
Report Stage: Tuesday 16 November 2021

Health and Care Bill, As Amended (Amendment Paper)

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 Any withdrawn amendments are listed at the end of the document.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

★ New Amendments.

☆ Amendments which will comply with the required notice period at their next appearance.

New amendments: 10 to 39 and NC15 to NC20

Caroline Nokes
Mr Kevan Jones
Sarah Champion
Caroline Lucas
Anne Marie Morris
Paula Barker
Sir Roger Gale

Margaret Ferrier

NC1

To move the following Clause—

“Licensing of aesthetic non-surgical cosmetic procedures

- (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 aesthetic non-surgical procedures 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.”

Member's explanatory statement

This new clause gives the Secretary of State the power to introduce a licensing regime for aesthetic non-surgical cosmetic procedures and makes it an offence for someone to practise without a licence. The list of treatments, detailed conditions and training requirements would be set out in regulations after consultation with relevant stakeholders.

Mary Kelly Foy

NC2

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.”

Member's explanatory statement

This new clause would give powers to the Secretary of State to require manufacturers to print health warnings on individual cigarettes.

Mary Kelly Foy

NC3

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.”

Member's explanatory statement

This new clause would give powers to the Secretary of State to require manufacturers to insert leaflets containing health information and information about smoking cessation services inside cigarette packaging.

Mary Kelly Foy

NC4

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.”

Member's explanatory statement

This new clause would give powers to the Secretary of State to prohibit branding on e-cigarette packaging which is appealing to children.

Mary Kelly Foy

NC5

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.”

Member’s explanatory statement

This new clause would give powers to the Secretary of State to prohibit the free distribution or sale of any consumer nicotine product to anyone under 18, while allowing the sale or distribution of nicotine replacement therapy licensed for use by under 18s.

Mary Kelly Foy

NC6

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.”

Member’s explanatory statement

This new clause would give powers to the Secretary of State to prohibit any flavouring in any tobacco product or smoking accessory.

Mary Kelly Foy

NC7

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.”

Member’s explanatory statement

This new clause and NC8, NC9 and NC10 would enable the Secretary of State for Health and Social Care to regulate prices and profits of tobacco manufacturers and importers.

Mary Kelly Foy

NC8

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.”

Member’s explanatory statement

This new clause and NC7, NC9 and NC10 would enable the Secretary of State for Health and Social Care to regulate prices and profits of tobacco manufacturers and importers.

Mary Kelly Foy

NC9

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).”

Member’s explanatory statement

This new clause and NC7, NC8 and NC10 would enable the Secretary of State for Health and Social Care to regulate prices and profits of tobacco manufacturers and importers.

Mary Kelly Foy

NC10

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.”

Member’s explanatory statement

This new clause and NC7, NC8 and NC9 would enable the Secretary of State for Health and Social Care to regulate prices and profits of tobacco manufacturers and importers.

Mary Kelly Foy

NC11

To move the following Clause—

“Age of sale of tobacco

The Secretary of State must consult on raising the age of sale for tobacco from 18 to 21 within three months of the passage of this Act.”

Member’s explanatory statement

This new clause would require the Secretary of State to consult on raising the age of sale for tobacco products to 21.

Dawn Butler

NC12

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.”

Peter Dowd

NC13

To move the following Clause—

“National self-care strategy

- (1) The Secretary of State must prepare a National Self-Care Strategy to fully integrate self-care for minor ailments into the wider health system.
- (2) The National Self-Care Strategy must have regard to the need to—
 - (a) address inequalities in health literacy;
 - (b) enhance the understanding of primary and secondary age children on how to self-care;
 - (c) introduce self-care modules in healthcare professionals’ training curricula and continuing professional development;
 - (d) make best use of, and expand, the Community Pharmacist Consultation Service;
 - (e) improve access to effective self-care treatments;
 - (f) enable community pharmacists to refer people directly to other healthcare professionals;
 - (g) ensure better support for primary care networks to deliver self-care;
 - (h) evaluate the use of technologies that have been developed during the COVID-19 pandemic to promote greater self-care; and
 - (i) accelerate efforts to enable community pharmacists to populate medical records.”

Member’s explanatory statement

The new clause would ensure that the Secretary of State for Health and Social Care publishes a national self-care strategy to integrate self-care for minor ailments into the health system.

Richard Fuller

NC14

☆ To move the following Clause—

“Implementation of Restrictions on advertising of less healthy food and drink online

The regulator shall put in place a mechanism for the delivery of the requirements under Part 2 of Schedule 16 which shall require that advertisers—

- (a) apply media targeting filters, based on robust audience measurement data, to ensure the avoidance of children’s media or editorial content of particular appeal to children;
- (b) use audience targeting tools and, where available, proprietary audience or other first-party data to further exclude children; and
- (c) use campaign evaluation tools to assess audience impacts and use any learning to continually improve future targeting approaches.”

Member's explanatory statement

This new clause would require the regulator to put in place a three-step "filtering" process for restricting online advertising by managing the targeting of an online advertising campaign for foods that are high in fat, salt or sugar, as developed by the Committee of Advertising Practice of the Advertising Standards Authority.

Dan Carden

NC15

★ 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, and
- (e) a full list of ingredients and nutritional information."

Member's explanatory statement

This new clause requires the Secretary of State to introduce secondary legislation on alcohol product labelling.

Dan Carden

NC16

★ 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."

Member's explanatory statement

This new clause would require the Secretary of State for Health and Social Care to make an annual statement on how the funding received by alcohol treatment providers has supported their work to improve treatment and reduce harm.

Dan Carden

NC17

★ To move the following Clause—

“Minimum unit price for alcohol

- (1) 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 later versions of that document, are liable to a minimum unit price.
- (2) The regulations must provide for the minimum unit price to be calculated by applying the formula $M \times S \times V$, where—
 - (a) M is the minimum unit price, expressed in pounds sterling,
 - (b) S is the percentage strength of the alcohol, expressed as a cardinal number, and
 - (c) V is the volume of the alcohol, expressed in litres.”

Member's explanatory statement

This new clause requires the Secretary of State to introduce secondary legislation that applies a minimum unit price to alcohol.

Peter Aldous
Sir Peter Bottomley

NC18

★ To move the following Clause—

“Secretary of State's duty to report on access to NHS dentistry

- (1) The Secretary of State must publish an annual report setting out levels of access to NHS dentistry across England and average waiting times for primary care dental treatment in each region, and describing the action being taken to improve them.
- (2) NHS England and Health Education England must assist in the preparation of a report under this section, if requested to do so by the Secretary of State.”

Member's explanatory statement

This new clause would require the Secretary of State to report annually on the levels of access to NHS dentistry in England, setting out average waiting times for primary care dental treatment in each region, and describing action being taken to improve them as necessary.

Mr John Baron

NC19

★ To move the following Clause—

“Inclusion in the NHS mandate of cancer outcome targets

- (1) Section 13A of the National Health Service Act 2006 (Mandate) is amended in accordance with subsection (2).
- (2) After subsection (2), insert the following new subsection—

“(2A) The objectives that the Secretary of State considers NHS England should seek to achieve which are specified in subsection (2)(a) must include objectives for cancer treatment defined by outcomes for patients with cancer, and those objectives are to be treated by NHS England as having priority over any other objectives relating to cancer treatment.””

Member’s explanatory statement

This new clause would require the Secretary of State to set objectives for the NHS on cancer treatment which are defined by outcomes (such as one-year or five-year survival rates), and would give those objectives priority over any other objectives relating to cancer treatment (such as waiting times).

Anne Marie Morris

NC20

★ To move the following Clause—

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

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

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

Member’s explanatory statement

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

Anne Marie Morris

21

★ Clause 15, page 14, line 43, at end 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.”

Member’s explanatory statement

This amendment would require an integrated care board to arrange for the provision of a NICE-approved treatment to any patient whose NHS clinician has recommended it, even if that treatment is not otherwise available to patients in that ICB area.

Anne Marie Morris

22

★ Clause 19, page 17, line 4, at end insert—

“14Z37A Obligation on integrated care boards to ensure appropriate uptake of all NICE approved products according to population need

- (1) Each 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.”

Member's explanatory statement

This amendment would require ICBs to ensure that all NICE approvals are available and promoted to their population, and report on this uptake annually.

Anne Marie Morris

19

★ Clause 19, page 17, line 14, at end insert—

"14Z39A Duty to review latest innovations with a view to local commissioning

- (1) Integrated care boards must review all new—
 - (a) medicines,
 - (b) medical devices, and
 - (c) other health care solutions that may benefit the local population.
- (2) Integrated care boards must—
 - (a) appoint a dedicated innovation officer to their board, and
 - (b) develop and maintain a system to keep up to date with medicines and devices innovation and review suitability for patient usage, including engagement with the relevant—
 - (i) academic health science network, and
 - (ii) local pharmaceutical committee."

Member's explanatory statement

This amendment would mandate integrated care boards to monitor and assess innovation for the benefit of the local population.

Anne Marie Morris

16

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

- "(2) Each integrated care board must each year prepare, consult on and adopt a research strategy for patient benefit which—
- (a) meets local need;
 - (b) meets national research undertakings.
- (3) In developing a strategy under subsection (2), an integrated care board must engage with—
- (a) the National Institute for Health Research,
 - (b) academic health science networks, and
 - (c) all other relevant regional and national health research organisations."

Member's explanatory statement

This amendment would require ICBs to establish a research strategy and other connected measures.

Anne Marie Morris

17

★ Clause 19, page 18, line 38, at end insert—

“14Z43A Duty on integrated care boards to consider requests to engage in clinical trials, and patient participation

- (1) An integrated care board must consider any request from the organiser of an authorised clinical trial for the ICB to engage in that trial.
- (2) If such a request is accepted, the integrated care board must offer the ability to participate in the trial to any patient within their area who is eligible to take part.”

Member’s explanatory statement

This amendment would require integrated care boards to consider any requests to engage in clinical trials and offer patients the opportunity to participate.

Anne Marie Morris

20

★ Clause 19, page 18, line 38, at end 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.
- (3) An integrated care board must report annually all medicines and devices that have been added and removed from their formulary over the previous year.”

Member’s explanatory statement

This amendment would mandate integrated care boards and healthcare providers (e.g. hospital trusts) to update their formularies to include all NICE-approved medicines or devices within 28 days of market authorisation to ensure they are available for healthcare practitioners (e.g. physician or prescribing pharmacist) to make available for suitable patients.

Anne Marie Morris

18

★ Clause 19, page 25, line 6, at end insert—

- “(d) explain what research activity it undertook during the year, including
 - (i) research to meet local health issues, and

(ii) research to support national research projects.

(2A) The annual report prepared by the Secretary of State under section 247D of this Act must include a section which reproduces, and comments on, the sections of the annual reports of each integrated care board prepared under paragraph (1)(d)."

Member's explanatory statement

This amendment would require integrated care boards to publish an account of their research activity, and require the report the Secretary of State must prepare and lay before Parliament under section 247D of the National Health Service Act 2006 to include a section which reproduces, and comments on, the research activity of all ICBs.

Anne Marie Morris

23

★ Clause 19, page 25, line 14, at end insert—

"14Z56A Report on assessing and meeting parity of physical and mental health outcomes

- (1) An integrated care board must annually set out in a report the steps it has taken to fulfil its obligations to deliver parity of esteem between physical and mental health to its local population.
- (2) The report must set out—
 - (a) the number of patients presenting with mental health conditions,
 - (b) the number of patients presenting with physical health conditions,
 - (c) the number of mental health patients waiting for initial assessment,
 - (d) the number of physical health patients waiting for initial assessment,
 - (e) the number of mental health patients waiting for treatment,
 - (f) the number of physical health patients waiting for treatment,
 - (g) the number of mental health patients receiving treatment,
 - (h) the number of physical health patients receiving treatment,
 - (i) the number of patients readmitted to mental healthcare settings, and
 - (j) the number of patients readmitted to physical healthcare settings.
- (3) The report must set out performance against nationally set standards in both physical and mental health.
- (4) Each year the Secretary of State must lay before Parliament a consolidated report of all the reports made by integrated care boards under this section, and make a statement to each House of Parliament on the report."

Member's explanatory statement

This amendment would require an ICB to report on assessing and meeting parity of physical and mental health outcomes.

Dame Diana Johnson

15

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

“(2A) The Secretary of State may by regulations make provision about representation of particular health, social care, and local interests, clinical fields, and types of health or care provision in the membership of integrated care partnerships.”

Peter Dowd

1

Clause 20, page 29, line 45, at end insert—

“(c) fully integrate the promotion of everyday wellbeing, self-care for minor ailments and the management of long-term conditions into local health systems.”

Member's explanatory statement

This amendment would ensure that everyday wellbeing, self-care for minor ailment and management of long term conditions are integrated and promoted into local health systems.

Peter Dowd

2

Clause 20, page 30, line 3, after “services” insert “including services provided by pharmacists for minor ailments”

Member's explanatory statement

This amendment would ensure that integrated care partnerships include in a strategy its views on how health-related services, including provision for self-treatable conditions, are integrated into health and social care services in that area.

Jeremy Hunt

10

Sir Peter Bottomley

Sir Bernard Jenkin

Jonathan Ashworth

Daisy Cooper

Dr Philippa Whitford

Mr Andrew Mitchell

Sir Paul Beresford

Mark Garnier

Philip Dunne

Craig Tracey

Anne Marie Morris

Tim Farron

Hilary Benn

Rosie Cooper

Sarah Champion

Dame Meg Hillier

Chris Skidmore

Greg Clark

Ms Nusrat Ghani

Richard Graham

Sir Roger Gale

Grahame Morris

Munira Wilson

Taiwo Owatemi

Barbara Keeley

Neale Hanvey

Wera Hobhouse

David Morris

Harriett Baldwin

Paul Bristow

Mr Tobias Ellwood

Dr Liam Fox

Dr Lisa Cameron

Caroline Lucas

Sarah Owen

Andrew Gwynne

Hannah Bardell

★ Clause 34, page 42, line 12, leave out from beginning to the end of line 17 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 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; and
- (b) an independently verified assessment 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.”

Member’s explanatory statement

This amendment would require the Government to publish independently verified assessments every two years of current and future workforce numbers required to deliver care to the population in England, based on the economic projections made by the Office for Budget Responsibility, projected demographic changes, the prevalence of different health conditions and the likely impact of technology.

Richard Burgon
 Rebecca Long Bailey
 John McDonnell
 Apsana Begum
 Nadia Whittome
 Andy McDonald
 Grahame Morris
 Ms Diane Abbott
 Clive Lewis
 Zarah Sultana

Bell Ribeiro-Addy
 Ian Mearns
 Dawn Butler
 Claudia Webbe

Ian Lavery
 Jon Trickett
 Jeremy Corbyn
 Ian Byrne

9

☆ Clause 69, page 64, line 1, at end insert—

“(3A) The regulations must provide that—

- (a) there is a presumption—
 - (i) in favour of contracts being awarded to NHS trusts and NHS foundation trusts, and
 - (ii) that integrated care provider contracts will not be awarded to a body other than to an NHS trust or an NHS foundation trust, except for under the provisions of paragraph (b);
- (b) if an NHS trust or an NHS foundation trust does not consider that it is able, or does not wish, to provide certain services under a contract, it must publish its reasons;
- (c) if paragraph (b) applies, the integrated care board must consult the public if it proposes to award any contract for those services to any body other than an NHS trust or NHS foundation trust;
- (d) a consultation under paragraph (c) must—
 - (i) set out the responses of the integrated care provider to the reasons given by the NHS trust or NHS foundation trust under paragraph (b),
 - (ii) specify the proposed parties to and the full terms and conditions of the proposed contract, and
 - (iii) specify that the terms and conditions for staff under the proposed contract must be at least equivalent to NHS terms and conditions.”

Member’s explanatory statement

This amendment would make NHS trusts and foundation trusts the default providers of NHS services.

Secretary Sajid Javid

24

- ★ Clause 121, page 103, line 16, leave out “sections 112 and 113” and insert “the case of an investigation mentioned in section 112(1)(b), 113 or 114”

Member’s explanatory statement

This amendment clarifies that the provisions of Part 4 of the Bill about investigations apply only to investigations carried out by the HSSIB in exercising its main investigation function (and not, for example, investigations carried out to assist NHS bodies or investigations carried out under an agreement with another person relating to Wales or Northern Ireland).

Dan Carden

14

- ★ Clause 138, page 118, line 5, after “drink)”, insert “and section [*Minimum unit price for alcohol*]”

Member’s explanatory statement

This amendment would bring NC17 into force at the same time as section 129 and Schedule 16 (advertising of less healthy food and drink).

Secretary Sajid Javid

25

- ★ Schedule 2, page 125, line 26, at end insert—

“3A The constitution must prohibit a person from appointing someone as a member (“the candidate”) if they consider that the appointment could reasonably be regarded as undermining the independence of the health service because of the candidate’s involvement with the private healthcare sector or otherwise.”

Member’s explanatory statement

This amendment prevents the appointment of a member of an integrated care board if they could reasonably be regarded as undermining the independence of the NHS because of their involvement in the private healthcare sector or otherwise.

Secretary Sajid Javid

26

- ★ Schedule 2, page 126, line 14, at beginning insert “at least”

Member’s explanatory statement

This amendment makes it clear that the constitution of an ICB may provide for more than one member to be nominated by NHS trusts and NHS foundation trusts.

Secretary Sajid Javid

27

- ★ Schedule 2, page 126, line 19, at beginning insert “at least”

Member’s explanatory statement

This amendment makes it clear that the constitution of an ICB may provide for more than one member to be nominated by primary medical service providers.

Secretary Sajid Javid

28

- ★ Schedule 2, page 126, line 24, at beginning insert “at least”

Member’s explanatory statement

This amendment makes it clear that the constitution of an ICB may provide for more than one member to be nominated by local authorities.

Secretary Sajid Javid

29

- ★ Schedule 3, page 143, line 31, at end insert—

“Health and Social Care (Community Health and Standards) Act 2003

47A In section 150 of the Health and Social Care (Community Health and Standards) Act 2003 (liability to pay NHS charges), in subsection (7)(d), for “99” substitute “99A”.”

Member’s explanatory statement

This amendment is consequential on the amendments made to Part 5 of the National Health Service Act 2006 by Part 1 of Schedule 3 to the Bill. It ensures that primary dental services provided by virtue of the provisions in Part 5 of the National Health Service Act 2006 will continue to be excluded from the definition of “NHS treatment” in section 150 of the Health and Social Care (Community Health and Standards) Act 2003.

Secretary Sajid Javid

30

- ★ Schedule 4, page 173, line 29, at end insert—

“Network and Information Systems Regulations 2018 (S.I. 2018/506)

233A The Network and Information Systems Regulations 2018 are amended as follows.

233B In regulation 1(2) (interpretation), in the definition of “OES”, after “regulation 8(1)” insert “or (2A)”.

233C(1) Regulation 8 (identification of operators of essential services) is amended as follows.

(2) After paragraph (2) insert—

“(2A) Each integrated care board is deemed to be designated as an OES for the healthcare settings subsector and, in relation to an integrated care board, any services provided by it (including the making of arrangements for the provision of services by others) are deemed to be essential services.”

(3) In paragraph (8), after “paragraph (1)” insert “or (2A)”.

Member’s explanatory statement

This amendment ensures that the Network and Information Systems Regulations 2018 apply to integrated care boards.

Richard Fuller

3

☆ Schedule 16, page 222, line 8, at end insert—

“(3) A brand may continue to advertise, or provide sponsorship, if the advertisement or sponsorship does not include an identifiable less healthy food and drink product.”

Member’s explanatory statement

This amendment makes an explicit exemption from the advertising restrictions on television programme services between 5.30 am and 9.00 pm for brand advertising and sponsorship, where there is no identifiable less healthy food and drink product.

Secretary Sajid Javid

31

★ Schedule 16, page 222, leave out lines 9 to 11

Member’s explanatory statement

This amendment is consequential on Amendment 33.

Secretary Sajid Javid

32

★ Schedule 16, page 222, line 14, at end insert “and anything else which, under a sponsorship agreement, is included in a television programme service, other than in a television programme;”

Member's explanatory statement

This amendment makes it clearer that sponsorship credits in television programme services are included in the meaning of "advertising" in the new section 321A of the Communications Act 2003 inserted by Schedule 16.

Dan Carden

11

- ★ Schedule 16, page 222, line 26, 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;"

Member's explanatory statement

This amendment ensures that alcohol is considered a "less healthy" product and therefore liable to the watershed proposed for TV programme services.

Secretary Sajid Javid

33

- ★ Schedule 16, page 222, line 36, at end insert—

"(6A)Before making regulations under subsection (2)(b) or (6), the Secretary of State must consult such persons as the Secretary of State considers appropriate."

Member's explanatory statement

This amendment requires the Secretary of State to consult before making regulations changing the meaning of "the relevant guidance" for the purposes of the television advertising provisions of Schedule 16.

Richard Fuller

6

- ☆ Schedule 16, page 222, line 38, after "unless", insert "a public consultation has been carried out on the proposed change to the relevant guidance, and".

Member's explanatory statement

This amendment requires a public consultation to take place before any change can be made to the Nutrient Profiling Technical Guidance under which a food or drink product may be identified as "less healthy" and its advertising restricted on television programme services between 5.30 am and 9.00 pm.

Richard Fuller

4

- ☆ Schedule 16, page 223, line 4, at end insert—

"(3) A brand may continue to advertise, and provide sponsorship as a brand, if the advertisement or sponsorship does not include an identifiable less healthy food and drink product."

Member's explanatory statement

This amendment makes explicit exemptions from the advertising restrictions on on-demand programme services for brand advertising and sponsorship, where there is no identifiable less healthy food and drink product.

Secretary Sajid Javid

34

- ★ Schedule 16, page 223, leave out lines 7 to 9

Member's explanatory statement

This amendment is consequential on Amendment 36.

Secretary Sajid Javid

35

- ★ Schedule 16, page 223, line 11, after second "advertisements" insert "and sponsorship announcements (within the meaning given by section 368G(17))"

Member's explanatory statement

This amendment makes it clearer that sponsorship announcements in on-demand programme services are included in the meaning of "advertising" in the new section 368FA of the Communications Act 2003 inserted by Schedule 16.

Dan Carden

12

- ★ Schedule 16, page 223, line 24, 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;"

Member's explanatory statement

This amendment ensures that alcohol is considered a "less healthy" product and therefore liable to the watershed proposed for TV programme services.

Secretary Sajid Javid

36

- ★ Schedule 16, page 223, line 34, at end insert—
 - "(7A)Before making regulations under subsection (3) or (7), the Secretary of State must consult such persons as the Secretary of State considers appropriate."

Member's explanatory statement

This amendment requires the Secretary of State to consult before making regulations changing the meaning of "the relevant guidance" for the purposes of the provisions of Schedule 16 relating to advertising in on-demand programme services.

Richard Fuller

7

- ☆ Schedule 16, page 223, line 36, after “unless”, insert “a public consultation has been carried out on the proposed change to the relevant guidance, and”.

Member’s explanatory statement

This amendment requires a public consultation to take place before any change can be made to the Nutrient Profiling Technical Guidance under which a food or drink product may be identified as “less healthy” and its advertising restricted on on-demand programme services.

Secretary Sajid Javid

37

- ★ Schedule 16, page 224, line 21, leave out from “to” to “advertisements” in line 24

Member’s explanatory statement

This amendment widens the exception from the prohibition in new section 368Z14(3)(d) (online advertising of less healthy food and drink) for advertising not intended to be accessed principally from the UK, so that the exception applies to businesses in the UK as well as those outside it.

Richard Fuller

5

- ☆ Schedule 16, page 224, line 26, at end insert—

“(4) A brand may continue to advertise, and provide sponsorship as a brand, if the advertisement does not include an identifiable less healthy food and drink product.”

Member’s explanatory statement

This amendment makes an explicit exemption from the restrictions on online advertising for brand advertising and sponsorship, where there is no identifiable less healthy food and drink product.

Secretary Sajid Javid

38

- ★ Schedule 16, page 224, leave out lines 29 to 31

Member’s explanatory statement

This amendment is consequential on Amendment 39.

Dan Carden

13

- ★ Schedule 16, page 225, line 10, 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;”

Member's explanatory statement

This amendment ensures that alcohol is considered a "less healthy" product and therefore liable to the online ban.

Secretary Sajid Javid

39

- ★ Schedule 16, page 225, line 22, at end insert—

"(8A)Before making regulations under subsection (4) or (8), the Secretary of State must consult such persons as the Secretary of State considers appropriate."

Member's explanatory statement

This amendment requires the Secretary of State to consult before making regulations changing the meaning of "the relevant guidance" for the purposes of the provisions of Schedule 16 relating to online advertising.

Richard Fuller

8

- ☆ Schedule 16, page 225, line 24, after "unless", insert "a public consultation has been carried out on the proposed change to the relevant guidance, and".

Member's explanatory statement

This amendment requires a public consultation to take place before any change can be made to the Nutrient Profiling Technical Guidance under which a food or drink product may be identified as "less healthy" and its advertising restricted online.

Order of the House

[14 July 2021]

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

Committal

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

Proceedings in Public Bill Committee

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

Proceedings on Consideration and Third Reading

4. Proceedings on Consideration shall (so far as not previously concluded) be brought to a conclusion one hour before the moment of interruption on the day on which proceedings on Consideration are commenced.
5. Proceedings on Third Reading shall (so far as not previously concluded) be brought to conclusion at the moment of interruption on that day.

6. Standing Order No.83B (Programming committees) shall not apply to proceedings on Consideration and Third Reading.

Other proceedings

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