

4. BILL FOR THIRD READING

4.1. National Health and Care Service Bill 2016 – Third Reading approved

Mr Quayle to move:

That the National Health and Care Service Bill 2016 be read a third time.

The Speaker: Bill for Third Reading: the National Health and Care Service Bill.
I call on the mover, the Hon. Member for Middle, Mr Quayle.

Mr Quayle: Thank you, Mr Speaker.

Mr Speaker, I am pleased to move the Third Reading of the National Health and Care Service Bill for the Department of Health and Social Care.

The Bill modernises the legislative framework for the provision of health and care services so that the Department can continue to deliver its obligations, including where they are closely linked to regulatory regimes in the United Kingdom, and will support the delivery of the Department's five-year strategy for Health and Social Care.

Hon. Members, the Bill has six key deliverables and these are: (1) an integrated Health and Care Service; (2) provision for a Health and Care Service Charter; (3) provision to create detailed Schemes; (4) a revised approach to charges and contributions; (5) strengthening our position with regard to commissioning and contracts, including our requirement to hold an approved service provider list; and, finally, strengthening the role of our committees and complaints processes.

The most significant change in this legislation, compared with the current National Health Services Act 2001, is the proposed introduction of the National Health and Care Service Charter and the NHCS Schemes.

The Charter will set out the Department's general commitments around standards, values and behaviours in respect of the NHCS.

The Schemes will provide a more detailed regulatory framework, setting out how services will be provided in accordance with certain standards of care and service models, as detailed in the five-year strategy for Health and Social Care.

The Bill also makes it clear that, when making charges for or contributing towards the cost of services provided by the Department, it must be fiscally aware and have regard to the funds available to it at that time.

The Bill also makes more specific provision for commissioning and contracts with external private service providers such as GPs and dentists.

The Bill includes a small number of new provisions including the introduction of a charging mechanism for facilitating the movement of 'stranded patients' from a hospital setting to alternative accommodation which is better suited for their on-going care and does not put unnecessary pressure on the workload of hospital staff.

The Department is acutely aware that it has a duty of care to support vulnerable people and I would take this opportunity to reiterate that no charge will be made until all other avenues have been explored to encourage patients and their families to secure, of their own accord, more appropriate accommodation fit for the individual's medical and care needs.

Other new provisions include: extending the potential for the Department's facilities to be used for other purposes when they are not needed for NHSC care; a legal requirement for the Department to arrange for regular and independent monitoring and review of the NHCS Schemes; provision for the roles of certain statutory bodies to be extended in the future, if it is felt to be necessary.

Before I finish, I would like to thank Members for their contributions up to this point, which have been invaluable. In particular, I would like to thank the Hon. Member for Douglas West, Mr Thomas, for his amendments which were all accepted at the last sitting. I believe the fact that Mr Thomas took the opportunity to discuss his proposed amendments with me and my officers prior to the sitting helped us all to understand the position that he had more clearly. This resulted in Mr Thomas' amendments being presented in a form which I and the Department were happy to accept, which is why I was content to take the slightly unusual step of seconding the amendments.

Whilst such conversations will clearly not always result in both the Member and the Department agreeing on an amendment, I would commend this approach to all Members going forward. (**A Member:** Hear, hear.)

If I may just thank my officers: Duane, Amanda and Colin who have worked on this incredibly important Bill going forward, and for the support of my political departmental colleagues.

Mr Speaker, I beg to move that the National Health and Care Service Bill be read for the third time.

The Speaker: Mr Peake.

Mr Peake: I beg to second and reserve my remarks.

The Speaker: Hon. Members, I put the motion that the National Health and Care Service Bill be read for the third time. Those in favour, please say aye; against, no. The ayes have it.

A division was called for and electronic voting resulted as follows:

FOR	AGAINST
Mrs Beecroft	None
Mr Bell	
Mr Cannan	
Mr Cregeen	
Mr Gawne	
Mr Hall	
Mr Harmer	
Mr Houghton	
Mr Joughin	
Mr Karran	
Mr Malarkey	
Mr Peake	
Mr Quayle	
Mr Quirk	
Mr Robertshaw	
Mr Ronan	
Mr Shimmin	
Mr Singer	
Mr Skelly	
Mr Teare	
The Speaker	
Mr Thomas	

The Speaker: The motion carries: 22 votes for and none against.

Hon. Members, that concludes the business of the House today. The House will now stand adjourned until the next sitting which will take place at 10 o'clock on 3rd May.

I remind Hon. Members that, because of the Bank Holiday next Monday, the last day for submitting Questions and motions for the sitting on 10th May is this Friday, 29th April at 5 p.m.

The House adjourned at 11.13 a.m.