  
 Sarah Olney  
 Dehenna Davison  
 Simon Fell  
 Lee Anderson  
 Tracey Crouch  
 Christian Wakeford  
 James Daly  
 Mr Robert Goodwill  
 Paula Barker  
 Mr Virendra Sharma  
 David Johnston  
 Rosie Cooper  
 Crispin Blunt  
 John Spellar  
 Kate Griffiths  
 Mrs Pauline Latham  
 Dr Jamie Wallis  
 Sara Britcliffe  
 Alex Norris

Paul Howell  
 Siobhan Baillie  
 Liz Saville Roberts  
 Brendan Clarke-Smith  
 Duncan Baker  
 Sarah Green  
 Caroline Lucas  
 Sarah Champion  
 Mick Whitley  
 Shaun Bailey  
 Steve Brine  
 Tony Lloyd  
 Caroline Nokes  
 Giles Watling  
 Tonia Antoniazzi  
 Peter Gibson  
 Karin Smyth

Alexander Stafford  
 Laura Farris  
 Stephen Metcalfe  
 Mr Steve Baker  
 Robert Largan  
 Sir Peter Bottomley  
 Fiona Bruce  
 Chris Loder  
 Mrs Emma Lewell-Buck  
 Jill Mortimer  
 Marsha De Cordova  
 Antony Higginbotham  
 Mary Kelly Foy  
 Jess Phillips  
 Sir Roger Gale  
 Justin Madders

Not called 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.”

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Anne Marie Morris  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Paula Barker

Withdrawn after debate 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.”

---

Anne Marie Morris

Not selected 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.”

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Anne Marie Morris  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Paula Barker

Negatived on division 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."

---

Anne Marie Morris

Not selected 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.”

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Karin Smyth

Withdrawn after debate NC7

To move the following Clause—

**“Transparency of decision-making by NHS bodies**

- (1) All meetings of NHS bodies must be held in public and reasonable provision must be made for access to meetings other than by physical attendance.
- (2) All—
  - (a) agendas; and
  - (b) other papers
 to be considered at meetings of NHS bodies must be published at least 10 days before the date of the meeting.
- (3) For the purposes of this section an NHS body is—
  - (a) NHS England;
  - (b) an Integrated Care Board;
  - (c) an NHS Trust;
  - (d) an NHS Foundation Trust; and
  - (e) a Special Health Authority.
- (4) An NHS body may, by resolution, exclude the public from the whole or part of a meeting if it considers that publicity would be prejudicial to the public interest because confidential business is to be transacted at the meeting or for other reasons stated in the resolution.



- (5) A resolution to exclude the public from a meeting under subsection (4) must be published at least five days before the date of the meeting and must explain—
  - (a) what is covered by the resolution; and
  - (b) the reason publication is not in the public interest.
- (6) Any responses from the public to the publication of the resolution under subsection (5) must be considered in public at the meeting.
- (7) All major decisions taken by an NHS body must be based on—
  - (a) a business case prepared to the standards required by HM Treasury and published at least one month before the decision is to be considered;
  - (b) a Stage Gate Review or similar external independent assurance review, the summary of which must be published at least one month before the decision is to be considered; and
  - (c) consideration of any responses from the public, patients or staff representatives to the business case.
- (8) For the purposes of subsection (7) neither the business case nor any part of it nor any record of the consideration of the case by the NHS body may be considered to be commercially confidential under the Freedom of Information Act 2000.
- (9) For the purposes of subsection (7) a “major decision” includes, but is not restricted to, any proposal for—
  - (a) capital expenditure in excess of £5m;
  - (b) the award of any contract with a value in excess of £1m to any organisation that is not an NHS Trust or NHS Foundation Trust; and
  - (c) any change in the organisation of the provision of services that will involve or may involve—
    - (i) more than 10 staff; or
    - (ii) more than 10 patients or service users.
- (10) NHS England may publish guidance on the consideration of major decisions under subsections (7) to (9).”

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Karin Smyth

Withdrawn after debate NC8

To move the following Clause—

**“NHS Good Governance Commission**

- (1) Regulations must provide for the establishment of an NHS Good Governance Commission as a Special Health Authority.
- (2) The Commission has responsibility for ensuring that anyone appointed to, or elected into, a non-executive role on an NHS body—
  - (a) is a fit and proper person for that role; and
  - (b) has been appointed or elected by a process that the Commission considers appropriate.

- (3) For the purposes of subsection (2) a Chair or ordinary member of an Integrated Care Board must be considered to be a non-executive role.
- (4) NHS England may publish guidance, which must be approved by the Commission, about how appointments are made to NHS bodies.
- (5) The Commission must publish an annual assessment of diversity and inclusion in decision-making by NHS bodies and in appointments to executive and non-executive roles in NHS bodies.
- (6) For the purposes of subsection (2) an NHS body is—
  - (a) NHS England;
  - (b) an Integrated Care Board;
  - (c) an NHS Trust;
  - (d) an NHS Foundations Trust; and
  - (e) a Special Health Authority.”

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Chris Skidmore  
Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Anne Marie Morris

**Withdrawn after debate NC9**

To move the following Clause—

**“Duty to promote research**

For Section 1E of the National Health Service Act 2006 substitute—

*“Duty to promote research*

The Secretary of State must—

- (a) support the conduct of research on matters relevant to the health and care system,
- (b) provide funding for research on matters relevant to the health and care system, via ring-fenced funding for the National Institute for Health Research, and
- (c) promote the use in the health and care system of evidence obtained from research.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

**Withdrawn after debate NC11**

To move the following Clause—

**“Consultation with staff and patients on service changes**

- (1) The Secretary of State must consult staff, staff representatives and patient representatives on any changes in services which fall within the definition of reconfiguration of services or which impact on the roles of more than 20 staff and publish the results of the consultation.

- (2) NHS England, ICBs, NHS Trusts and FTs must publish a response to the results of consultations undertaken under subsection (1) and have due regard to the outcome of any consultation.
- (3) Where significant changes to services are proposed by any NHS body, that body must produce a business case using the Five Case Model recommended by Her Majesty's Treasury, or other requirements as set out in guidance prepared and published by the Secretary of State under this section.
- (4) The business case mentioned in subsection (3) must be published for consultation and the responses to the consultation taken into account when a decision is taken whether to implement the change."

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Justin Madders

**Negated on division NC12**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

Dr Philippa Whitford

Margaret Greenwood

Paula Barker

To move the following Clause—

**"NHS as the preferred provider of NHS contracts**

- (1) The NHS is the preferred provider of NHS contracts.
- (2) NHS contracts must be provided by NHS suppliers unless the NHS supplier is unable to fulfil the terms of that contract.
- (3) Where the NHS is unable to fulfil the terms of a contract, a competitive tender must be held to identify an alternative provider.
- (4) For the purposes of this section—
  - (a) "alternative provider" means private companies and independent sector treatment centres, and
  - (b) general practice and GP-led community services are NHS suppliers."

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Justin Madders

**Not called NC13**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

To move the following Clause—

**"Secretary of State's duty to set targets on population health and reduction of inequalities**

- (1) The Secretary of State must, at least every five years, publish a report setting targets on—
  - (a) the improvement of the physical and mental health of the population, and

- (b) the reduction of health inequalities.
- (2) The Secretary of State must publish an annual report recording progress against the targets in subsection (1)."

Alex Norris

Withdrawn after debate NC14

To move the following Clause—

**"Appropriate consent to transplantation activities when travelling abroad**

The Human Tissue Act 2004 is amended as follows—

- (1) Section 32 (prohibition of commercial dealings in human material for transplantation) is amended as follows.
- (2) In subsection (1), after paragraph (e) insert—
  - "(f) travels outside the United Kingdom and receives any controlled material, for the purpose of transplantation, where the material was obtained without—
    - (i) the free, informed and specific consent of a living donor, or
    - (ii) the free, informed and specific consent of the donor's next of kin, where the donor is unable to provide consent;
  - (g) receives any controlled material for the purpose of transplantation for which, in exchange for the removal of organs—
    - (i) the living donor, or a third party, receives a financial gain or comparable advantage, or
    - (ii) from a deceased donor, a third party receives financial gain or comparable advantage.
- (1A) For the purposes of paragraphs (f) and (g) in subsection (1), it is immaterial whether the offence of dealing in controlled material for transplantation is caused by an act or an omission.
- (1B) For the purposes of paragraph (g) in subsection (1), it is immaterial whether the acts or omissions which form part of the offence take place in the United Kingdom or elsewhere.
- (1C) In subsection (1)(g), the expression "financial gain or comparable advantage" does not include compensation for loss of earnings and any other justifiable expenses caused by the removal or by the related medical examinations, or compensation in case of damage which is not inherent to the removal of organs.
- (1D) Subsection (1F) applies if—
  - (a) no act which forms part of an offence under subsection (1) takes place in the United Kingdom, but
  - (b) the person committing the offence has a close connection with the United Kingdom.
- (1E) For the purposes of subsection (1D)(b), a person has a close connection with the United Kingdom if, and only if, the person was one of the

following at the time the acts or omissions concerned were done or made—

- (a) a British citizen,
- (b) a British overseas territories citizen,
- (c) a British National (Overseas),
- (d) a British Overseas citizen,
- (e) a person who under the British Nationality Act 1981 was a British subject,
- (f) a British protected person within the meaning of that Act,
- (g) an individual ordinarily resident in the United Kingdom,
- (h) a body incorporated under the law of any part of the United Kingdom,
- (i) a Scottish partnership.

(1F) In such a case, proceedings for the offence may be taken in any criminal court in England and Wales or Northern Ireland.”

(3) In subsection (3), after “subsection (1)” insert “(a) to (e)”.

(4) In subsection (4), after “subsection (1)” insert “(a) to (e)”.

(5) After subsection (4) insert—

“(4A) A person guilty of an offence under subsection (1)(f) or (1)(g) shall be liable—

- (a) on summary conviction—
  - (i) to imprisonment for a term not exceeding 12 months,
  - (ii) to a fine not exceeding the statutory maximum, or
  - (iii) to both;
- (b) on conviction on indictment—
  - (i) to imprisonment for a term not exceeding 9 years,
  - (ii) to a fine, or
  - (iii) to both.”

(6) Section 34 (information about transplant operations) is amended as follows.

(7) After subsection (2) insert—

“(2A) Regulations under subsection (1) must require specified persons to—

- (a) keep patient identifiable records for all instances of UK citizens who have received transplant procedures performed outside the United Kingdom; and
- (b) report instances of transplant procedures performed on UK citizens outside the United Kingdom to NHS Blood and Transplant.

(2B) Regulations under subsection (1) must require NHS Blood and Transplant to produce an annual report on instances of UK citizens receiving transplant procedures outside the United Kingdom.””

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Alex Norris

Not called NC15

To move the following Clause—

**“Regulation of the public display of imported cadavers**

The Human Tissue Act 2004 is amended as follows—

In subsections (5)(a), (6)(a) and (6)(b) of section 1 (authorisation of activities for scheduled purposes) after “imported” insert “other than for the purpose of public display”.

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Caroline Nokes  
 Carolyn Harris  
 Anne Marie Morris  
 Sarah Champion  
 Judith Cummins  
 Mr Kevan Jones  
 Peter Dowd  
 Justin Madders  
 Mary Kelly Foy

Withdrawn after debate NC16

Caroline Lucas  
 Alex Norris

Kim Johnson  
 Karin Smyth

To move the following Clause—

**“Licensing of beauty and aesthetics treatments**

- (1) No person may carry on an activity to which this subsection applies—
  - (a) except under the authority of a licence for the purposes of this section, and
  - (b) other than in accordance with specified training.
- (2) Subsection (1) applies to an activity relating to the provision of beauty or aesthetics treatments which is specified for the purposes of the subsection by regulations made by the Secretary of State.
- (3) A person commits an offence if that person contravenes subsection (1).
- (4) The Secretary of State may by regulations make provision about licences and conditions for the purposes of this section.
- (5) Before making regulations under this section, the Secretary of State must consult the representatives of any interests concerned which the Secretary of State considers appropriate.
- (6) Regulations may, in particular—
  - (a) require a licensing authority not to grant a licence unless satisfied as to a matter specified in the regulations; and
  - (b) require a licensing authority to have regard, in deciding whether to grant a licence, to a matter specified in the regulations.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

**Withdrawn after debate NC17**

To move the following Clause—

**“Secretary of State’s duty to maintain safe staffing levels**

After section 1G of the National Health Service Act 2006 (but before the italic heading after it) insert—

**“1GA Secretary of State’s duty to maintain safe staffing levels**

The Secretary of State has a duty to maintain safe staffing levels in the health and care service in England.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

**Withdrawn after debate NC18**

To move the following Clause—

**“Workforce responsibilities of integrated care boards**

- (1) Each integrated care board must at least every two years publish a report setting out an analysis of the current workforce, the workforce requirements to enable the Board to fulfil its duties over the following 2, 5 and 10 years, and the plans the Board has to close any gaps identified.
- (2) In drawing up the report the Board must consult—
  - (a) the Trusts and Foundation Trusts that provide services in its area,
  - (b) providers of primary care in its area, and
  - (c) the recognised trade unions.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC19**

To move the following Clause—

**“Secretary of State’s duty to provide access to occupational health services to NHS staff**

After section 1G of the National Health Service Act 2006 (but before the italic heading after it) insert—

**“1GA Secretary of State’s duty to provide access to occupational health services to NHS staff**

The Secretary of State must provide access to occupational health services to meet the reasonable requirements of all persons who are employed in an activity which involves or relates to the provision of services as part of the health service in England.””

---

Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Not called NC20

To move the following Clause—

**“Secretary of State’s duty to promote health service**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) For section 1 (Secretary of State’s duty to promote comprehensive health service) substitute the following—

**“Secretary of State’s duty to promote health service**

- (1) The Secretary of State must continue the promotion in England of a comprehensive health service designed to secure improvement—
  - (a) in the physical and mental health of the people of England, and
  - (b) in the prevention, diagnosis and treatment of illness.
- (2) The Secretary of State must for that purpose provide or secure the provision of services in accordance with this Act.
- (3) The services so provided must be free of charge except in so far as the making and recovery of charges is expressly provided for by or under any enactment, whenever passed.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

Not called NC21

To move the following Clause—

**“Duties on the Secretary of State to provide services**

- (1) The Secretary of State must provide, in England, to such extent as he considers necessary to meet all reasonable requirements—
  - (a) hospital accommodation,
  - (b) other accommodation for the purpose of any service provided under this Act,
  - (c) medical, dental, ophthalmic, nursing and ambulance services,



- (d) such other services or facilities for the care of pregnant women, women who are breastfeeding and young children as he considers are appropriate as part of the health service,
  - (e) such other services or facilities for the prevention of illness, the care of persons suffering from illness and the after-care of persons who have suffered from illness as he considers are appropriate as part of the health service,
  - (f) such other services or facilities as are required for the diagnosis and treatment of illness.
- (2) For the purposes of the duty in subsection (1), services provided under—
- (a) section 82A (primary medical services), section 98C (primary dental services) or section 114C (primary ophthalmic services), of the NHS Act 2006, and
  - (b) a general medical services contract, a general dental services contract or a general ophthalmic services contract,
- must be regarded as provided by the Secretary of State.”

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Anne Marie Morris

Not selected NC22

To move the following Clause—

**“Obligation on integrated care boards to ensure appropriate uptake of all NICE approved products according to population need**

- (1) An integrated care board must promote uptake of all NICE approved medicines and medical devices in accordance with the need of the population it serves.
- (2) An integrated care board must, in each financial year, prepare a report on the uptake of all NICE approved medicines and medical devices, including the number of patients that have accessed each product.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth  
Paula Barker

Withdrawn after debate NC23

To move the following Clause—

**“Cap on private charges**

- (1) Section 43 of the National Health Service Act 2006 is amended as follows.
  - (2) Leave out subsection (2A) and insert—
- “(2A) An NHS foundation trust does not fulfil its primary purpose if the proportion of the total income of the NHS foundation trust in any financial year derived from private charges is greater than the proportion

of the total income of the NHS trust derived from such charges in the financial year ending 31 March 2022.

- (2B) For the purposes of subsections (2A) and (2C) “private charges” means charges imposed in respect of goods and services provided to patients other than patients being provided with goods and services for the purposes of the health service.
- (2C) An NHS foundation trust does not fulfil its principal purpose if in any year the proportion of the total income derived from private charges is greater than the proportion of the total income of the NHS trust derived from such charges in the previous financial year unless—
- (a) the appropriate integrated care boards and integrated care partnerships have been notified of the intention that this increase will occur;
  - (b) that intention has been published with a statement of the reasons why it is considered to benefit the NHS;
  - (c) the appropriate integrated care boards and integrated care partnerships have used reasonable endeavours to consider any responses to the publication mentioned in (b); and
  - (d) any integrated care board which has commissioned services from the trust, and the integrated care partnership for the board, have informed the NHS foundation trust that the proposed increase is justified.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC24**

To move the following Clause—

**“Requirement for NHS trusts to publish Royal College invited review reports**

Each NHS Trust in England must publish the reports produced by Royal Colleges of invited reviews of the Trust, including any conclusions and recommendations.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Negatived on division NC25**

To move the following Clause—

**“Secretary of State’s duty to report on disparities in maternal mortality rates**

The Secretary of State must prepare and publish a report each year on variation in the quality and safety of England’s maternity services and disparities in maternal mortality rates in England, including the steps

being taken to address these disparities and improve outcomes for patients.”

---

Anne Marie Morris

Not selected NC26

To move the following Clause—

**“Access to approved treatments**

After section 3A of the National Health Service Act 2006 (inserted by section 15 of this Act) insert—

**“3AA Duty of integrated care boards to commission approved treatments**

- (1) This section applies where—
  - (a) a treatment has been approved by the National Institute for Health and Care Excellence, and
  - (b) an integrated care board has not arranged for the provision of that treatment under section 3 or 3A of this Act, and
  - (c) a clinician has recommended that treatment for a person for whom that integrated care board has responsibility.
- (2) The integrated care board referred to in subsection (1) must arrange for the provision of that treatment to the person for whom it has responsibility.
- (3) In subsection (1) “clinician” means a medical professional employed by or acting on behalf of an NHS Trust, NHS Foundation Trust or primary care service from whom the integrated care board has arranged for the provision of services.””

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Chris Skidmore

Withdrawn after debate NC27

To move the following Clause—

**“Duty as to workforce and training innovation**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 1F(1) insert—

“(1A) The Secretary of State must support the transformation of the health and social care workforce for integrated care systems, working with universities and colleges to train the future workforce through investment in technological and interprofessional innovation.””

---

Chris Skidmore

Not called NC28

To move the following Clause—

**“Duty as to education placement capacity and innovation**

- (1) The National Health Service Act 2006 is amended as follows.

(2) After section 1F(1) insert—

“(1A) To meet the integrated workforce requirements of integrated care systems, the Secretary of State must—

- (a) ensure that there is sufficient placement capacity in the health and social care system in England to educate and develop a sustainable health and social care workforce,
- (b) support, fund and promote the use of innovation in healthcare higher education to meet health and social care workforce needs, including new approaches to interdisciplinarity, digital technology and simulation, and
- (c) consult universities, health and social care service employers, providers and other persons deemed necessary to develop practice placement capacity and innovation in higher education for health and social care to meet the needs of the health and social care workforce.”

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*TWENTIETH AND TWENTY-FIRST SITTINGS*

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Mary Kelly Foy

Alex Norris

Justin Madders

Karin Smyth

Jonathan Ashworth

Bob Blackman

Alex Cunningham

Kate Osborne

Paula Barker

Dr Philippa Whitford

Ian Mearns

John McDonnell

Mr Clive Betts

Barbara Keeley

**Withdrawn after debate NC29**

Hywel Williams

Peter Dowd

Tony Lloyd

To move the following Clause—

**“Health warnings on cigarettes and cigarette papers**

The Secretary of State may by regulations require tobacco manufacturers to print health warnings on individual cigarettes and cigarette rolling papers.”

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Mary Kelly Foy

Alex Norris

Justin Madders

Karin Smyth

Jonathan Ashworth

Bob Blackman

Alex Cunningham

Kate Osborne

Paula Barker

Dr Philippa Whitford

Ian Mearns

John McDonnell

Mr Clive Betts

Barbara Keeley

**Not called NC30**

Hywel Williams

Peter Dowd

Tony Lloyd

To move the following Clause—

**“Cigarette pack inserts**

The Secretary of State may by regulations require tobacco manufacturers to display a health information message on a leaflet inserted in cigarette packaging.”

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Mary Kelly Foy

Alex Norris

Justin Madders

Karin Smyth

Jonathan Ashworth

Bob Blackman

Alex Cunningham

Kate Osborne

Paula Barker

Dr Philippa Whitford

Ian Mearns

John McDonnell

Mr Clive Betts

Barbara Keeley

**Negatived on division NC31**

Hywel Williams

Peter Dowd

Tony Lloyd

Charlotte Nichols

To move the following Clause—

**“Packaging and labelling of nicotine products**

The Secretary of State may by regulations make provision about the retail packaging and labelling of electronic cigarettes and other novel nicotine products including requirements for health warnings and prohibition of branding elements attractive to children.”

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Mary Kelly Foy

Alex Norris

Justin Madders

Karin Smyth

Jonathan Ashworth

Bob Blackman

Alex Cunningham

Kate Osborne

Paula Barker

Barbara Keeley

Ian Mearns

John McDonnell

Mr Clive Betts

**Negatived on division NC32**

Hywel Williams

Peter Dowd

Tony Lloyd

To move the following Clause—

**“Sale and distribution of nicotine products to children under the age of 18 years**

- (1) The Secretary of State may by regulations prohibit the free distribution of nicotine products to those aged under 18 years, and prohibit the sale of all nicotine products to those under 18.
- (2) Regulations under subsection (1) must include an exception for medicines or medical devices indicated for the treatment of persons aged under 18.”

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Mary Kelly Foy Not called NC33  
 Alex Norris  
 Justin Madders  
 Karin Smyth  
 Jonathan Ashworth  
 Bob Blackman  
 Alex Cunningham  
 Kate Osborne  
 Paula Barker  
 Dr Philippa Whitford

Ian Mearns  
 John McDonnell  
 Mr Clive Betts  
 Barbara Keeley

Hywel Williams  
 Peter Dowd  
 Tony Lloyd

To move the following Clause—

**“Flavoured tobacco products**

The Secretary of State may by regulations remove the limitation of the prohibition of flavours in cigarettes or tobacco products to “characterising” flavours, and extend the flavour prohibition to all tobacco products as well as smoking accessories including filter papers, filters and other products designed to flavour tobacco products.”

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Mary Kelly Foy Not called NC34  
 Alex Norris  
 Justin Madders  
 Karin Smyth  
 Jonathan Ashworth  
 Bob Blackman  
 Alex Cunningham  
 Kate Osborne  
 Paula Barker  
 Dr Philippa Whitford

Ian Mearns  
 John McDonnell  
 Mr Clive Betts  
 Barbara Keeley

Hywel Williams  
 Peter Dowd  
 Tony Lloyd

To move the following Clause—

**“Tobacco supplies: statutory schemes**

- (1) The Secretary of State may make a scheme (referred to in this section and section [*Tobacco supplies: statutory schemes (supplementary)*]) as a statutory scheme) for one or more of the following purposes—
  - (a) regulating the prices which may be charged by any manufacturer or importer of tobacco products for the supply of any tobacco products,
  - (b) limiting the profits which may accrue to any manufacturer or importer in connection with the manufacture or supply of tobacco products, or
  - (c) providing for any manufacturer or importer of tobacco products to pay to the Secretary of State an amount calculated by reference to sales or estimated sales of those products (whether on the basis of net prices, average selling prices or otherwise).
- (2) A statutory scheme may, in particular, make any provision mentioned in subsections (3) to (6).
- (3) The scheme may provide for any amount representing sums charged by any manufacturer or importer to whom the scheme applies, in excess of the limits determined under the scheme, for tobacco products covered by

the scheme to be paid by that person to the Secretary of State within a specified period.

- (4) The scheme may provide for any amount representing the profits, in excess of the limits determined under the scheme, accruing to any manufacturer or importer to whom the scheme applies in connection with the manufacture or importation of tobacco products covered by the scheme to be paid by that person to the Secretary of State within a specified period.
- (5) The scheme may provide for any amount payable in accordance with the scheme by any manufacturer or importer to whom the scheme applies to be paid to the Secretary of State within a specified period.
- (6) The scheme may—
  - (a) prohibit any manufacturer or importer to whom the scheme applies from varying, without the approval of the Secretary of State, any price charged by him for the supply of any tobacco product covered by the scheme, and
  - (b) provide for any amount representing any variation in contravention of that prohibition in the sums charged by that person for that product to be paid to the Secretary of State within a specified period.”

Mary Kelly Foy  
Alex Norris

Justin Madders  
Karin Smyth

Jonathan Ashworth  
Bob Blackman

Alex Cunningham  
Kate Osborne

Paula Barker  
Dr Philippa Whitford

Ian Mearns  
John McDonnell

Mr Clive Betts  
Barbara Keeley

Hywel Williams  
Peter Dowd

Tony Lloyd

Not called NC35

To move the following Clause—

**“Tobacco supplies: statutory schemes (supplementary)**

- (1) The Secretary of State may make any provision the Secretary of State considers necessary or expedient for the purpose of enabling or facilitating—
  - (a) the introduction of a statutory scheme under section [*Tobacco supplies: Statutory schemes*], or
  - (b) the determination of the provision to be made in a proposed statutory scheme.
- (2) The provision may, in particular, require any person to whom such a scheme may apply to—
  - (a) record and keep information,
  - (b) provide information to the Secretary of State in electronic form.
- (3) The Secretary of State must—
  - (a) store electronically the information which is submitted in accordance with subsection (2);

- (b) ensure that information submitted in accordance with this provision is made publicly available on a website, taking the need to protect trade secrets duly into account.
- (4) Where the Secretary of State is preparing to make or vary a statutory scheme, the Secretary of State may make any provision the Secretary of State considers necessary or expedient for transitional or transitory purposes which could be made by such a scheme."

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Mary Kelly Foy

Not called NC36

Alex Norris

Justin Madders

Karin Smyth

Jonathan Ashworth

Bob Blackman

Alex Cunningham

Ian Mearns

Hywel Williams

Kate Osborne

John McDonnell

Peter Dowd

Paula Barker

Mr Clive Betts

Tony Lloyd

Dr Philippa Whitford

Barbara Keeley

To move the following Clause—

**"Tobacco supplies: enforcement**

- (1) Regulations may provide for a person who contravenes any provision of regulations or directions under section [*Tobacco supplies: statutory schemes*] to be liable to pay a penalty to the Secretary of State.
- (2) The penalty may be—
  - (a) a single penalty not exceeding £5 million,
  - (b) a daily penalty not exceeding £500,000 for every day on which the contravention occurs or continues.
- (3) Regulations may provide for any amount required to be paid to the Secretary of State by virtue of section [*Tobacco supplies: statutory schemes*] (4) or (6)(b) to be increased by an amount not exceeding 50 per cent.
- (4) Regulations may provide for any amount payable to the Secretary of State by virtue of provision made under section [*Tobacco supplies: statutory schemes*] (3), (4), (5) or (6)(b) (including such an amount as increased under subsection (3)) to carry interest at a rate specified or referred to in the regulations.
- (5) Provision may be made by regulations for conferring on manufacturers and importers a right of appeal against enforcement decisions taken in respect of them in pursuance of [*Tobacco supplies: statutory schemes*], [*Tobacco supplies: statutory schemes (supplementary)*] and this section.
- (6) The provision which may be made by virtue of subsection (5) includes any provision which may be made by model provisions with respect to appeals under section 6 of the Deregulation and Contracting Out Act 1994 (c. 40), reading—
  - (a) the references in subsections (4) and (5) of that section to enforcement action as references to action taken to implement an enforcement decision,



- (b) in subsection (5) of that section, the references to interested persons as references to any persons and the reference to any decision to take enforcement action as a reference to any enforcement decision.
- (7) In subsections (5) and (6), “enforcement decision” means a decision of the Secretary of State or any other person to—
- (a) require a specific manufacturer or importer to provide information to him,
  - (b) limit, in respect of any specific manufacturer or importer, any price or profit,
  - (c) refuse to give approval to a price increase made by a specific manufacturer or importer,
  - (d) require a specific manufacturer or importer to pay any amount (including an amount by way of penalty) to the Secretary of State,
- and in this subsection “specific” means specified in the decision.
- (8) A requirement or prohibition, or a limit, under section [*Tobacco supplies: statutory schemes*], may only be enforced under this section and may not be relied on in any proceedings other than proceedings under this section.
- (9) Subsection (8) does not apply to any action by the Secretary of State to recover as a debt any amount required to be paid to the Secretary of State under section [*Tobacco supplies: statutory schemes*] or this section.
- (10) The Secretary of State may by order increase (or further increase) either of the sums mentioned in subsection (2).”

Mary Kelly Foy  
 Alex Norris  
 Justin Madders  
 Karin Smyth  
 Jonathan Ashworth  
 Bob Blackman  
 Alex Cunningham  
 Kate Osborne  
 Paula Barker  
 Dr Philippa Whitford

Ian Mearns  
 John McDonnell  
 Mr Clive Betts  
 Barbara Keeley

Hywel Williams  
 Peter Dowd  
 Tony Lloyd

Not called NC37

To move the following Clause—

**“Tobacco supplies: controls: (supplementary)**

- (1) Any power conferred on the Secretary of State by section [*Tobacco supplies: statutory schemes*] and [*Tobacco supplies: statutory schemes (supplementary)*] may be exercised by—
- (a) making regulations, or
  - (b) giving directions to a specific manufacturer or importer.
- (2) Regulations under subsection (1)(a) may confer power for the Secretary of State to give directions to a specific manufacturer or importer; and in this subsection “specific” means specified in the direction concerned.

- (3) In this section and section [*Tobacco supplies: statutory schemes*] and [*Tobacco supplies: statutory schemes (supplementary)*] and [*Tobacco supplies: enforcement*]—

“tobacco product” means a product that can be consumed and consists, even partly, of tobacco;

“manufacturer” means any person who manufactures tobacco products;

“importer” means any person who imports tobacco products into the UK with a view to the product being supplied for consumption in the United Kingdom or through the travel retail sector, and contravention of a provision includes a failure to comply with it.”

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Mary Kelly Foy  
Bob Blackman  
Alex Cunningham  
Ian Mearns  
Hywel Williams  
Kate Osborne  
John McDonnell  
Mr Clive Betts

Peter Dowd  
Tony Lloyd

Paula Barker

**Not called NC38**

To move the following Clause—

**“Age of sale of tobacco**

The Secretary of State may by regulations substitute the age of 21 for the age of 18 for the sale of tobacco and make consequential amendments to the Children and Young Persons Act 1933, the Children and Young Persons (Protection from Tobacco) Act 1991 and the Children and Families Act 2014.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC39**

To move the following Clause—

**“Strategies to manage the needs of carers**

- (1) Each integrated care board must have in place a strategy to collect information on the needs of patients’ carers and respond to those needs to promote the health and wellbeing of carers.
- (2) In this section “carers” has the meaning of Section 10 of the Care Act 2014, Sections 96 and 97 of the Children and Families Act 2014 and Section 1 of the Carers (Recognition and Services) Act 1995.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Not called NC40**

To move the following Clause—

**“Definition of carers**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) In section 275 (Interpretation) insert—

“ “carer” includes carers as defined by Section 10(3) and 10(9) of the Care Act 2014; parents of disabled children with reference to Section 97 of the Children and Families Act 2014; unpaid carers of disabled children as in Section 1 of the Carers (Recognition and Services) Act 1995; young carers with reference to Section 96 of the Children and Families Act 2014; and young carers with reference to Section 63 (6) and Section 63 (7) of the Care Act 2014.” ”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC41**

To move the following Clause—

**“Review of implementation of NHS continuing healthcare by integrated care systems**

- (1) Chapter 3 of Part 1 of the Health and Social Care Act 2008 (quality of health and social care) is amended as follows.
- (2) After section 46A insert—

**“46B Review and performance assessments: integrated care systems**

The Commission must, each year—

- (a) conduct a review of the implementation of NHS continuing healthcare by integrated care systems,
- (b) assess the performance of these systems following the review, and
- (c) publish a report of its assessment.” ”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC42**

To move the following Clause—

**“Alcohol product labelling**

The Secretary of State must by regulations make provision to ensure alcoholic drinks, as defined by the Department for Health and Social Care’s Low Alcohol Descriptors Guidance, published in 2018, or in future versions of that guidance, display—

- (a) the Chief Medical Officers’ low risk drinking guidelines,
- (b) a warning that is intended to inform the public of the danger of alcohol consumption,
- (c) a warning that is intended to inform the public of the danger of alcohol consumption when pregnant,
- (d) a warning that is intended to inform the public of the direct link between alcohol and cancer,
- (e) a full list of ingredients and nutritional information.”

---

Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Negated on division NC43**

To move the following Clause—

**“Annual report on alcohol treatment services: assessment of outcomes**

- (1) The Secretary of State must lay before each House of Parliament at the start of each financial year a report on—
  - (a) the ways in which alcohol treatment providers have been supported in tackling excess mortality, alcohol related hospital admissions, and the burden of disease resulting from alcohol consumption, and
  - (b) the number of people identified as requiring support who are receiving treatment.
- (2) Alongside the publication of the report, the Secretary of State must publish an assessment of the impact of the level of funding for alcohol treatment providers on their ability to deliver a high-quality service that enables patient choice.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC44**

To move the following Clause—

**“Directors of public health**

- (1) The National Health Service Act 2006 is amended as follows.

(2) After section 73A, insert the following section—

**“73AA Powers and duties of directors of public health**

A director of public health appointed under section 73A—

- (a) is an officer of the local authority and has responsibility for its public health functions;
- (b) must be an NHS consultant in public health responsible for giving independent professional public health advice and for promoting public debate on health matters;
- (c) is a corporation sole and NHS body for working with others to initiate measures to improve the health of the people;
- (d) is an officer of the Crown responsible for such functions as the Secretary of State may specify;
- (e) as an officer of the Crown has power to draw the attention of the Chief Medical Officer and the Attorney General to events within the area of the local authority creating circumstances in which it might be appropriate to bring proceedings in the name of the Crown for public health purposes;
- (f) is an officer of the National Health Service responsible for promoting the provision of services which are outcome-focused, are provided following a proper needs assessment and pay attention to the promotion of health and the prevention of illness;
- (g) as an officer of the NHS, has power either personally (in the case of a body which primarily serves the population of the local authority which appointed the DPH) or through joint arrangements with other Directors of Public Health (in the case of a body which primarily serves the population of several local authorities) or through a collective arrangement established by the Chief Medical Officer (in the case of a body with a national remit) to appoint, or approve arrangements for the body to appoint, a consultant in public health to serve on the governing body of any NHS body, any NHS Foundation Trust, any of the bodies established under this Act or any of the bodies established under the Health & Social Care Act 2012. For the avoidance of doubt the consultant so appointed may be, but need not be, the Director of Public Health personally;
- (h) must be contractually required, subject to law, to carry out the functions in paragraphs (b), (c), (e), (f), and (g) as an independent health professional treating a population as a patient and pursuing the improvement of its health and must be contractually entitled not to be subject to any detriment by the local authority or by the Crown for so doing.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC45**

To move the following Clause—

**“Duty on integrated care boards to have regard to net zero commitment**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 14Z43 (inserted by section 19 of this Act) insert—

**“14Z43 Duty to have regard to net zero commitment**

When procuring or commissioning goods and services on behalf of the NHS, integrated care boards must have regard to NHS England’s commitment to reach net zero by 2040.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC46**

To move the following Clause—

**“Exclusion of NHS bodies from ability to withhold information requested under the Freedom of Information Act 2000 on commercial grounds**

- (1) Section 43 of the Freedom of Information Act 2000 is amended as follows.
- (2) After subsection (3), insert—
- “(4) Subsection (2) does not apply to information held by NHS England, integrated care boards, NHS Trusts and NHS Foundation Trusts except to the extent that subsection (5) applies.
- (5) Subsection (2) applies to information held by NHS England, integrated care trusts, NHS Trusts and NHS Foundation Trusts relating to another organisation if disclosure of the information would in the opinion of the organisation pose a real and significant risk to the commercial interests of that organisation.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Not called NC47**

To move the following Clause—

**“Registration of tertiary prevention activities in respect of provision of social care**

- (1) Section 9 of the Health and Social Care Act 2008 is amended in accordance with subsection (2).
- (2) In subsection (3), at end insert “or any form of reablement and rehabilitation provided under section 2 of the Care Act 2014 to reduce the need for care and support”.

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Anne Marie Morris

Not selected NC48

To move the following Clause—

**“Duty on integrated care boards and their providers to update their formularies to include all NICE-approved products**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 14Z43 (inserted by section 19 of this Act) insert—

**“14Z43A Duty to update formularies to include all NICE-approved products**

- (1) Within 28 days of any medicine or device receiving market authorisation from NICE, an integrated care board must update its formulary to include that medicine or device.
- (2) On receipt of notice of the market authorisation by NICE of any medicine or device, an integrated care board must immediately instruct providers of health and care services commissioned by the board to update their formularies in such a way that all NICE-approved medicines and devices are available to patients on the recommendation of a healthcare practitioner within 28 days of market authorisation.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Withdrawn after debate NC49

To move the following Clause—

**“Protection of the title of “nurse”**

- (1) A person may not practise or carry on business under any name, style or title containing the word “nurse” unless that person is registered with the Nursing and Midwifery Council and entered in sub part 1 or 2 of the register as a Registered Nurse or in the specialist community public health nursing part of the register.
- (2) Subsection (1) does not prevent any use of the designation “veterinary nurse”, “dental nurse” (for which see section 36K of the Dentists Act 1984) or “nursery nurse”.
- (3) A person who contravenes subsection (1) is guilty of an offence and liable on summary conviction to a fine not exceeding level four on the standard scale.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Withdrawn after debate NC50

To move the following Clause—

**“Access to innovative medicines and medicinal products review**

- (1) The Secretary of State must undertake and publish a review of the use by the NHS of innovative medicines and medicinal products.
- (2) The review must—
  - (a) conclude before 31 December 2022;
  - (b) consider ways to improve the use of innovative medicines and medicinal products within the NHS in England.
- (3) The review may consider—
  - (a) the creation of a specific pathway to assess medicines and medicinal products for rare and less common conditions;
  - (b) improvements to the way in which patient and clinical experience is accommodated when considering the adoption of new medicines and medicinal products.”

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Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

**Withdrawn after debate NC51**

To move the following Clause—

**“Duty on integrated care partnerships to prepare and deliver a Best Start for Life strategy**

- (1) The Local Government and Public Involvement in Health Act 2007 is amended in accordance with subsection (2).
- (2) After section 116B (substituted by section 20 of this Act) insert—

**“116C Duty on integrated care partnerships to prepare and deliver a Best Start for Life strategy**

- (1) Each integrated care partnership must—
  - (a) assess the needs of expectant parents, infants and young children in its area;
  - (b) prepare and publish a strategy to improve outcomes and reduce inequalities among expectant parents, infants and young children;
  - (c) consult parents and carers in the area when developing the strategy;
  - (d) monitor and evaluate the effectiveness of the strategy.
- (2) Local authorities, NHS bodies and other relevant partners must—
  - (a) cooperate on delivering the strategy;
  - (b) have regard to the strategy when exercising their functions.””



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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Negatived on division NC52**

To move the following Clause—

**“Plan for implementing recommendations of the Independent Medicines and Medical Devices review**

The Secretary of State must, within six months, publish a report containing a plan for the implementation in full of the recommendations of the Independent Medicines and Medical Devices review that have hitherto not been implemented.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC53**

To move the following Clause—

**“Women’s representation in reproductive healthcare planning**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 14Z42 (inserted by section 19 of this Act) insert—

**“14Z24A Duties regarding reproductive healthcare planning**

Integrated care boards, when making policy decisions regarding the delivery of reproductive healthcare, must—

- (a) conduct regular and ongoing consultation to ensure that women are meaningfully involved in, and inform these decisions; and
- (b) work in partnership with non-profit sector partners and local community groups with existing expertise in this area.””

---

Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC54**

To move the following Clause—

**“Enhanced data collection**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 14Z43 (inserted by section 19 of this Act) insert—

**“14Z43A Duty to develop data collection systems**

Integrated care boards must—

- (a) develop single whole-system IT systems across the whole of their integrated care system with the explicit purpose of supporting data collection and sharing;
- (b) prioritise the use of those data systems for streamlining patient pathways;
- (c) establish mandatory standards for patient-initiated follow ups; and
- (d) use the data systems developed under paragraph (a) to report on a regular basis performance against improving patient outcomes in line with the standards established under paragraph (c)."

---

Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

**Not called NC55**

To move the following Clause—

**“Nutrient profiling model**

Before making any adjustments to the nutrient profiling model used for the purposes of regulations under the Communications Act 2003, or of any other enactment, the Secretary of State must undertake a full and open formal consultation.”

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Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

**Withdrawn after debate NC56**

To move the following Clause—

**“Domestic violence training for GPs**

- (1) The National Health Service Act 2006 is amended as follows.
- (2) After section 83B (inserted by paragraph 3 of Schedule 3 of this Act) insert—

**“83C Duty concerning domestic violence and abuse**

Integrated care boards must ensure that specialist domestic violence and abuse training, support and referral programmes are universally available to all general practitioners.”

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Justin Madders  
 Alex Norris  
 Karin Smyth  
 Mary Kelly Foy  
 Jonathan Ashworth

**Withdrawn after debate NC57**

To move the following Clause—

**“Cancer strategy**

Within 12 months the Secretary of State must—

- (a) publish a new cancer strategy; and
- (b) either designate a minister or appoint a national lead with responsibility for enacting its implementation.”

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**TWENTY-SECOND SITTING**

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

**Withdrawn after debate NC58**

To move the following Clause—

**“Duty on NHS England to promote evidence-based public health programmes**

- (1) NHS England must promote to integrated care boards the value of evidence-based public health programmes.
- (2) NHS England must publish a report each year on the state of evidence-based public health programmes within England and their impact.”

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Karin Smyth

**Withdrawn after debate NC63**

To move the following Clause—

**“Young carers’ needs assessments following hospitalisation**

In the Children Act 1989, after section 17ZC, insert—

**“17ZCA Young carers’ needs assessments following hospitalisation**

- (1) An NHS trust or NHS foundation trust must ascertain during hospitalisation whether a patient when discharged will be cared for primarily by a young carer.
- (2) Where an NHS trust or NHS foundation trust ascertains that a patient when discharged will be cared for primarily by a young carer then the NHS trust or NHS foundation trust must give the local authority where the patient lives notice that a young carer will require a needs assessment.
- (3) The local authority receiving notice under subsection (2) must carry out a needs assessment, and in doing so must—
  - (a) ascertain whether it is appropriate for the young carer to provide care, and

- (b) identify what support or services need to be in place for safe discharge of the patient.
- (4) The needs assessment required by subsection (3) must be conducted before the patient is discharged.””

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Not called NC64

To move the following Clause—

**“Cancer treatment data reporting**

- (1) Beginning within 6 months of the passage of this Act, the Secretary of State must publish each month data on—
  - (a) the number of patients awaiting treatment for cancer,
  - (b) the number of patients with a cancer diagnosis, and
  - (c) what NHS’s previous estimate was of the number of patients who would have a cancer diagnosis at that point in time.
- (2) Six months after the publication of the first report under subsection (1), and every six months thereafter, the Secretary of State must publish a report on the action being taken to reduce the number of patients awaiting treatment for cancer.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Withdrawn after debate NC65

To move the following Clause—

**“Review of the surgical consultant appointment process**

The Secretary of State must review the National Health Service (Appointment of Consultants) Regulations 1996 and its most recent guidance and, within six months of the passage of this Act, publish a report on the surgical consultant appointment process.”

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Justin Madders  
Alex Norris  
Karin Smyth  
Mary Kelly Foy  
Jonathan Ashworth

Withdrawn after debate NC66

To move the following Clause—

**“Support provided by the NHS to populations at risk of malnutrition**

- (1) Each integrated care board must—

- (a) assess, or make arrangements for the assessment of, the need for support for patients and/or populations at risk of malnutrition, including social and clinical/disease related malnutrition, 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; and
  - (d) designate a malnutrition lead.
- (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; and
  - (b) such other persons as the relevant local authority considers appropriate.
- (4) For the purposes of subsection (3), "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 (6) 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."

---

Justin Madders

**Withdrawn after debate NC67**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

To move the following Clause—

**“Review of the capacity of the dental laboratory sector**

The Secretary of State must within six months of the passage of this Act publish a report assessing the capacity of the dental laboratory sector in the UK to meet the needs of patients.”

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Justin Madders

**Not called NC68**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

To move the following Clause—

**“Access to NHS dentistry**

The Secretary of State must within one year of the passage of this Act publish a statement setting out what measures the Government is taking to ensure universal access to NHS dentistry.”

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Justin Madders

**Negated on division NC69**

Alex Norris

Karin Smyth

Mary Kelly Foy

Jonathan Ashworth

To move the following Clause—

**“National lead for policy related to allergies**

Within 6 months of the passage of this Act the Secretary of State must direct NHS England to designate a national lead for policy related to allergies.”

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Dr Philippa Whitford

**Not called NC70**

To move the following Clause—

**“Appointment of surgical consultants**

- (1) The National Health Service (Appointment of Consultants) Regulations 1996 (S.I. 1996/701) are amended in accordance with subsection (2).
- (2) In paragraph (1) of regulation 2, in the entry for “relevant college”, in sub-paragraph (d), for “and its associated Faculty of Dental Surgery”, substitute “, the Royal College of Surgeons of Edinburgh, the Royal

College of Physicians and Surgeons of Glasgow and each of their associated Dental Faculties”.”

*Bill, as amended, to be reported.*

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## Glossary

**Added:** New Clause agreed without a vote and added to the Bill.

**Agreed to:** agreed without a vote.

**Agreed to on division:** agreed following a vote.

**Negated:** rejected without a vote.

**Negated on division:** rejected following a vote.

**Not called:** debated in a group of amendments, but not put to a decision.

**Not moved:** not debated or put to a decision.

**Question proposed:** debate underway but not concluded.

**Withdrawn after debate:** moved and debated but then withdrawn, so not put to a decision.

**Not selected:** not chosen for debate by the Chair.

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