



This report shows written answers and statements provided on 14 June 2019 and the information is correct at the time of publication (03:27 P.M., 14 June 2019). For the latest information on written questions and answers, ministerial corrections, and written statements, please visit: <http://www.parliament.uk/writtenanswers/>

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Notes:

Questions marked thus **[R]** indicate that a relevant interest has been declared.

Questions with identification numbers of **900000 or greater** indicate that the question was originally tabled as an oral question and has since been unstarred.

ANSWERS

DIGITAL, CULTURE, MEDIA AND SPORT

■ Voluntary Work: Abuse

Carolyn Harris:

[\[261527\]](#)

To ask the Secretary of State for Digital, Culture, Media and Sport, what representations she has received on the extent of physical and verbal abuse directed at volunteers in the charity sector.

Mims Davies:

Charities should be safe spaces for everyone; whether employees, volunteers or members of the public. Abuse of any kind is abhorrent and charity leaders must take a zero tolerance approach to misconduct and make sure proper protections are in place.

DCMS has funded research into bullying behaviours in the charity sector as part of its Domestic Charity Safeguarding Programme. The report, launched on the 10 June, provides evidence on charity behaviours including case studies from whistleblowers. It must be the start of tangible change in those charities whose workplace culture does not currently reflect their values.

Government's involvement in the research strengthens our commitment to charity safeguarding and safer charity cultures and leadership. This is a commitment set out in the Civil Society Strategy.

EDUCATION

■ Department for Education: Living Wage

Justin Madders:

[\[261257\]](#)

To ask the Secretary of State for Education, what proportion of organisations that hold contracts with his Department pay the National Living Wage.

Anne Milton:

As the National Living Wage is a statutory obligation, the department's contracts require that all employees of our suppliers who are entitled to it are paid at the relevant rate. It is the responsibility of individual organisations to ensure that they pay the National Living Wage.

■ Migrant Workers: Fees and Charges

Paul Blomfield:

[\[262354\]](#)

To ask the Secretary of State for Education, if he will publish the allocation of revenues from the Immigration Skills Charge in the last 12 months.

Paul Blomfield:

[262355]

To ask the Secretary of State for Education, what recent assessment he has made of the effectiveness of the Immigration Skills Charge in increasing skills provision in England.

Anne Milton:

[Holding answer 13 June 2019]: In 2017-18, income from the Immigration Skills Charge (ISC) contributed £75 million to the department's skills budget.

While the income raised is not additional funding for skills, the ISC is helping to maintain the department's existing skills budget and existing level of investment in skills in England. As such, it is not possible to provide a breakdown of how the department's ISC allocation is spent.

The ISC ensures that we can continue to invest in developing the skills that the country needs and also addresses skills gaps in the workforce. Similarly, it helps to maintain funding levels for each of the devolved administrations.

My letter of 17 January 2019 to the chairs of the Education and Home Affairs committees about the ISC, has been placed in the Libraries of both Houses and is available to view at the following link:

www.parliament.uk/business/publications/business-papers/commons/deposited-papers/.

An internal review of the ISC, based on Home Office data, was undertaken in the second quarter of 2018. We continue to keep this policy under review.

■ **Primary Education: Finance**

Chuka Umunna:

[261222]

To ask the Secretary of State for Education, what recent estimate his Department has made of the proportion of primary school funding that has been donated by parents or guardians of pupils in (a) South London and (b) the London Borough of Lambeth.

Nick Gibb:

The information requested is not held centrally, as the Department does not collect data about donations from parents. However, schools' financial returns show that the proportion of income from all donations and voluntary funds in London Primary schools was 0.7% in 2017-18, which is the same as the national average. In Lambeth, this figure was 0.3% in 2017-18.

■ **Pupils: Gender Recognition**

David T. C. Davies:

[260600]

To ask the Secretary of State for Education, whether his Department plans to issue guidance to schools on handling allegations of misgendering of pupils.

Nick Gibb:

The Department has published guidance to help schools understand how the Equality Act affects them and how to fulfil their duties under the Act. This includes a duty on

schools not to discriminate unlawfully due to the protected characteristic of gender reassignment. The guidance can be found here:

<https://www.gov.uk/government/publications/equality-act-2010-advice-for-schools>.

As part of the Government's LGBT Action Plan, the Department has committed to ensuring that schools have access to the guidance they need to support LGBT pupils. This includes a commitment to updating the Equality Act guidance. Also, in the LGBT Action Plan is a commitment that Government Equalities Office will work with the Equality and Human Rights Commission to publish comprehensive guidance for schools on how to support transgender pupils.

■ Schools: Admissions

Philip Davies:

[\[260603\]](#)

To ask the Secretary of State for Education, how many variations of Published Admission Numbers submitted by local authorities have been disallowed by the school adjudicator in each of the last three years.

Nick Gibb:

In each of the past three reporting years, the following number of variation requests in relation to Published Admissions Numbers (PAN) were submitted by local authorities, but were not approved by the Schools Adjudicator:

VARIATION TO PANS	2018/19*	2017/18	2016/17
Number of variation requests made by local authorities	50	37	24
Variation requests not approved	8	1	3

* This reporting year ends on 31 August 2019

■ Universities: Students

Chuka Umunna:

[\[261228\]](#)

To ask the Secretary of State for Education, what estimate his Department has made of the number of adults over 25 years of age who have undertaken a non-university course in each of the last five years.

Anne Milton:

The number of learners aged 25 and over participating on government-funded further education courses in each academic year are shown in the attached table. These figures include learners on government-funded further education courses that are delivered in higher education institutions.

Attachments:

1. 261228_table
[261228_table_showing_learners_aged_25_or_over_participating_in_government_funded_further_education_courses.doc]

ENVIRONMENT, FOOD AND RURAL AFFAIRS**■ Air Pollution****Dr David Drew:****[261096]**

To ask the Secretary of State for Environment, Food and Rural Affairs, what the total emissions were in England of (a) PM_{2.5}, (b) PM₁ and (c) PM_{0.1} in (i) 2018 and (ii) 2017.

Dr Thérèse Coffey:

Defra publishes the report: 'Air Pollutant Inventories for England, Scotland, Wales and Northern Ireland' in the autumn each year. This report provides the total annual emissions in England of PM_{2.5}. 2018 total emissions of PM_{2.5} in England will be published in autumn 2020, and 2017 total emissions of PM_{2.5} in England will be published in autumn 2019. The URL for the latest report is:

https://uk-air.defra.gov.uk/assets/documents/reports/cat09/1810160958_DA_Air_Pollutant_Inventories_1990-2016_Issue1.pdf

Emissions of PM₁ and PM_{0.1} are not estimated for England, however they are estimated for the UK. The National Atmospheric Emissions Inventory (NAEI) website holds the database of UK annual emissions for a wide range of air pollutants including PM_{2.5}, PM₁ and PM_{0.1}.

The database for UK emissions of particulate matter from 1970 to 2017 can be accessed from the following URL: <http://naei.beis.gov.uk/data/data-selector?view=pms>.

■ Bees**Andrew Rosindell:****[261132]**

To ask the Secretary of State for Environment, Food and Rural Affairs, what assessment he has made of the recent trends in the UK bee population.

Dr Thérèse Coffey:

Each year the Government publishes an indicator of trends in populations of wild bees and other pollinators in the UK. The indicator measures changes in the distribution of almost 400 species of bees and other insects since 1980 and shows that, for all pollinating insects, the indicator has declined by 22% since 1980 although it has stabilised in recent years. For bees, the indicator has declined by 17% since 1980 although it shows evidence of a recovery since 2013.

Trends are also available for managed honey bees. The number of beekeepers registered on BeeBase, the National Bee Unit's biosecurity system which underpins

the Government inspectorate's actions for bee health, has increased significantly over the last 10 years from 12,000 to over 40,000 today.

Protecting pollinators is a priority for this Government. Since 2014 we have been working with a range of partners to implement a National Pollinator Strategy to address declines in wild pollinators and concerns about bee health, including establishing a pollinator monitoring and research partnership to gather further data and strengthen the evidence base.

■ Biodiversity

Adam Afriye:

[\[261183\]](#)

To ask the Secretary of State for Environment, Food and Rural Affairs, whether he has made an assessment of the contribution that green bridges make to biodiversity.

Dr Thérèse Coffey:

Green bridges are structures designed to provide wildlife and non-motorised users with easy and safe crossing of main roads and railways.

In 2015, Natural England published a review of the literature on green bridges. The review looked at 53 case studies from Europe and North America and found evidence that, in the majority of cases, green bridges were utilised by wildlife, although an assessment of their effectiveness in conserving wildlife populations was limited by the lack of long-term monitoring data. Guidance on the design of green bridges was also published by the Landscape Institute based on research undertaken by Natural England.

In 2015, the Government published research which included an assessment of the A21 Scotney Caste Green Bridge, constructed by the then Highways Agency, which found that of all incidences of bats crossing the road to and from the Scotney Castle Estate, 97 per cent used the green bridge. At least five bat species were recorded foraging over the bridge which was also used by deer, badger and breeding dormice.

The Government will keep the evidence for the effectiveness of these structures under review as new green bridges are planned and implemented.

Adam Afriye:

[\[261184\]](#)

To ask the Secretary of State for Environment, Food and Rural Affairs, which key performance indicators his Department uses to assess progress in improving the UK's biodiversity.

Dr Thérèse Coffey:

Domestic biodiversity policy is a devolved matter. The UK government has a range of performance indicators for England, although we do also work with the devolved administrations to compile indicators at UK scale for international reporting.

In June 2019 the Department for Environment, Food and Rural Affairs published its [Single Departmental Plan](#) which includes biodiversity performance indicators for England, including: extent of marine protected areas and condition of protected sites and priority habitat.

In May of this year, the Government published a [new indicator framework](#) for the 25 Year Environment Plan, setting out a transparent, comprehensive framework that shows how the environment in England is changing and whether it is improving over time. These indicators include diversity and health of our seas, wildlife and wild places, and nature on land and water.

To support reporting of progress across the whole of the UK, the government publishes a set of [UK Biodiversity Indicators](#), updated annually. These measure long term trends in the UK's biodiversity and progress against our international commitments under the Convention on Biological Diversity.

■ Biodiversity: Gardens

Andrew Rosindell:

[\[261155\]](#)

To ask the Secretary of State for Environment, Food and Rural Affairs, what steps he is taking to increase biodiversity in UK gardens.

Dr Thérèse Coffey:

Under the National Pollinator Strategy the Government works with research, voluntary and private sector partners to develop advice so everyone can provide and manage nesting and feeding habitat for bees and other insects in their gardens, window boxes, allotments or community gardens. We promote this advice through the Bees' Needs website and through the Defra-coordinated, annual Bees' Needs Week campaign to celebrate and encourage nationwide action. Advice includes Five Simple Actions, detailing steps that gardeners can take to help pollinators and garden biodiversity.

The Government is also addressing the needs of biodiversity in urban areas through its plans to introduce a mandatory biodiversity net gain requirement for development in England. This will help to ensure that new developments include wildlife-friendly green spaces.

We will continue to work in partnership with scientists and practitioners to review and improve the evidence base, to inform our policy and we will be sharing examples of nature-friendly gardening during the 2019 Year of Green Action. This will include a garden, developed in partnership with the Sensory Trust, at this year's Royal Horticultural Society Hampton Court Palace Garden Festival, which will showcase the many ways in which gardens can contribute to increased biodiversity.

■ Biodiversity: South East

Andrew Rosindell:

[\[261133\]](#)

To ask the Secretary of State for Environment, Food and Rural Affairs, what steps he is taking to increase biodiversity in (a) London and (b) the South East.

Dr Thérèse Coffey:

The Government has implemented a range of measures to both protect and increase biodiversity across the country. In London 6,000 hectares have been designated as Sites of Special Scientific Interest (SSSI), with some 141,000 hectares designated as

SSSI across the south east. These protected sites host habitats and species of international importance for wildlife conservation. Examples include Walthamstow Reservoirs SSSI which is Europe's largest urban wetland, and the New Forest, the largest area of semi-natural habitat in England covering 29,000 hectares of heathland, grassland and ancient woodland.

We provide substantial public funding for increasing biodiversity, spending £2.9 billion on agri-environment schemes in England through our seven year Rural Development Programme. Schemes are tailored to the specific biodiversity interests in London and the south east through our local targeting statements. In London priorities include wood pasture and parkland as well as wetland habitats such as reedbeds. In the south east there are a number of statements reflecting the diverse landscapes of the region including the heathlands of the Thames Basin, chalk grasslands of the North Downs and South Downs and wetlands of the Kent coast.

The Government also supports a range of partnership activities. For example in London, at Walthamstow, Natural England has worked closely with a range of partners over ten years on a partnership project to expand wetlands and open them to the public. In the south east, Natural England is working with the Bumblebee Conservation Trust, the RSPB and over 100 farmers and landowners to reintroduce the short-haired bumblebee to Dungeness. The success of the project in creating extensive, wildflower-rich habitat has led to the recording of rare bee species in areas where they have not been seen for 40 years.

EXITING THE EUROPEAN UNION

■ Department for Exiting the European Union: Living Wage

Justin Madders:

[\[261260\]](#)

To ask the Secretary of State for Exiting the European Union, what proportion of organisations that hold contracts with his Department pay the National Living Wage.

James Cleverly:

The Department does not hold information relating to the rate of pay for those employed by a third party agency or outsourcing arrangements as these would be held locally by the relevant organisations.

FOREIGN AND COMMONWEALTH OFFICE

■ Armenia: Bears

Mr Ranil Jayawardena:

[\[261266\]](#)

To ask the Secretary of State for Foreign and Commonwealth Affairs, what discussions he has had with his Armenian counterpart on the protection of endangered brown bears in that country.

Mr Ranil Jayawardena:[\[261267\]](#)

To ask the Secretary of State for Foreign and Commonwealth Affairs, if he will increase funding allocated to (a) rehabilitation centres to help bears rescued from cages in restaurants and (b) the protection of endangered species more widely.

Sir Alan Duncan:

This is not a foreign policy issue. Animal welfare policy is the responsibility of the Department for Environment, Food and Rural Affairs.

The UK Government shares the concerns of the public about this issue and we are committed to the highest standards of animal welfare, both here in the UK and in our work with countries abroad. Britain engages with other countries directly and as part of global forums such as the OIE (World Organisation for Animal Health). The protection of endangered species is a priority for the UK Government. Decisions on future funding levels for this area will be taken as part of the forthcoming Spending Review.

■ Jamaica: Diplomatic Relations**Andrew Rosindell:**[\[261138\]](#)

To ask the Secretary of State for Foreign and Commonwealth Affairs, what recent steps he has taken to support diplomatic relations between the UK and Jamaica.

Sir Alan Duncan:

Bilateral relations between the UK and Jamaica are warm and positive. We engage regularly with the Jamaican Government through our High Commission in Kingston, and with the Jamaican High Commission in London. We work together on shared priorities including trade and investment and combatting serious and organised crime. Through the Commonwealth, we work closely with Jamaica on promoting democratic values and development, and helping to tackle global challenges such as climate change. The UK-Caribbean Infrastructure Fund supports development in Jamaica.

■ Oman: Detainees**Andrew Rosindell:**[\[261149\]](#)

To ask the Secretary of State for Foreign and Commonwealth Affairs, what steps he is taking to encourage the Government of Oman to ensure the fair treatment of the Shuhuh 6.

Dr Andrew Murrison:

We monitor human rights in the Middle East and North Africa closely. We are aware that a number of individuals have been arrested under Oman's national security laws and our Ambassador in Muscat raised the arrests with the Omani authorities, most recently on 27 May with the Ministry of Foreign Affairs. The Omani authorities have since given us the strongest assurances that the individuals arrested in Musandam were treated with respect and given full access to their families as well as to legal assistance and recourse, in accordance with Oman's Basic Statute of the State and International laws and Conventions.

HEALTH AND SOCIAL CARE■ **5G: Health Hazards****Dr David Drew:****[261100]**

To ask the Secretary of State for Health and Social Care, what guidance his Department plans to publish on protecting people who suffer from electro-hypersensitivity from the effects of 5G.

Seema Kennedy:

Public Health England (PHE) advises that the guidelines of the International Commission on Non-Ionizing Radiation Protection (ICNIRP) should be adopted for limiting exposure to radio waves, and there is no convincing evidence that adverse health effects can result if these guidelines are complied with.

Carefully designed studies have been performed in the United Kingdom and around the world to investigate whether the health symptoms some people experience and attribute to exposure to radio waves within the ICNIRP guideline levels are indeed caused by exposure. The studies are detailed in the 2012 report from the independent Advisory Group on Non-ionising Radiation, available at the following link:

<https://www.gov.uk/government/publications/radiofrequency-electromagnetic-fields-health-effects>

PHE continues to monitor the evidence on this topic.

■ **Accident and Emergency Departments: Standards****Jonathan Ashworth:****[260629]**

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on ensuring that all hospitals with major A&E departments provide Same Day Emergency Care services at least 12 hours a day, 7 days a week by the end of 2019-20; and if he will make a statement.

Stephen Hammond:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the National Health Service will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

NHS England intends to deliver 100% coverage by the end of the year - as set out in the Long Term Plan for the NHS.

Jonathan Ashworth:

[\[260630\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his department has made on ensuring that all hospitals with major A&E departments record 100 per cent of patient activity in A&E, Urgent Treatment Centres and Same Day Emergency Care via the Emergency Care Data Set by March 2020; and if he will make a statement.

Stephen Hammond:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the National Health Service will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

The majority of major accident and emergency (A&E) departments (Type 1 and 2) are recording A&E activity via Emergency Care Data Set (ECDS) nationally. NHS England is supporting providers through transition and it is expected that 100% will be submitting data to ECDS by September 2019.

NHS England is also supporting urgent treatment centres so 100% will be recording activity via ECDS by March 2020.

The programme of work to record same day emergency care data on ECDS is in pilot phase. Following a full impact assessment of the pilot, implementation plans towards the March 2020 ambition will be set.

Jonathan Ashworth:

[\[260631\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on ensuring that, subject to agreement with the Government, all hospitals with major A&E departments test and begin implementing the new emergency and urgent care standards arising from the Clinical Standards Review from October 2019, ahead of full implementation in April 2020; and if he will make a statement.

Stephen Hammond:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the National Health Service will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

The interim report published in March 2019 set out proposals for field testing. Field testing of urgent and emergency care standards is currently being undertaken at 14

NHS trusts. As set out in the Government's Mandate to NHS England and NHS Improvement, with the agreement of the Government, NHS England and NHS Improvement will field test potential future changes to access standards following publication of the interim report of the Clinical Review of Standards and implement any new standards. In 2019-20, NHS England and NHS Improvement will continue the ongoing service improvement work so that performance is maintained and improved for cancer treatment and accident and emergency, to the point at which any new standards, proposed by the Clinical Review and accepted by the Government, are implemented.

■ Alopecia and Wigs

Philip Davies: [\[261174\]](#)

To ask the Secretary of State for Health and Social Care, if he will make it his policy that NHS England appoints a person responsible for (a) Alopecia and (b) the provision of wigs.

Seema Kennedy:

The commissioning and configuration of dermatology services in England is a local matter. The majority of patients with dermatological disorders, including alopecia, are managed in primary and community care and the local National Health Service is best placed to make decisions that ensure services meet the needs of resident populations in the most appropriate way.

Prescriptions for wigs are available on the NHS, but patients will be charged for them unless they qualify for help with charges. Further information can be found via the NHS website:

www.nhs.uk/using-the-nhs/help-with-health-costs/wigs-and-fabric-supports-on-the-nhs

■ Arthritis: Diagnosis

Ben Bradley: [\[260723\]](#)

To ask the Secretary of State for Health and Social Care, what recent steps his Department has taken to improve early diagnosis of rheumatoid arthritis.

Seema Kennedy:

The National Institute for Health and Care Excellence Guidance 'Rheumatoid Arthritis in Adults: management', updated in 2018, sets out best practice on the diagnosis, treatment, care support of people living with the condition. The guidance emphasises the need for early diagnosis, with urgent referral to a specialist rheumatologist on suspicion of rheumatoid arthritis. This is because treatment at an early stage can halt progression of disease.

The full guidance can be viewed at the following link:

www.nice.org.uk/guidance/ng100/resources/rheumatoid-arthritis-in-adults-management-pdf-66141531233989

■ Babies: Screening

Dr Matthew Offord:

[\[261195\]](#)

To ask the Secretary of State for Health and Social Care, what guidance his Department has issued on the (a) use and (b) retention of information produced from Guthrie tests.

Seema Kennedy:

The Guthrie test was used for detecting phenylketonuria. However, as the newborn bloodspot screening programme screens for nine rare conditions, the heel prick test is performed using the newer technique of tandem mass spectrometry to detect conditions.

Public Health England (PHE) and NHS England have published the 'NHS Newborn Blood Spot Screening Programme Code of Practice for the retention and storage of residual newborn blood spots'. This code of practice was published in January 2018 and applies to all newborn blood spot samples. It sets out arrangements for the retention, storage, use and release of residual newborn blood spots and related information and communication requirements.

The retention guidance is currently under review and will be updated shortly.

■ Blood: Contamination

Paul Girvan:

[\[261271\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the correspondence between the Prime Minister and Haemophilia Scotland in May 2019, what steps the Department is taking to provide people (a) infected and (b) affected by contaminated blood with a fair and transparent support scheme; and what steps he is taking to tackle the disparity in financial support across the Devolved Administrations.

Jackie Doyle-Price:

A major uplift was announced on 30 April 2019 to the financial support available to infected and affected beneficiaries registered with the infected blood support scheme in England.

As announced at that time, the Government is committed to working with its counterparts in the devolved administrations to look at the issue of parity of support across the United Kingdom. I have written to my counterparts in all the other devolved nations, including the Permanent Secretary of Northern Ireland, inviting them to meet to discuss this issue at the earliest opportunity. A date for this meeting is currently being sought.

■ Breast Cancer: Health Services

Jonathan Ashworth:

[\[260648\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on establishing a stratified follow-up approach for breast cancer in all NHS trusts; and if he will make a statement.

Seema Kennedy:

The NHS Long Term Plan states that, after treatment, patients will move to a follow-up pathway that suits their needs, and ensures they can get rapid access to clinical support where they are worried that their cancer may have recurred. This stratified follow-up approach will be established in all trusts for breast cancer in 2019.

As set out in the Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the National Health Service will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

■ Cancer: Health**Jonathan Ashworth:**[\[260647\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on introducing an innovative quality of life metric to track and respond to the long-term impact of cancer; and if he will make a statement.

Seema Kennedy:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the NHS will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

As recommended in the Independent Cancer Taskforce report, NHS England has run a pilot project to test data collection methods and gather data to support the development of summary Quality of Life metric(s). Patients with breast, prostate and colorectal cancer in seven hospital trusts have been completing questionnaires, and up to May 2019, 3,700 patients had been invited and 1,914 patients completed questionnaires. The project is now entering a data analysis phase, and a recommendation on which statistics to use for the Quality of Life metric(s) is due by the end of the year.

■ Children: Health**Chuka Umunna:**[\[261223\]](#)

To ask the Secretary of State for Health and Social Care, what estimate he has made of the number of children who have suffered health problems as a result of poor housing conditions in the last 12 months.

Seema Kennedy:

Public Health England (PHE) does not hold data on the number of children who have suffered health problems as a result of poor housing conditions.

PHE is working with partners across the housing and health systems to reduce housing-related ill-health, including in children, by supporting local authorities, the National Health Service and frontline staff through guidance in the Cold Weather Plan and through the resources available online in Homes for Health. More information is available at the following links:

<https://www.gov.uk/government/collections/cold-weather-plan-for-england>

<https://www.gov.uk/government/collections/housing-for-health>

Public Health England is also working with the Department for Business, Energy and Industrial Strategy to ensure that existing resources to improve energy efficiency and reduce fuel bills (including the Winter Fuel Payment) are targeted at the most vulnerable groups.

■ Chlamydia: Screening

Mrs Sharon Hodgson: [\[260588\]](#)

To ask the Secretary of State for Health and Social Care, for what reason chlamydia testing rates have reduced by 22 per cent since 2014.

Mrs Sharon Hodgson: [\[260589\]](#)

To ask the Secretary of State for Health and Social Care, what steps he will take to ensure ease of access to chlamydia screening services.

Seema Kennedy:

Local authorities monitor the performance of local sexual health contracts. This information is not collected by Public Health England (PHE).

It is the responsibility of local authorities to ensure ease of access to chlamydia screening. PHE supports local areas through facilitated chlamydia care pathway workshops. These workshops enable local commissioners and providers to explore and review local chlamydia activities, and create data driven action plans to improve service provision and outcomes.

■ Continuing Care: Children

Jonathan Ashworth: [\[260642\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on rolling out clinical networks to improve the quality of care for children with long term conditions such as asthma, epilepsy and diabetes; and if he will make a statement.

Seema Kennedy:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly. This will set out the next steps the National Health Service will take to deliver the commitments, such as the clinical networks to improve the quality of care for children with long term conditions such as asthma, epilepsy and diabetes, and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan in the autumn.

■ Dental Services: Bradford**Philip Davies:**[\[261175\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made of the adequacy of emergency and out of hours NHS dental cover in the (a) Shipley constituency and (b) Bradford district.

Seema Kennedy:

NHS England is responsible for commissioning National Health Service dental services to meet local need and helping patients find emergency and out of hours NHS dental services. NHS England advises it has taken steps to replace an existing contract to provide urgent and out of hours dental care in Bradford. This contract ended on 31 March. NHS England has put in place a new provider for urgent dental care and work is in hand to see if other local dentists can be funded to also offer additional urgent care.

■ Department of Health and Social Care: Living Wage**Justin Madders:**[\[261251\]](#)

To ask the Secretary of State for Health and Social Care, what proportion of organisations that hold contracts with his Department pay the National Living Wage.

Caroline Dinage:

From April 2016, the Government introduced a mandatory National Living Wage for workers aged 25 and above. The statutory National Minimum Wage applies to workers under the age of 25. The standard selection questionnaire for all Departmental contracts requires suppliers to confirm they have not broken any labour laws.

■ Diabetes: Kidney Diseases**Mr George Howarth:**[\[261109\]](#)

To ask the Secretary of State for Health and Social Care, what the average waiting time was between appointments for people with (a) Type 1 and (b) Type 2 diabetes who have diabetes-related renal conditions in each (i) hospital and (ii) clinic in each year since 2010.

Mr George Howarth: [261110]

To ask the Secretary of State for Health and Social Care, what the average waiting time was between appointments for people with diabetes-related psychological conditions who have (a) Type 1 and (b) Type 2 diabetes in each (i) hospital and (ii) clinic in each year since 2010.

Seema Kennedy:

This information is not held centrally.

■ Diabetes: Medical Equipment

Jonathan Ashworth: [260645]

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on ensuring that patients with Type 1 diabetes benefit from life-changing flash glucose monitors in line with clinical guidelines; and if he will make a statement.

Seema Kennedy:

Glucose monitoring technology, such as flash glucose monitors like Freestyle Libre will continue to be available to those meeting the relevant clinical criteria.

The NHS Long Term Plan announced that the National Health Service will ensure that, in line with clinical guidelines, eligible patients with type 1 diabetes benefit from life changing flash glucose monitors from April 2019, ending the variation patients in some parts of the country are facing.

NHS England has published detailed criteria and supporting guidance at the following link:

<https://www.england.nhs.uk/wp-content/uploads/2019/03/flash-glucose-monitoring-national-arrangements-funding-v1.1.pdf>

Clinical commissioning groups (CCGs) will be reimbursed for the cost of flash glucose monitoring sensors for those who meet these criteria, which could amount to up to 20% of their type 1 diabetes populations. CCGs can also locally choose to fund flash glucose monitoring for other patients with diabetes. The guidance advises that as part of their annual review process, patients with diabetes should be assessed for suitability for flash glucose monitoring. This process can also form part of a review for a different purpose, if that occurs earlier. This will promote a systematic approach to increasing take up.

■ Diabetes: Mental Health Services

Mr George Howarth: [261111]

To ask the Secretary of State for Health and Social Care, how many people with (a) Type 1 and (b) Type 2 diabetes are on the waiting list for an appointment for psychological support in each NHS (i) hospital and (ii) clinic.

Mr George Howarth: [\[261113\]](#)

To ask the Secretary of State for Health and Social Care, how many people with (a) Type 1 and (b) Type 2 diabetes are on the waiting list for an appointment with a psychologist.

Jackie Doyle-Price:

This information is not available in the format requested.

■ Dietetics

Mrs Sharon Hodgson: [\[261167\]](#)

To ask the Secretary of State for Health and Social Care, what steps the Government is taking to reduce waiting times for dietetic services in the NHS.

Seema Kennedy:

Clinical commissioning groups are responsible for assuring timely access to dietetic services, both in hospitals and community settings.

In addition, the NHS Long Term Plan makes several direct commitments to support timely intervention for specific conditions such as weight management services in primary care for people with a diagnosis of type 2 diabetes or hypertension with a Body Mass Index of 30+ (adjusted appropriately for ethnicity), where it is known that significant impact can be made on improving health, reducing health inequalities and reducing costs.

The Long Term Plan commits to test a National Health Service programme supporting very low-calorie diets for obese people with type 2 diabetes. Additionally, the Long Term Plan commits to fund a doubling of the NHS Diabetes Prevention Programme over the next five years, including a new digital option to widen patient choice and target inequality.

Nutrition training, and an understanding of what is involved in achieving and maintaining a healthy weight, varies between medical schools. The Long Term Plan commits to working with academic institutes to increase focus across the professional bodies and universities to ensure nutrition has a greater place in professional education and training.

Additionally, NHS England's nutrition quality improvement collaborative programme, 41 NHS provider organisations have focussed on gaining improvements in the accuracy of nutritional screening and subsequent appropriateness of nutritional care. These organisations have introduced a range of interventions to directly improve care locally.

■ Dietetics: Recruitment

Mrs Sharon Hodgson: [\[261168\]](#)

To ask the Secretary of State for Health and Social Care, what steps he plans to take as part of the interim NHS People's Plan to increase the number of dietetic posts with the (a) primary care and (b) the NHS.

Caroline Dinenge:

The NHS Long Term Plan set out the next step in our mission to make the National Health Service a world class employer and deliver the workforce the NHS needs. To deliver on these commitments the NHS published a new interim People Plan on 3 June. The interim Plan sets out a shared vision and plan of action to put NHS people at the heart of NHS policy and delivery.

The interim People Plan sets out the action we will take now and over the long term to meet the challenges of supply, reform, culture and leadership. The development of the dietetic workforce was central to the Allied Health Profession programme for the plan and was developed by engaging widely with staff, patients, employers, professional organisations, regulatory bodies, voluntary sector, academia and other experts.

A final people plan will be published later this year, when there is further clarity on education and training budgets.

■ Genito-urinary Medicine**Lloyd Russell-Moyle:**[\[260715\]](#)

To ask the Secretary of State for Health and Social Care, whether he has made an assessment of the potential effect on the provision of local authority sexual health services of not increasing public health funding in the next spending review; and if he will make a statement.

Seema Kennedy:

Local authorities will receive over £3.1 billion in 2019/20 for use on public health. It is for local authorities themselves to determine how best to use these resources based on their assessment of local need and with regard to their statutory duties. Future funding for local authorities' public health responsibilities will be considered carefully in the next spending review, taking full account of the available evidence.

Mr Ben Bradshaw:[\[261089\]](#)

To ask the Secretary of State for Health and Social Care, in response to the recent Public Health England statistics that showed an increase in new sexually transmitted infections, if he will commit to a national sexual health strategy.

Seema Kennedy:

It is concerning to see the increase in sexually transmitted infections, and we would encourage people to practice safe sex by using condoms and to access their free, local sexual health services if they consider themselves to be at risk of infection. Local authorities have been mandated to commission comprehensive open access sexual health services and are best placed to understand and meet the public health needs of their local communities.

The development of a national sexual health strategy is a key recommendation in the Health and Social Care Committee's report on sexual health, which was published on

2 June 2019. The Government is currently considering the report's recommendations and will publish a formal response shortly.

■ **Gonorrhoea: Diagnosis**

Mr Ben Bradshaw: [261091]

To ask the Secretary of State for Health and Social Care, what proportion of sexual health clinics are not able to fully test for (a) gonorrhoea and (b) drug-resistant strains of gonorrhoea.

Seema Kennedy:

Public Health England does not hold this information in the format requested.

■ **Gonorrhoea: Drug Resistance**

Mrs Sharon Hodgson: [260591]

To ask the Secretary of State for Health and Social Care, what assessment he has made of the risk to public health of drug resistant gonorrhoea.

Seema Kennedy:

Drug resistance in gonorrhoea increases the likelihood of treatment failure and ongoing transmission. There have been three documented treatment failures in England reported to date and all were eventually cured successfully. Public Health England (PHE) undertakes comprehensive surveillance through the gonococcal resistance to antimicrobials surveillance programme to enable early detection and management of antibiotic resistance in gonorrhoea. It uses this intelligence to advise on national gonorrhoea treatment guidelines ensuring they remain effective. PHE also investigates outbreaks and individual cases of extensively drug resistant gonorrhoea and potential treatment failures to ensure effective management and control spread. Further information can be found at the following link:

<https://www.gov.uk/government/publications/gonococcal-resistance-to-antimicrobials-surveillance-programme-grasp-report>

■ **HIV Infection: Drugs**

Mr Ben Bradshaw: [261092]

To ask the Secretary of State for Health and Social Care, whether his Department's policy is to ensure that HIV pre-exposure prophylaxis is available to all people who could benefit from it.

Seema Kennedy:

HIV pre-exposure prophylaxis (PrEP) is currently available through the three year, NHS England funded, PrEP impact trial, which is providing HIV prevention drugs to people at high risk of HIV infection. Expansion of the trial is underway across the country following the my Rt. hon. Friend Secretary of State for Health and Social Care's announcement in January that the trial would be expanded to 26,000 people. Participation in the trial is on a voluntary basis and it is for local authorities to decide

whether they wish to take part. Work is now starting to consider future commissioning for PrEP after the trial has ended.

■ Human Papillomavirus: Vaccination

Jonathan Ashworth:

[\[260637\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on ensuring that all boys aged 12 and 13 are offered vaccination against HPV-related diseases including oral, throat, anal cancer; and if he will make a statement.

Seema Kennedy:

Preparation to implement the extension of the human papillomavirus (HPV) vaccination programme to boys is progressing well. NHS England has carried out a series of assurance surveys to assess the preparedness of the system for the extension of the HPV vaccination programme to boys, specifically covering the service provision, delivery, data collection and coverage. The outcome of that exercise has shown that implementation is on track for the 2019/20 academic year.

NHS England Public Health Commissioning teams have embedded the duty to offer boys aged 12 and 13 vaccination against HPV-related diseases within contracts with school-aged immunisation providers. These providers are under contractual obligation to offer 100% of eligible boys the opportunity to be vaccinated and not just those in full time education.

■ Influenza: Vaccination

Tom Brake:

[\[261072\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made of the level of uptake of the most recent flu vaccine.

Seema Kennedy:

Cumulative influenza vaccine uptake is collected and evaluated by Public Health England (PHE) nationally and locally. The 2018 to 2019 season included the extension of the childhood programme to all those aged nine rising to 10 years old as well as the phased delivery of the newly licensed adjuvanted vaccine for those aged 65 and over.

The national school-age vaccination programme achieved the highest levels of vaccine uptake since it started (60.8%, 2,461,563/4,051,698 in 2018/19, compared to 59.5% in 2017/18 1,998,538/3,360,997). Vaccine uptake for the pre-school children's influenza vaccine programme has also increased further compared to previous seasons. The following table shows uptake figures for 2018/19 and 2017/18.

Uptake in adult target groups was similar or slightly lower compared to recent seasons and further work is needed to identify underpinning reasons so that uptake can be improved.

Comparison of flu uptake in groups vaccinated in general practice.

GROUP	2018/19	2017/18
65 and over	72.0% 7,260,596/10,087,873/-	72.9% 7,309,125/10,032,613
At risk	48.0% 3,276,592/6,820,919	49.7% 3,353,724/6,742,316
Pregnant	45.2% 293,359/649,233	47.0% 318,057/676,159
Two and three year olds combined	44.9% 593706/1,322,663	44.0% 585791/1,330,150

Source:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/804889/Seasonal_influenza_vaccine_uptake_in_GP_patients_1819.pdf

The frontline health care workers with direct patient care saw the highest uptake since the programme started in 2002/3 (70.3% in 2018/19 738488/1,051,038).

■ Integrated Care Systems

Jonathan Ashworth:

[\[260632\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on deploying population health management solutions to support Integrated Care Systems to understand the areas of greatest health need and match NHS services to meet them; and if he will make a statement.

Stephen Hammond:

NHS England and NHS Improvement are providing a range of support to sustainability and transformation partnerships (STPs) and integrated care systems (ICSs) during 2019-20 to put in place local population health management solutions. These include the National Performance and Population Health Dashboard which brings together national datasets to enable insight on system populations, the health and care they receive, identify system opportunities and support benchmarking across peer systems. This tool will be further developed to offer greater insight for STPs and ICSs.

■ Integrated Care Systems and Sustainability and Transformation Partnerships

Karin Smyth:

[\[260677\]](#)

To ask the Secretary of State for Health and Social Care, whether he has made an assessment of the potential merits of deferring revised plans for sustainability and transformation partnerships and integrated care systems until after the publication of the NHS Workforce Plan and the Social Care Green Paper.

Stephen Hammond:

As set out in the NHS Long Term Plan, an Implementation Framework will be published shortly which will set out the next steps the National Health Service will take to deliver the commitments and the national activity and support available to systems. The Implementation Framework will assist local health systems, who will build on the engagement already taking place across the country, in developing their strategic Long Term Plan implementation plan over the summer. NHS England and NHS Improvement will then publish a national implementation plan later this year. The Interim People Plan and the forthcoming Implementation Framework will provide the NHS with significant additional information to support their strategic planning.

Integrated Care Systems: Conflict of Interests**Karin Smyth:**[\[260671\]](#)

To ask the Secretary of State for Health and Social Care, when he plans to publish guidance on the governance of integrated care systems to enable the disclosure of conflicts of interest.

Stephen Hammond:

There are no current plans to publish separate conflict of interest guidance for integrated care systems. On 9 February 2017, NHS England issued guidance on managing conflicts of interest in the National Health Service. There is also separate guidance on managing conflicts of interest for clinical commissioning groups, which NHS England published on 16 June 2017.

Maternity Services**Jonathan Ashworth:**[\[260641\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the NHS Long Term Plan and NHS Planning Guidance commitments for 2019-20, what progress his Department has made on ensuring that all maternity services that do not deliver an accredited, evidence-based infant feeding programme, such as the UNICEF Baby Friendly Initiative, begin the accreditation process; and if he will make a statement.

Jackie Doyle-Price:

NHS England and NHS Improvement have advised that out of 132 maternity provider trusts on record in England, 67 are currently fully accredited with the UNICEF Baby Friendly Initiative and 53 have made progress towards accreditation. All remaining maternity provider trusts are expected to begin the accreditation process during 2019/20.

Public Health England (PHE) delivers a broad programme of work which contributes to increasing initiation and maintenance of breastfeeding. This includes interventions within the Healthy Child Programme which provides opportunities to discuss starting and sustaining breast feeding. To support midwives and health visitors, PHE provides up-to-date evidence and guidance on breastfeeding.

■ Mental Health Services**Mr George Howarth:** [261112]

To ask the Secretary of State for Health and Social Care, how many people are on the waiting list for an appointment with a psychologist in each NHS (a) hospital and (b) clinic.

Jackie Doyle-Price:

The information is not available in the format requested.

■ Multiple Sclerosis: Nurses**Lyn Brown:** [260605]

To ask the Secretary of State for Health and Social Care, if he will make an assessment of the potential merits of the provision of at least one dedicated MS nurse in each London borough.

Lyn Brown: [260606]

To ask the Secretary of State for Health and Social Care, if he will make an assessment of the adequacy of specialist MS nursing care available to residents of the London Borough of Newham.

Seema Kennedy:

The vast majority of services for people with the multiple sclerosis (MS) are planned and commissioned by local clinical commissioning groups. Action is led locally to ensure the solutions put in place reflect the needs of individual communities and recruitment and retention of National Health Service staff is a local matter. To support local commissioners plan and deliver services for people with MS, the National Institute for Health and Care Excellence has published clinical guidance.

The guidance sets out that people with MS are cared for with a coordinated multidisciplinary approach. This should involve professionals who can best meet the needs of the person with MS and who have expertise in managing MS including, including MS nurses. The guidance can be found at the following link:

www.nice.org.uk/guidance/cg186/resources/multiple-sclerosis-in-adults-management-pdf-35109816059077

NHS England is responsible for commissioning specialised neurological services, including some services for patients with MS. NHS England has published a service specification for neurological care that includes an exemplar service specification for neuromuscular conditions that sets out what providers must have in place to offer evidence-based, safe and effective services. This includes the provision of care from a multidisciplinary team which includes specialist nurses. The service specification for neurological care can be found at the following link:

www.england.nhs.uk/wp-content/uploads/2013/06/d04-neurosci-spec-neuro.pdf

■ NHS Trusts: Subsidiary Companies

John Grogan: [\[261107\]](#)

To ask the Secretary of State for Health and Social Care, which hospital trusts have received approval to set up wholly-owned subsidiary companies in the last three years; and on what dates those companies were incorporated.

John Grogan: [\[261108\]](#)

To ask the Secretary of State for Health and Social Care, which hospital trusts have proposals to set up wholly-owned subsidiary companies under active consideration.

Stephen Hammond:

Ministers do not have a role in approving wholly-owned subsidiary companies created by National Health Service foundation trusts, with this role delegated by powers to NHS Improvement. In November 2018, NHS Improvement published revised guidance to make all such subsidiaries subject to an approval process.

In contrast, the Secretary of State has the function of consenting to an NHS trust's proposal to establish an income generating subsidiary company. The Department is not aware of any NHS trust which has asked for approval to set up such schemes in the last three years.

Due to commercial sensitivities, NHS Improvement does not provide information of which hospital trusts have proposals under active consideration to set up wholly-owned subsidiary companies. The Department has no NHS Trust Income Generation Schemes currently under consideration.

■ Personal Health Budgets

Philip Davies: [\[261171\]](#)

To ask the Secretary of State for Health and Social Care, if he will extend top ups for personal health budgets for products other than wheelchairs.

Philip Davies: [\[261172\]](#)

To ask the Secretary of State for Health and Social Care, if he will make it his policy to introduce personal health budgets for wigs.

Caroline Dinéage:

NHS services are free of charge, except in limited circumstances sanctioned by Parliament. Increasing the number of areas where top-up payments for personal health budgets (PHBs) are allowed would risk creating a two-tier health service, undermining the core principle of the National Health Service, set out in the NHS Constitution, that treatment is provided free at the point of use, based on clinical need, not ability to pay.

The Government is committed to the roll out of PHBs, and through Universal Personalised Care, NHS England has committed to offering PHBs to up to 200,000 people over the next five years.

From 6 April 2018 to 8 June 2018, the Department and NHS England consulted on five groups which we believe may benefit most from PHBs. On 21 February 2019, we announced our intention to extend the legal rights to a PHB to people eligible for Section 117 aftercare services, and people who access wheelchair services, whose posture and mobility needs impact their wider health and social care needs. PHBs will not be appropriate for everyone, however we will also continue to work with NHS England to further explore both the other groups we consulted on, and additional groups who we believe could also benefit from having a right to have a PHB. Any further extension will be based on evidence of effectiveness and clinical appropriateness.

The Department and NHS England will continue to support clinical commissioning groups in expanding their PHB offer outside of those groups which are offered a legal right.

■ Preventive Medicine

Mr Ben Bradshaw:

[261093]

To ask the Secretary of State for Health and Social Care, if he will consider including sexual health and HIV in his Department's forthcoming prevention green paper.

Seema Kennedy:

We are considering a number of policy options for the Prevention Green Paper and will be mindful of opportunities relating to sexual health and HIV.

■ Radiation: Health Hazards

Dr David Drew:

[261097]

To ask the Secretary of State for Health and Social Care, what research the Government has commissioned on the non-thermal effects of wireless radiation on human health.

Dr David Drew:

[261098]

To ask the Secretary of State for Health and Social Care, what research the Government has commissioned on the potential effect of non-ionising electromagnetic radiation on people's health and in particular on (a) the eye and (b) skin.

Seema Kennedy:

The Department has supported research in relation to concerns that there might be adverse effects from exposure to the low levels of radiofrequency radiation, or radio waves, from mobile phones and base stations.

The independently managed Mobile Telecommunications and Health Research (MTHR) programme ran from 2001 until 2012 and funded 31 projects, leading to over 60 publications. Information about the MTHR programme and the studies it supported can be found at the following link:

https://webarchive.nationalarchives.gov.uk/*/http://www.mthr.org.uk/

MTHR research has considered symptoms in relation to the skin and the eyes. None of the research supported by MTHR has demonstrated that biological or adverse health effects are produced by radiofrequency exposure from mobile phones or base stations.

The Department continues to support research on exposure to radio waves, including the ongoing Cohort Study of Mobile Phone Use and Health (COSMOS) and the Study of Cognition, Adolescents and Mobile Phone studies (SCAMP) at Imperial College London. Information about these studies can be found at the following links:

<http://www.thecosmosproject.org/>

<http://www.scampstudy.org/>

■ Sexually Transmitted Infections

Mrs Sharon Hodgson: [260586]

To ask the Secretary of State for Health and Social Care, what assessment he has made of the implications for his policies of the Public Health England sexually transmitted infection data, published June 2019; and if he will make a statement.

Mrs Sharon Hodgson: [260587]

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure that (a) local and (b) national services for the prevention, diagnosis, treatment, and care of sexually transmitted infections are delivered to those groups with greatest sexual health needs.

Seema Kennedy:

It is concerning to see the increase in sexually transmitted infections, and we would encourage people to practice safe sex by using condoms and to access their free, local sexual health services if they consider themselves to be at risk of infection. Local authorities have been mandated to commission comprehensive open access sexual health services and are best placed to understand and meet the public health needs of their local communities.

Data published by Public Health England show that more people are accessing sexual health services, with attendances increasing by 7% between 2017 and 2018. This continues the trend of increases in attendances seen over the past five years. To help manage the overall increase in demand, online services are increasingly being commissioned to manage lower risk and asymptomatic patients. These services also have the potential to reach groups not currently engaged with clinic services.

Mrs Sharon Hodgson: [260590]

To ask the Secretary of State for Health and Social Care, what urgent steps the Government will take to tackle increases in rates of (a) gonorrhoea and (b) syphilis.

Seema Kennedy:

In June 2019, Public Health England (PHE) published a Syphilis Action Plan to improve the detection, surveillance and clinical management of syphilis at the following link:

<https://www.gov.uk/government/publications/syphilis-public-health-england-action-plan>

To reduce the transmission of sexually transmitted infections (STIs), including gonorrhoea and syphilis, PHE launched the 'Protect Against STIs' health promotion campaign in 2017/18 to promote condom use and positive sexual relationships among 16 to 24-year olds. This campaign can be viewed at the following link:

<https://www.nhs.uk/protect-against-stis-use-a-condom/home>

Additionally, HIV Prevention England has been contracted to deliver a HIV prevention programme aimed at gay, bisexual and other men who have sex with men; black Africans; and other groups in whom there is a higher or emerging burden of infection. This programme promotes, among other behaviours, condom use and awareness of STIs including gonorrhoea and syphilis. More information on this programme can be found at the following link:

<http://www.hivpreventionengland.org.uk/>

■ Sexually Transmitted Infections: Diagnosis**Mr Ben Bradshaw:****[261090]**

To ask the Secretary of State for Health and Social Care, for what reason his Department does not allocate funding for testing for (a) mycoplasma genitalium and (b) trichomoniasis vaginitis sexually transmitted infections.

Seema Kennedy:

The Government has mandated local authorities to commission comprehensive open access sexual health services, including sexually transmitted infection testing and treatment. It is for local authorities to decide the services they commission within this mandate. Clinical guidance from the British Association for Sexual Health and HIV does not recommend routine testing for mycoplasma genitalium and trichomoniasis vaginitis in asymptomatic individuals.

■ Sexually Transmitted Infections: Young People**Mr Ben Bradshaw:****[261094]**

To ask the Secretary of State for Health and Social Care, what recent assessment he has made of the potential effect of compulsory relationships and sex education on rates of sexually transmitted infections in young people.

Seema Kennedy:

There is clear evidence that good quality relationships and sex education has a protective function in a number of important areas. Studies show that gaining information mainly from school was associated with lower reporting of a range of

negative sexual health outcomes, including unsafe sex and previous experience of sexually transmitted infections. Further information is available at the following link:

<https://bmjopen.bmj.com/content/5/3/e007837>

■ Social Services: Employment

Alex Cunningham: [261218]

To ask the Secretary of State for Health and Social Care, whether the social care Green Paper will have a section on workforce.

Caroline Dinenge:

The Government recognises and values the work of social care staff, and we continue to work with the sector to ensure that there are the right number of people, with the right skills, knowledge, and values to deliver high quality, person centred care and support. In February we launched a new national adult social care recruitment campaign 'Every Day is Different', and we fund Skills for Care to support the sector with recruitment, retention, and workforce development.

The Government will publish a Social Care Green Paper, at the earliest opportunity, setting out proposals for reform to ensure the social care system is sustainable for the future. It will include a vision for the workforce and proposals to boost recruitment, retention and workforce development in the longer term.

■ Social Workers

Alex Cunningham: [261217]

To ask the Secretary of State for Health and Social Care, whether social workers will be included in the NHS People Plan.

Caroline Dinenge:

A major uplift was announced on 30 April 2019 to the financial support available to infected and affected beneficiaries registered with the infected blood support scheme in England.

As announced at that time, the Government is committed to working with its counterparts in the devolved administrations to look at the issue of parity of support across the United Kingdom. I have written to my counterparts in all the other devolved nations, including the Permanent Secretary of Northern Ireland, inviting them to meet to discuss this issue at the earliest opportunity. A date for this meeting is currently being sought.

HOME OFFICE**■ Antisocial Behaviour****Scott Mann:**[\[260688\]](#)

To ask the Secretary of State for the Home Department, whether he plans to implement the recommendations in the Victims Commissioner's recent report on antisocial behaviour.

Victoria Atkins:

We welcome the Victims' Commissioner's latest report on anti-social behaviour published on 30 April. We will consider the findings and recommendations carefully, including whether more can be done to make it clearer what information and support victims of anti-social behaviour are entitled to receive.

■ Domestic Abuse: Victim Support Schemes**Chuka Umunna:**[\[261225\]](#)

To ask the Secretary of State for the Home Department, what plans he has to increase accessibility to public services for victims of domestic abuse who have no recourse to public funds.

Victoria Atkins:

This Government remains committed to transforming the response to domestic abuse.

Victims of domestic abuse are treated first and foremost as victims. Non -British victims residing in the UK are able to apply for support from authorities, many of whom will have statutory obligations to support victims.

For individuals in the UK who are married, or partners of, British or settled sponsors and who claim to be victims of abuse, there is the option of applying for immediate crisis support under the Destitute Domestic Violence Concession (DDVC). In addition, funding has been made available via the tampon tax, to support a range of support networks. In March of this year, a further £1,090,000 was made available to specifically to be used to provide safe accommodation, and other support functions.

The new Domestic Abuse Bill will be the platform for delivering changes to support victims and will enable victims to have the ability and confidence to report these crimes. We will carefully consider recommendations from the Joint Scrutiny Committee about reviewing the scope of the DDVC and look forward to seeing report from the Joint Committee on the draft Bill. We will also want to consider the evidence – both written and oral – submitted to the Joint Committee on the Draft Domestic Abuse Bill and any recommendations made by that Committee. We are not complacent about our responses to domestic abuse, and strive to see what more can be done.

■ Hezbollah: Greater London**Tulip Siddiq:** [\[262425\]](#)

To ask the Secretary of State for the Home Department, with reference to the media report of 9 June 2019 that Hezbollah stockpiled explosive materials in North West London in 2015, whether that stockpiling was included in the decision to proscribe Hezbollah in February 2019.

Mr Ben Wallace:

We do not comment on intelligence matters.

Tulip Siddiq: [\[262426\]](#)

To ask the Secretary of State for the Home Department, when (a) the Home Secretary (b) Ministers in his Department and (c) officials in his Department were informed of the reported stockpiling of explosive materials by individuals with suspected links to Hezbollah, in North West London; and what steps his Department took to (i) inform and (ii) protect communities in North West London as a result of that stockpiling.

Mr Ben Wallace:

It is the policy of successive governments not to comment on Police operational or intelligence matters.

■ Home Office: Living Wage**Justin Madders:** [\[261245\]](#)

To ask the Secretary of State for the Home Department, what proportion of organisations that hold contracts with his Department pay the National Living Wage.

Victoria Atkins:

This information is not held centrally. The Home Office requires all of its suppliers to comply with the legal minimum standards of pay as set out in the Government's National Living Wage legislation.

■ Muslim Brotherhood**Andrew Rosindell:** [\[261137\]](#)

To ask the Secretary of State for the Home Department, what assessment he has made of the decision by the US Administration to designate the Muslim Brotherhood a terrorist group; and if he will make a statement.

Mr Ben Wallace:

The Government concluded a comprehensive review of the Muslim Brotherhood in 2015.

The review concluded the movement is a secretive organisation and that parts of it – globally – have a highly ambiguous relationship with violent extremism. The Government remains committed to keeping under review the views promoted and activities undertaken by the Muslim Brotherhood's associates in the UK, in

accordance with the five commitments included in the former Prime Minister's statement to Parliament.

We will continue to consider any new evidence on the Muslim Brotherhood's activities against the UK's legal thresholds.

■ **Public Spaces Protection Orders: Homelessness**

Steve McCabe:

[\[260542\]](#)

To ask the Secretary of State for the Home Department, what regulations are in place to stop local authorities from the excessive use of public space protection orders against homeless people.

Victoria Atkins:

Revised statutory guidance on the use of the powers provided by the Anti-social Behaviour, Crime and Policing Act 2014, published in December 2017 made it clear that public space protection orders should be used proportionately and should not be used to target people based solely on the fact that someone is homeless or sleeping rough.

■ **Radicalism: Finance**

Lyn Brown:

[\[259925\]](#)

To ask the Secretary of State for the Home Department, if he will make an assessment of the implications for his policies of the May 2019 Royal United Services Institute report into international financing of UK right-wing extremist organisations entitled Fundraising for Right-Wing Extremist Movements: How They Raise Funds and How to Counter It.

Lyn Brown:

[\[259926\]](#)

To ask the Secretary of State for the Home Department, if he will put in place a strategy to support the (a) identification and (b) disruption by Government bodies of fundraising for (i) those organisations identified in the May 2019 Royal United Services Institute report entitled Fundraising for Right-Wing Extremist Movements: How They Raise Funds and How to Counter It and (ii) other right-wing extremist movements.

Mr Ben Wallace:

The UK has a strong reputation for tackling terrorist financing, using a range of disruptive tools and capabilities to prevent the movement of terrorist finance into and out of the UK. The Joint Money Laundering Intelligence Task Force brings together the financial sector with government to better detect and disrupt terrorist funding.

The 2017 Criminal Finance Act also strengthened law enforcements ability to identify, investigate and disrupt terrorist finance activity and work effectively with private sector partners.

The Government remains committed to tackling Right-Wing Extremism and extremist fundraising. We continue to consider all emerging evidence and analysis of financing for extremist causes, including that of the Extremism Analysis Unit.

HOUSING, COMMUNITIES AND LOCAL GOVERNMENT**■ Housing: Overcrowding****Chuka Umunna:****[261224]**

To ask the Secretary of State for Housing, Communities and Local Government, how many people are living in illegally overcrowded housing in (a) the UK and (b) the London Borough of Lambeth.

Mrs Heather Wheeler:

The Housing Act 1985 provides a statutory overcrowding standard, breach of which is a criminal offence. Official statistics on the number of households that are statutorily overcrowded are not routinely collected. According to the Department's English Housing Survey, in 2017-18, there were approximately 746,000 households living in overcrowded accommodation in England. This equates to 3 per cent of households. The Department does not hold information on the prevalence of overcrowding in the London Borough of Lambeth

Ref:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/774820/2017-18_EHS_Headline_Report.pdf .

■ Local Government: Cultural Heritage**Andrew Rosindell:****[261127]**

To ask the Secretary of State for Housing, Communities and Local Government, pursuant to the Answer of 20 May 2019 to Question 254756 on Historic County Flags Day, whether borough council leaders are also encouraged to engage in local activities to celebrate their historic counties.

Jake Berry:

I would like all councils to celebrate their historic counties, and local events to mark Historic County Flags Day on 23 July would be an excellent way to do that. We will shortly be publishing guidance, a copy of which I sent earlier this year to the leaders of county councils and unitary counties, to help local authorities celebrate their counties' proud histories and identities, including by celebrating Historic County Flags Day and the flying of Historic County Flags. I am also considering other ways in which we can raise the profile of Historic County Flags Day.

INTERNATIONAL DEVELOPMENT**■ Central Bank of Yemen****Keith Vaz:****[261473]**

To ask the Secretary of State for International Development, with reference to recent UN-mediated talks in Amman between officials of Yemen's Central bank what steps he is taking to support further such meetings.

Dr Andrew Murrison:

The UK welcomes the recent UN-mediated talks between the Central Bank of Yemen Aden and Sana'a branches on enacting the revenue-managing elements of the Stockholm agreement. We recognise that closer collaboration between the branches of the Central Bank will be vital in bringing economic stability to Yemen.

We encourage both parties to continue to constructively engage with Special Envoy Martin Griffiths and meet again to discuss this issue to ensure Stockholm agreements are implemented, helping improve Yemen's fragile economy and ensure the payment of public sector salaries across the country.

■ Central Bank of Yemen: Pay**Keith Vaz:**[\[261474\]](#)

To ask the Secretary of State for International Development, with reference to the UN-mediated talks in Amman between officials in Yemen's Central bank, what steps he is taking to ensure civil servants are paid as set out in the Stockholm Agreement.

Dr Andrew Murrison:

The UK welcomes recent efforts by both parties to constructively engage with the UN Special Envoy Martin Griffiths to implement the Stockholm agreements, including sharing Hodeidah port revenues for the payment of public salaries.

Together with the international community, the UK is working with the Government of Yemen's Prime Minister's Office and the Central Bank of Yemen to develop a plan to sustainably finance the Stockholm agreement's ambition for the payment of public sector salaries across Yemen, through an accountable budgetary process.

We welcome the Government of Yemen's leadership of paying salaries to some health workers in Houthi-controlled areas and all public workers in Hodeidah this year. We encourage this to continue which will be vital in restoring key services such as schools and health clinics and boosting the livelihoods of public-sector workers.

■ Non-governmental Organisations: Religion**Luke Hall:**[\[261525\]](#)

To ask the Secretary of State for International Development, what assessment he has made of the potential merits of requiring international NGOs to consider religious vulnerability in their definition of need.

Harriett Baldwin:

All DFID partners carry out comprehensive vulnerability assessments to ensure aid is reaching those most in need, including those from religious minorities as it is already recognised that religion may be a factor in causing vulnerability. We continue to discuss the treatment of minorities with the UN, our humanitarian partners and minority representatives.

■ Overseas Aid: Christianity

Luke Hall:

[\[261524\]](#)

To ask the Secretary of State for International Development, what steps his Department is taking to ensure that UK aid reaches persecuted Christians.

Harriett Baldwin:

The UK Aid Strategy commits the UK to be the lead on the “Leave No One Behind” promise. Our analysis of poverty and vulnerability looks at a range of factors that lead to exclusion including religious identity. Humanitarian assistance is provided on need, irrespective of race, religion or ethnicity and we work to ensure that aid reaches the most vulnerable including those from religious minorities.

We work closely with the Foreign and Commonwealth Office who lead on the protection of freedom of religion and religious minorities.

■ Yemen: Financial Institutions and Imports

Keith Vaz:

[\[261475\]](#)

To ask the Secretary of State for International Development, what assessment he has made of the economic effect of regulating (a) imports, (b) commercial banks and (c) money exchangers in Yemen on Houthi revenues in that country.

Dr Andrew Murrison:

The Department for International Development does not have insight into how Houthi revenue flows have changed over time. The UK condemns Houthi interference in the operations of local banks in north Yemen, including the arrest of banking staff in February 2019.

Effective economic regulations, alongside appropriate economic policies, will have critical humanitarian benefits in Yemen. Whilst the latest total food import levels into Yemen have exceeded pre-conflict requirements, high prices continue to drive the risk of famine.

The need for effective economic regulation was demonstrated last year, when the Yemeni Riyal lost more than half of its value between January and October 2018. This caused prices to rise steeply and risked making food unaffordable for millions of vulnerable Yemenis. This depreciation was reversed after UK-led efforts released over \$400 million of hard currency (provided by Saudi Arabia), to importers bringing food into the country.

We will continue to constructively engage with the Government of Yemen to prevent any repeated depreciation, and to stabilise Yemen’s economy through more effective and transparent management of its public finance.

INTERNATIONAL TRADE**■ Financial Services: Foreign Investment in UK****Adam Afriye:**[\[261177\]](#)

To ask the Secretary of State for International Trade, what assessment he has made of recent trends of the level of foreign direct investment into the UK FinTech industry in the (a) 2017-18 and (b) 2016-17 financial years.

Graham Stuart:

The information regarding FDI is not held centrally and could only be obtained at disproportionate cost.

Last year British FinTech's attracted more venture capital funding than any other European country once again totalling \$1.73 billion across 261 deals.

■ Overseas Trade: Public Consultation**Stewart Hosie:**[\[262304\]](#)

To ask the Secretary of State for International Trade, when he plans to publish a response to his Department's public consultations on (a) Trade with the US, (b) Trade with Australia, (c) Trade with New Zealand and (d) Trade with the Comprehensive and Progressive Agreement for Trans-Pacific Partnership which concluded on 26 October 2018.

George Hollingbery:

We intend to publish a Government Response, to the four public consultations on potential future free trade agreement negotiations with the US, Australia, New Zealand and on the UK potentially seeking accession to the Comprehensive and Progressive Agreement for Trans-Pacific Partnership (CPTPP), before entering into any future trade agreement negotiations.

■ Soya Beans: Imports**Kerry McCarthy:**[\[259093\]](#)

To ask the Secretary of State for International Trade, what plans the Government has to set baseline import standards and due diligence requirements on companies importing soy.

George Hollingbery:

Imports of fruit and vegetables, including soy and soy-based products, from outside the European Union must meet the same standards as food produced in the EU.

Maintaining safety and public confidence in the food we eat is of the highest priority. Without exception, imports must meet all the relevant UK product rules and regulations. The EU Withdrawal Act will transfer onto the UK statute book all current EU food safety and animal welfare standards.

JUSTICE**■ Criminal Proceedings: South Yorkshire****Angela Smith:****[261170]**

To ask the Secretary of State for Justice, what assessment he has made of the average time it takes to process criminal cases in the courts in South Yorkshire in the most recent period for which figures are available; and if he will make a statement.

Edward Argar:

The Ministry of Justice has published information on the average length of time taken from first listing to completion, quarterly from June 2010 to December 2018, and can be found in the timeliness-transparency-q4-2018 file:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/790261/Transparency_files.zip

Filter LCJB area: South Yorkshire LCJB, data can then be filtered by court type.

Data for the quarter ending March 2019 will be published in June 2019.

The South Yorkshire Local Criminal Justice Board and the agencies involved keep performance regularly under review and take action when required.

We are working together across the Criminal Justice System to ensure the smooth running of our courts, as well as using new technology and initiatives to reduce delays and outstanding cases at the Crown Court are at the lowest levels nationally since 2000. We have a world-leading justice system and performance levels are continually kept under close review to ensure changes in demands are met.

■ Prison Sentences: Females**Kate Green:****[260625]**

To ask the Secretary of State for Justice, what steps his Department is taking to ensure that women in prison on imprisonment for public protection sentences have sentencing plans with release dates.

Edward Argar:

It is for the independent Parole Board to review the detention of those prisoners serving an IPP sentence who have completed their tariff period. The Board will direct the release of these prisoners only if it is satisfied that the levels of risk posed to the general public are reduced enough that the National Probation Service and its partner agencies can safely manage them in the community under supervision. Therefore, whilst every female prisoner serving the IPP sentence should have a sentence plan, it is not possible for an offender manager to include a release date in the sentence plan.

A range of initiatives are in place, as part of the joint action plan, co-owned by HM Prison and Probation Service and the Parole Board, which are having a positive impact on the progression of women serving an IPP sentence. The initiatives include

ensuring that there is a sufficient supply of places on offending behaviour programmes, to meet the demand in prisoners' sentence plans.

On 27 June 2018 we published our strategy for female offenders. This sets out our vision to see fewer women coming into the criminal justice system, a greater proportion managed successfully in the community, and better conditions for those in custody.

Whilst HM Prison and Probation Service is focused on giving all prisoners serving IPP sentences opportunities to progress towards release, public protection must remain our priority.

■ Prisoners: Childbirth

Kate Green:

[\[260623\]](#)

To ask the Secretary of State for Justice, how many babies were born to mothers in prison in each of the last five years.

Edward Argar:

The information requested is not held centrally and could only be obtained at disproportionate cost. Information relating to births and pregnancy is recorded locally. Work is currently underway to look at what information related to pregnancy and birth can be collected centrally.

■ Women's Centres: Finance

Kate Green:

[\[260622\]](#)

To ask the Secretary of State for Justice, what plans he has to allocate funding to the network of specialist women's centres offering holistic support to women affected by the criminal justice system.

Edward Argar:

The Female Offender Strategy recognises the role that holistic community services can play in supporting vulnerable women in contact with or at risk of entering the justice system. These services work to support women to address the often complex needs that underlie their offending behaviour.

This is why, as part of the Female Offender Strategy, we have invested £5 million of funding over two years in community provision for women. This funding will help to sustain and enhance existing services, and create new services where there is currently a gap. This is in addition to the £1 million invested between 2016 and 2020 to support local areas to respond to the needs of female offenders by adopting a multi-agency approach.

Services such as women's centres receive funding from a range of sources. We will continue to look at the scope to increase the sustainability of the sector as we take forward the delivery of the Strategy in its second year.

In the strategy we also committed to develop a 'residential women's centre' pilot in at least five sites across England and Wales. The aim of the pilot will be to develop an

evidence base for how we might reduce the numbers of women entering and re-entering custody for short periods. We want to make sure the models we take forward are sustainable, scalable and appropriate for the local context of each site. We have recently concluded our first phase of consultation with stakeholders, partners and providers to inform our scoping. We will continue to consult with partners as we refine the design and delivery of the pilot.

■ **Women's Prisons: Telephones**

Kate Green:

[\[260624\]](#)

To ask the Secretary of State for Justice, with reference to the findings of the Farmer Review, what progress his Department has made on introducing in-cell phones throughout the women's prison estate.

Edward Argar:

Currently, HMP Eastwood Park and HMP Styal have in-cell telephones and this will be extended to HMP Newhall and HMP Foston Hall later this year. This is part of a wider rollout which will see 50 public sector prisons having in-cell telephones by March 2020. This will provide a crucial means of allowing prisoners to build and maintain family relationships, boosting their rehabilitation prospects.

NORTHERN IRELAND

■ **European Parliament: Elections**

Lady Hermon:

[\[260577\]](#)

To ask the Secretary of State for Northern Ireland, what estimate she has made of the number of EU citizens resident in Northern Ireland who were unable to exercise their franchise in the recent European parliamentary elections as a result of the late distribution by the Northern Ireland Electoral Office of an additional EU form; and if she will make a statement.

Karen Bradley:

The Chief Electoral Officer (CEO) issued 34,040 letters advising EU citizens resident in Northern Ireland of the requirement in law to complete an additional form if they wished to vote in the European Parliamentary elections in May 2019 in Northern Ireland. This letter made clear the deadline for return of the forms. The form was also made available on the Electoral Office for Northern Ireland website.

9,020 electors responded. Unfortunately 1,204 electors replied after the deadline and were advised their application had been received too late to enable them to vote.

TRANSPORT■ **Aviation****Henry Smith:**[\[262347\]](#)

To ask the Secretary of State for Transport, what recent progress he has made on maintaining flights between the UK and Europe after the UK leaves the EU.

Michael Ellis:

The UK and the EU have committed to seek an agreement on the future relationship for aviation that will secure market access rights for UK and EU airlines. The Government remains focused on ensuring our smooth and orderly withdrawal from the EU but has also been preparing to minimise any disruption in the event that the UK leaves the EU without a deal. Measures put forward by the UK and the EU will ensure that flights can continue in any EU Exit scenario.

■ **Aviation: Noise****Ruth Cadbury:**[\[261243\]](#)

To ask the Secretary of State for Transport, what plans he has to survey local communities on the effect on quality of life of aircraft noise below 51 dB LAeq.

Michael Ellis:

This matter was raised in the department's Airspace and Noise Engagement Group, which is a formal channel of communication between the department and airspace and airport noise stakeholders, and also with the Independent Commission on Civil Aviation Noise (ICCAN). As they discussed, the department is considering the need to commission a further Survey of Noise Attitudes to provide updated evidence on the effects of aircraft noise on annoyance, wellbeing and health.

The extent to which this survey could include communities living in contours below 51 dB LAeq, is dependent on reliable measurement and modelling of aircraft noise at lower aircraft noise levels. This is currently difficult to achieve, but future technological solutions around sound processing are expected to assist.

■ **Bus Services: Disability****Steve McCabe:**[\[260543\]](#)

To ask the Secretary of State for Transport, what recent progress his Department has made on the installation of audio visual equipment in buses.

Ms Nusrat Ghani:

The Government understands the importance of accessible on-board information in helping bus passengers to travel with confidence, and in Summer 2018 published a public consultation on proposals to require its provision on local bus services throughout Great Britain.

We continue to analyse responses to the consultation and expect to announce our next steps regarding the making of Regulations and publication of guidance later in

the year. In the meantime, we welcome operators' efforts to provide accessible information onboard their services ahead of the Regulations being made.

■ Dartford-Thurrock Crossing

Sir David Evennett:

[\[262264\]](#)

To ask the Secretary of State for Transport, pursuant to the Answer of 20 November 2018 to Question 190369, what the average journey time was to cross the Dartford Crossing (a) northbound and (b) southbound at peak times in each of the last six months.

Michael Ellis:

The tables below contain average peak hours (6am to 9am and 4pm to 7pm) journey time data for the northbound and southbound route which encompasses the Dartford Crossing.

This data covers the most recent 6-month period available and has been produced in line with the commitment made by Highways England in the response to Parliamentary question 190369.

NORTHBOUND ROUTE

Month	AM Peak (Mins:Seconds)	PM Peak (Mins:Seconds)
July 2018	07:24	12:58
August 2018	06:35	13:22
September 2018	06:36	11:09
October 2018	07:06	10:27
November 2018	07:54	10:09
December 2018	06:32	09:05

SOUTHBOUND ROUTE

Month	AM Peak (Mins:Seconds)	PM Peak (Mins:Seconds)
July 2018	11:42	14:30
August 2018	10:59	13:05
September 2018	10:58	12:31
October 2018	11:38	13:40

SOUTHBOUND ROUTE

November 2018	13:32	13:42
December 2018	10:40	13:10

The northbound route is 4.5miles (7.2km) and the southbound route 9.5miles (15.2km). The times shown above is to travel the length of the route.

■ Heathrow Airport: Noise

Ruth Cadbury: [\[261241\]](#)

To ask the Secretary of State for Transport, what plans he has to undertake local noise surveys in communities that will be affected by the expansion of capacity at Heathrow.

Michael Ellis:

Heathrow Airport Limited (HAL) has made significant investment in noise surveying in recent years and now has over 44 noise monitors deployed around the airport. This is up from 15 noise monitors three years ago and the airport intends to invest more in noise monitoring in the future. Noise measurements from these monitors are used to validate the computer-modelled noise exposure contours produced by the Civil Aviation Authority.

The Government's Aviation Strategy includes proposals to create minimum standards for noise monitoring around airports and we welcome views from all stakeholders in response to this.

Ruth Cadbury: [\[261242\]](#)

To ask the Secretary of State for Transport, whether he plans to conduct an optimism bias assessment on public sensitivity to aviation noise in communities that are likely to be affected by expansion at Heathrow.

Michael Ellis:

The Department for Transport guidance sets out how we should consider optimism bias when appraising transport schemes. In the case of Heathrow expansion, we estimated noise impacts using a central demand scenario in order to provide estimates consistent with the rest of the appraisal. In order to test worse case impacts, a higher demand scenario was used in the revised Appraisal of Sustainability (AoS).

The 2014 Survey of Noise Attitudes (SoNA) recognises that attitudes towards aviation noise are changing. The work carried out during the SoNA study shows that sensitivity to aircraft noise has increased, with the same percentage of people being highly annoyed at lower levels of noise than in a past study. As a result, the Government has introduced new metrics and appraisal guidance to assess noise impacts and their impacts on health and quality of life. This will ensure that the noise impacts of proposed airspace changes are considered much further away from airports than at present.

The Independent Commission on Civil Aviation Noise (ICCAN) began work earlier this year, and will focus on developing best practice guidance in aviation noise management.

■ London City Airport: Noise

Andrew Rosindell: [\[261130\]](#)

To ask the Secretary of State for Transport, what recent discussions he has had with representatives of London City Airport on noise complaints.

Michael Ellis:

The Aviation Minister met with the Chief Executive of London City Airport on 11 June, during which aircraft noise was discussed. My officials hold regular meetings with airport representatives, and noise complaints were most recently discussed on 30 April.

■ Railways: Freight

Martin Vickers: [\[261186\]](#)

suggested redraft: To ask the Secretary of State for Transport, what estimate his Department has made of the potential effect on the viability of rail freight of a 25 per cent reduction in (a) mode shift revenue support and (b) waterborne freight grant.

Andrew Jones:

The Government provides grants worth £15.6m per year to support rail and water freight services which deliver environmental and economic benefits over road transport, but whose operating costs are higher. This level is net of a significant efficiency saving implemented since 2015.

Rail flows of intermodal freight continue to be healthy and the grants deliver high value for money. A research project is underway to inform decisions about future funding and operation of the grants and will consider stakeholder feedback.

■ Unmanned Air Vehicles

Andrew Rosindell: [\[261157\]](#)

To ask the Secretary of State for Transport, what recent assessment his Department has made of the potential economic benefits of commercial drone use.

Michael Ellis:

The potential economic value of drones is huge and, in May 2018, PwC announced that the social and economic benefits of their use could add £42 billion to GDP by 2030. Drones are already being used to great effect

by our emergency and search and rescue services, the public sector and charities to drive more efficient ways of working, monitor environmental change, and assist infrastructure inspections and construction.

TREASURY**Financial Services: Taxation****Adam Afriye:**[\[261178\]](#)

To ask the Chancellor of the Exchequer, how much the UK FinTech industry paid the Exchequer in tax revenue in (a) 2017-18 and (b) 2016-17 financial years.

Jesse Norman:

HM Revenue and Customs (HMRC) publishes annual statistics relating to income tax, VAT and corporation tax by industry (including the Financial and Insurance Activities Sector). However, HMRC cannot identify receipts from the UK FinTech industry specifically.

For other taxes, industry-level information is not available.

For business rates, the Ministry of Housing, Communities & Local Government collects data only at local authority level and is unable to provide a breakdown by industry.

WOMEN AND EQUALITIES**Department for Transport: Equality****Neil Gray:**[\[253589\]](#)

To ask the Minister for Women and Equalities, what progress her Department has made on achieving Sustainable Development Goal 10 to reduce inequality within and among countries in respect of inequality within the UK.

Victoria Atkins:

The UK will present a Voluntary National Review (VNR) to the United Nations in July 2019, setting out the UK's contribution to achieving the 17 Sustainable Development Goals (SDGs), at home and abroad. The report will include the Government's progress in supporting delivery of Goal 10 to reduce inequality within and among countries and will include an assessment of the UK's efforts to empower and promote the social, economic and political inclusion of all and reduce inequalities of outcome and discriminatory laws, policies and practices.

Gender Recognition**Dr Rosena Allin-Khan:**[\[260092\]](#)

To ask the Minister for Women and Equalities, with reference to the Government consultation on Reform of the Gender Recognition Act which closed on 22 October 2018, when the Government plans to publish (a) that consultation's findings and (b) its response to those findings.

Victoria Atkins:

From 3 July to 22 October 2018, the Government ran a public consultation on reforming the Gender Recognition Act 2004 in order to make the gender recognition process less bureaucratic and intrusive for the people that use it.

We have had an exceptional response rate to the consultation on the Gender Recognition Act, receiving over 100,000 responses. We are considering these responses and the next steps. We will set out our response to the consultation later this year. This will include publishing the consultation results.

WORK AND PENSIONS**■ Department for Work and Pensions: Living Wage****Justin Madders:**[\[261256\]](#)

To ask the Secretary of State for Work and Pensions, what proportion of organisations that hold contracts with her Department pay the National Living Wage.

Will Quince:

The Department does not hold this data.

■ Health Hazards: EU Law**Janet Daby:**[\[261300\]](#)

To ask the Secretary of State for Work and Pensions, if she will make it her policy to align standards for protecting workers against exposure to carcinogens or mutagens with the provisions contained in Directive 2004/37/EC.

Justin Tomlinson:

I refer the hon. Member to the answer given for Question [254878](#).