

Health and Care Bill

AMENDMENTS TO BE MOVED ON REPORT

Clause 16

BARONESS FINLAY OF LLANDAFF
BARONESS FRASER OF CRAIGMADDIE

Page 14, line 23, at end insert –

- “(5) For the purposes of this section “specialist multi-professional palliative care services” must include the provision of –
- (a) specialist support in every setting, including private homes, care homes, hospitals, hospices and other community settings, working with local clinical teams,
 - (b) specialist level in-patient palliative care beds when required, including admission on an urgent basis,
 - (c) specialist palliative care advice, available at all times of day every day, to support health and social care professionals who are providing care to the person and their family,
 - (d) support to ensure the right, skilled workforce, equipment and medication is available to deliver this care,
 - (e) a point of contact, available for people with palliative and end of life care needs if their usual source of support is not accessible,
 - (f) appropriate systems to share information about the person’s needs with all professionals involved in their care, provided they give consent for this,
 - (g) support to ensure patients and their families are able to have open conversations about what matters to them,
 - (h) support for the education and training of the health and social care workforce, and
 - (i) support to enable staff to participate in relevant research and disseminate evidence-based innovations in palliative care.”

Clause 21

LORD MCCOLL OF DULWICH
BARONESS HOLLINS

Page 29, line 35, at end insert –

- “(2A) In preparing a strategy under this section, an integrated care partnership must consider the needs of those with dementia, including how it plans to –
- (a) Consistently meet or exceed the target dementia diagnosis rate of 66.7%, and
 - (b) Improve public participation in dementia research.”

After Clause 71

LORD BLENCATHRA

Insert the following new Clause –

“Health service procurement and supply chains: genocide convention obligations

- (1) The Secretary of State must by regulations make provision for the purposes of ensuring that procurement of all goods and services for the purposes of the health service in England is consistent with the United Kingdom's obligations under the Convention on the Prevention and Punishment of the Crime of Genocide.
- (2) For the purposes of subsection (1), procurement is not consistent if a Minister of the Crown has assessed that there is a serious risk of genocide in the sourcing region.
- (3) A Minister of the Crown must make an assessment as to whether there is serious risk if the chair of a relevant select committee of either House of Parliament requests one, and must complete such assessment within two months.”

After Clause 148

LORD HUNT OF KINGS HEATH

Insert the following new Clause –

“Vaccine damage payments

Within 6 months of the passing of this Act, the Secretary of State must establish an independent judge led review into the operation of the Vaccine Damage Payments Act 1979 and the adequacy of payments offered to persons seriously injured, or bereaved, consequent upon vaccination against any of the specified diseases to which the Act applies.”

Member’s explanatory statement

The Vaccine Damage Payment Act is now more than 40 years old and the aim of the amendment is to ensure that a judge led review takes place into the operation of the Act.

LORD HUNT OF KINGS HEATH
LORD CLEMENT-JONES

Insert the following new Clause—

“Secretary of State: Duty to promote and ensure the full integration of self care for minor ailments within the health system

- (1) The Secretary of State, in exercise of his or her functions, must promote self care for minor ailments and prepare a national self care strategy to integrate self care fully into the wider health system.
- (2) The national self care strategy referred to in subsection (1) must include measures to—
 - (a) improve 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 (PCNs) to deliver self care,
 - (h) evaluate the use of technologies 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

This amendment would ensure that the Secretary of State promotes self care for minor ailments and publishes a national self care strategy to fully integrate it into the wider health system.

After Clause 164

BARONESS FINLAY OF LLANDAFF
LORD SHIPLEY
LORD BROOKE OF ALVERTHORPE

Insert the following new Clause—

“Alcohol labelling

- (1) The Secretary of State must, no later than one year after this Act is passed—
 - (a) publish a report on alcohol labelling, assessing which elements should be mandatory on labels to improve consumer knowledge. This should include, but not be limited to:
 - (i) warning about alcohol harms,
 - (ii) calorific and other nutritional information,

After Clause 164 - continued

- (b) lay the report before Parliament, and a Minister of the Crown must arrange to make a statement to each House of Parliament setting out any steps which will be taken to implement the findings of the report.”

Member’s explanatory statement

This amendment requires the Secretary of State to publish a report on alcohol labelling to improve consumer knowledge.

Health and Care Bill

AMENDMENTS
TO BE MOVED
ON REPORT

15 February 2022
