



This report shows written answers and statements provided on 7 June 2022 and the information is correct at the time of publication (06:50 P.M., 07 June 2022). 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

BUSINESS, ENERGY AND INDUSTRIAL STRATEGY

■ District Heating: Prices

Mr Richard Holden:

[8217]

To ask the Secretary of State for Business, Energy and Industrial Strategy, what assessment his Department has made of the potential merits of introducing a price cap for people in community heat networks; what his timeframe is for introducing that price cap; and what interim support for energy costs his Department is providing those people.

Greg Hands:

The Queen's Speech on 10th May, confirmed that the Government has now committed to legislating to regulate the heat networks market in this parliamentary session as part of the [Energy Security Bill](#). The legislation will provide the BEIS Secretary of State with powers to introduce a price cap should it be necessary to protect consumers from anti-competitive behaviour. The Government has announced a package of support to help households with rising energy bills:

<https://www.gov.uk/government/publications/cost-of-living-support/cost-of-living-support-factsheet-26-may-2022>.

■ Energy: Prices

Mr Richard Holden:

[8216]

To ask the Secretary of State for Business, Energy and Industrial Strategy, whether his Department has made an assessment of the potential merits of introducing an energy price cap for (a) oil, (b) liquefied petroleum gas and (c) solid fuel used by off-grid homes, similar to the energy price cap for on-grid homes; and whether his Department has taken steps to help support off-grid homes in the context of increases in energy costs resulting from Russia's invasion of Ukraine.

Greg Hands:

The Government recognises that, as a result of volatile international crude oil prices as well as the conflict in Ukraine, heating oil and liquefied petroleum gas prices have risen steeply over the past year.

The Government has carefully considered calls to introduce a price-cap for these fuels. The heating oil, liquefied petroleum gas and solid fuel markets are not natural monopolies with high fixed and start-up costs and are not difficult for customer switching. The Government does therefore not deem it appropriate to introduce a price cap at this point in time. Nevertheless, the Government recognises the pressures people are facing with the cost of living and has set out a generous £22 billion package of support.

CABINET OFFICE

■ 10 Downing Street

Mr Tanmanjeet Singh Dhesi: [\[9981\]](#)

To ask the Minister for the Cabinet Office, with reference to the covid-secure bar in operation within Downing Street on 17 November 2020 as referred to in WhatsApp messages between Downing Street aides published in media reports on 25 May 2022, whether his Office holds information on the (a) opening times and (b) covid-secure measures that were in place.

Michael Ellis:

I refer the Hon. Member to the Second Permanent Secretary's report and its conclusions, alongside the Prime Minister's statement to the House of 25 May 2022.

■ Chequers: Staff

Angela Rayner: [\[11686\]](#)

To ask the Minister for the Cabinet Office, how many staff are employed at Chequers as of 1 June 2022.

Michael Ellis:

Chequers is not a government building; it is run and managed by an independent trust.

■ Investigation into Alleged Gatherings on Government Premises

Dame Angela Eagle: [\[9840\]](#)

To ask the Minister for the Cabinet Office, with reference to the report entitled Findings of second permanent secretary's investigation into alleged gatherings on government premises during covid restrictions, on what date and at what time officials in (a) his Department and (b) Downing Street, who were not involved in its production, were granted sight access to review that report. of the Sue Gray report entitled Findings of second permanent secretary's investigation into alleged gatherings on government premises during covid restrictions before 25th May 2022.

Dame Angela Eagle: [\[9841\]](#)

To ask the Minister for the Cabinet Office, on what date and at what time (a) he or and (b) staff in his private office were granted access to review the Sue Gray report entitled Findings of second permanent secretary's investigation into alleged gatherings on government premises during covid restrictions.

Dame Angela Eagle: [\[9842\]](#)

To ask the Minister for the Cabinet Office, on what date and at what time (a) the Prime Minister, (b) his chief of staff and (c) other officials, Ministers and special advisers in Downing Street were granted access to review the report entitled Findings of second permanent secretary's investigation into alleged gatherings on government premises during covid restrictions prior to its publication on 25 May.

Dame Angela Eagle:

[\[9843\]](#)

To ask the Minister for the Cabinet Office, on what date and at what time (a) he or and (b) staff in his private office were granted access to review the Sue Gray report entitled Findings of second permanent secretary's investigation into alleged gatherings on government premises during covid restrictions.

Michael Ellis:

The report was sent from the Second Permanent Secretary to the Permanent Secretary of No 10 Downing Street after 10am on the day of 25 May 2022 for the purposes of providing the report to the Prime Minister to enable publication.

I understand that prior to publication, letters were sent on a confidential basis from the Second Permanent Secretary to those in the report who may be perceived to be criticised in some way, including some who were intended to be named. The letters set out a gist of the factual findings proposed for inclusion in the report so that those individuals had an opportunity to make representations to the Second Permanent Secretary before publication.

I also understand that a small number of officials were made aware, in their roles as employers, of the identity of those intended to be named and those who may be potentially identifiable in the context of the report, so that they could consider any relevant duty of care to those individuals.

Neither I, nor my private office, accessed or reviewed the report prior to publication. My officials have informed me that no other Minister of the Crown was granted access to review the report prior to 10am on the day of publication.

DEFENCE

■ Armed Forces Day

Stuart Anderson:

[\[9156\]](#)

To ask the Secretary of State for Defence, what steps he is taking to mark Armed Forces Day on 25 June 2022.

Leo Docherty:

The Ministry of Defence (MOD) is supporting communities across the UK in celebration of Armed Forces Day. Almost 300 events are registered on the Armed Forces Day website, taking place across the UK, for the National Event on Saturday 25 June. The MOD is providing general grants, our people, our equipment, flypasts, and air displays all by way of support.

■ Cyprus: Military Bases

Kenny MacAskill:

[\[8179\]](#)

To ask the Secretary of State for Defence, how many US personnel are stationed at the British Sovereign Base Areas of (a) Akrotiri and (b) Dhekelia on Cyprus.

James Heappey:

United States personnel have been stationed at RAF Akrotiri since 1974, when a monitoring operation in support of Middle East peacekeeping arrangements started. We do not propose to release the numbers of US personnel participating in current or future operational activities.

■ Ukraine: Military Aid

Damien Moore:[\[10000\]](#)

To ask the Secretary of State for Defence, what steps his Department is taking to maintain aid and supplies to Ukraine.

James Heappey:

The UK remains committed to working with our Allies and Partners to provide military and humanitarian assistance to Ukraine.

We continue to liaise closely with the Armed Forces of Ukraine to understand their prioritised requirements, to date having sent over 6,900 anti-tank missiles, 120 armoured vehicles, 1,360 anti-structure munitions, Air Defence systems including Starstreak missiles and 4.5 tonnes of plastic explosives. This is in addition to more than 200,000 pieces of non-lethal aid and medical equipment.

We are working to encourage and further enable the delivery of even more systems and capabilities from across the international community to support Ukraine. And continue to make a major contribution to the leadership and operation of the International Donor Coordination Centre in Stuttgart.

■ Veterans: Medical Records

Luke Pollard:[\[9141\]](#)

To ask the Secretary of State for Defence, what his most recent estimate of the time taken for medical records to be transferred from Defence Medical Services to a civilian GP when service personnel leave the armed forces.

Leo Docherty:

One to three months before discharge, Service personnel are required to register with an NHS GP. However, the Ministry of Defence (MOD) is not notified by the NHS when an individual registers, so it is not possible for the MOD to automatically provide an individual's medical records to the GP. The new NHS GP must request records from the MOD, as they would from the previous NHS GP. Given this and that some records are never requested, no accurate estimate can be made of the average time from discharge to the receipt of the medical records by the NHS GP.

When medical records are requested, the MOD recognises the importance of transferring them promptly to the NHS to ensure continuity of care. To make this process as seamless as possible, a Primary Medical Care Solution is being developed, under Programme Cortisone, that will link MOD systems with national NHS systems. The Primary Medical Care Solution is in development and currently

expected to go live in early 2023, followed by an 18-month rollout to all Defence Medical Services practices.

FOREIGN, COMMONWEALTH AND DEVELOPMENT OFFICE

■ Africa: Bilateral Aid

Preet Kaur Gill: [\[9960\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, whether she has set a target level of bilateral aid to Africa as a proportion of (a) the 2022 Official Development Assistance budget and (b) future budgets.

Amanda Milling:

The FCDO's Annual Report and Accounts will be laid in Parliament before the Summer recess, and will include further detail on FCDO's ODA spending.

■ Developing Countries: Health Services

Preet Kaur Gill: [\[9957\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, what progress her Department has made towards ending preventable deaths of (a) mothers, (b) new-born babies and (c) children by 2030.

Amanda Milling:

The International Development Strategy highlights our commitment toward ending preventable deaths and improving health outcomes for mothers, new born babies and children. The FCDO is continuing to engage with our partners globally and at country level in line with the Ending Preventable Deaths (EPD) Approach paper. Since January 2022, the UKAid-funded Hygiene Behaviour Change Coalition has reached an additional 500,000 people with hygiene messages to reduce the spread of C-19 and other preventable diseases. The FCDO is currently identifying EPD flagship countries, and exploring ways of better supporting the network's EPD programming through technical assistance on nutrition, water and sanitation, sexual reproductive health and rights, and access to quality health services. We continue to deliver our commitments on EPD using our programme and policy work, and diplomatic networks.

■ Northern Ireland Protocol

Claire Hanna: [\[6946\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, how many technical meetings representatives of the Government have attended with the EU on the Northern Ireland Protocol since October 2021.

Claire Hanna: [\[6947\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, if she will provide details of what items in respect of the Northern Ireland Protocol have

been discussed in technical meetings between representatives of the Government and EU since October 2021.

James Cleverly:

The Foreign Secretary, as UK Co-chair of the Withdrawal Agreement Joint Committee, and her predecessor Lord Frost met their EU counterpart, Vice President Maroš Šefčovič on 26 occasions since September 2021 to discuss the Northern Ireland Protocol. This also includes one meeting of the Withdrawal Agreement Joint Committee on 21 February 2022. These discussions were supported by approximately 300 hours of negotiations over 6 months by UK and EU officials, covering sanitary and phytosanitary (SPS), customs, VAT and excise, goods, subsidy control, medicines, and governance.

■ Polio: Disease Control

Preet Kaur Gill:

[\[9953\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, what recent assessment she has made of the potential impact of UK budget reductions to the Global Polio Eradication Initiative (a) on global polio eradication and (b) recent outbreaks of polio in (i) Malawi and (ii) Mozambique.

Amanda Milling:

The UK remains committed to polio eradication, and supports the work of the Global Polio Eradication Initiative (GPEI), to which we have provided £1.38 billion since 1995. The GPEI have led efforts that have eradicated wild polio from all but two countries, with last year reporting just six cases of wild polio virus; by far the lowest ever recorded. GPEI have now vaccinated 13 million children in Malawi, Mozambique and neighbouring countries. This recent importation of cases to Africa shows the importance of retaining high levels of childhood immunisation, which is why the UK remains the largest donor to Gavi's core mission. In addition to our support at a global level to GPEI, the UK is a strong partner to the Malawi and Mozambique health sectors, including through our health systems strengthening programmes, which have components aimed at building preparedness and response to health shocks such as disease outbreaks and supporting the provision of childhood vaccines.

The difficult economic situation has meant that we have had to reduce the aid budget, including for programmes such as GPEI. We will return to spending 0.7% of our Gross National Income on Official Development Assistance as soon as the fiscal situation allows.

■ Refugees: Ukraine

Mr Andrew Mitchell:

[\[9847\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, whether the cost of supporting Ukrainian refugees in the UK will be scored as ODA; what assessment she has made of the impact of that cost on the UK aid and development budget; and if she will make a statement.

James Cleverly:

Some support for refugees in the first twelve months of their stay in a donor country such as the UK is ODA eligible according to the OECD's directives on ODA. It will be for the relevant government departments funding the support to Ukrainian refugees in the UK to report the costs incurred for hosting Ukrainian refugees if they meet the ODA directives. In order to manage the 0.5% GNI budget, FCDO remains the ODA spender and saver of last resort. In line with usual practice, HMT and FCDO work closely together to monitor and manage risks against the ODA budget across government.

■ Somaliland: Foreign Relations

Alexander Stafford: [\[9222\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, whether she will take steps to build deeper relations between the UK and Somaliland.

Alexander Stafford: [\[9223\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, what steps the Government is taking to help secure Somaliland's prosperity.

Alexander Stafford: [\[9224\]](#)

To ask the Secretary of State for Foreign, Commonwealth and Development Affairs, what the Government's latest position is on the recognition of Somaliland's sovereignty.

Vicky Ford:

The UK is a leading partner of Somaliland, supporting its development, security, enhancing stability and promoting economic, human and social development. For a decade the UK has been the only Western bilateral donor with a permanent diplomatic presence in Hargeisa. The UK's support to Somaliland includes the £25 million Horn of Africa programme, and our £35 million contribution to the Somaliland Development Fund. In addition, our existing £25 million of investment of Official Development Assistance in the Berbera Corridor will drive economic growth, help build stability in the Horn, and present significant opportunities for UK businesses. Following the devastating fire in Hargeisa market on 1-2 April, the UK has led diplomatic and development response efforts on the ground, chairing an international coordination group.

The UK, consistent with the entire international community, does not recognise Somaliland's unilateral declaration of independence. It is for Somaliland and Somalia to come to an agreement about their future relationship. Any new arrangements would need to be recognised by the African Union and neighbours in the region. The African Union is the pre-eminent regional body mandated to defend the sovereignty, territorial integrity and independence of its Member States, of which Somalia is one. The UK encourages dialogue between Mogadishu and Hargeisa on this issue.

HEALTH AND SOCIAL CARE

■ Accident and Emergency Departments

Dr Matthew Offord:[\[2459\]](#)

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of trends in the number of visits to accident and emergency departments made by people who could not access GP appointments.

Edward Argar:

No specific assessment has been made.

■ Ambulance Services: Staff

Mr Tanmanjeet Singh Dhesi:[\[9976\]](#)

To ask the Secretary of State for Health and Social Care, what steps his Department has taken to (a) increase recruitment of ambulance staff and (b) ensure retention of ambulance staff for (i) the South Central Ambulance Service and (ii) UK wide ambulance services.

Edward Argar:

[Holding answer 6 June 2022]: In 2022/23, NHS England and NHS Improvement are allocating £150 million to support improvements to response times through retention and additional call handler recruitment. In September 2021, £1.7 million was provided for health and wellbeing initiatives for staff in England, including immediate welfare needs. The recruitment and retention of ambulance staff elsewhere in the United Kingdom is a devolved matter.

This funding has allowed South Central Ambulance Service to increase its recruitment of 999 call handlers. A working group has been also established to review the support provided to staff, such as raising awareness of counselling services.

■ Asthma: Health Services

Liz Twist:[\[9969\]](#)

To ask the Secretary of State for Health and Social Care, what the average waiting time is for patients to be first seen at each severe asthma centre.

Edward Argar:

This information is not collected in the format requested.

■ Autism: Children

Dr Lisa Cameron:[\[9909\]](#)

To ask the Secretary of State for Health and Social Care, what recent assessment he has made of the adequacy of post-diagnosis support services for children with autistic spectrum disorder.

Gillian Keegan:

No recent assessment has been made. However, in 2021/22 NHS England and NHS Improvement provided £7 million to local areas to test and implement timely autism diagnosis and post-diagnosis pathways for children and young people. NHS England and NHS Improvement are also developing a national framework for autism diagnostic pathways for children and young people. The 'SEND review: right support, right place, right time' green paper is consulting on improvements in health, care and educational support for children with special educational needs and disabilities, including those who are autistic.

■ Cancer: Drugs

Alex Sobel:[\[3710\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has been made of the adequacy of access for stage 4 cancer patients to (a) Evashield and (b) other drugs that help increase resistance to covid-19.

Maggie Throup:

[Holding answer 23 May 2022]: Patients with active metastatic cancer are eligible for novel antiviral and antibody treatment in the community through the COVID Medicine Delivery Units. The Medicines and Healthcare products Regulatory Agency highlighted the uncertainty of the appropriate dose of pre-exposure prophylactic medications, such as Evusheld, for protection against the Omicron variant. Understanding the efficacy of these treatments is necessary prior to any procurement or deployment. The UK Health Security Agency is currently undertaking further testing on Evusheld's effectiveness against the Omicron variant. This will inform any decisions on the procurement of this treatment.

■ Carers: Respite Care

Daisy Cooper:[\[10022\]](#)

To ask the Secretary of State for Health and Social Care, if his Department will publish a recovery and respite plan for unpaid carers.

Gillian Keegan:

We have no plans to do so. The 'People at the Heart of Care: adult social care reform' white paper sets out how the Government will work with the sector to improve the services provided to support unpaid carers. Funding is also provided through the Better Care Fund (BCF) to support carer breaks and respite. The BCF Framework for 2022/23 will request that all local BCF partnerships set out how funding is being used to support unpaid carers.

Additionally, unpaid carers in low-income households will benefit from the Means-Tested Benefit Cost of Living Payment. Those living in the same household as the disabled person for whom they care will benefit from the disability Cost of Living Payment, while families with a pensioner in the household will benefit from the Pensioner Cost of Living Payment.

■ Community Care: Endoscopy

Peter Dowd: [\[9028\]](#)

To ask the Secretary of State for Health and Social Care, whether his Department has made an assessment of the potential merits of using single use endoscopes in community care settings; and if he will make a statement.

Peter Dowd: [\[9029\]](#)

To ask the Secretary of State for Health and Social Care, whether his Department plans to help ensure providers enable patients choice on whether a (a) single-use or (b) reusable endoscope is used in their endoscopy treatment; and if he will make a statement.

Edward Argar:

[Holding answer 6 June 2022]: NHS England and NHS Improvement are currently reviewing the potential merits of single-use endoscopes, while considering hospital acquired infections, patient safety and the prevalence of antibiotic resistant organisms in care environments. NHS England and NHS Improvement will review factors including environmental sustainability and economic factors. However, there are no current plans to use single-use endoscopes in any setting.

The National Health Service offers patients accessible, reliable and relevant information to inform healthcare decisions. This will include information on the range and quality of clinical services where there is robust and accurate information available.

■ Coronavirus: Disease Control

Rachael Maskell: [\[9930\]](#)

To ask the Secretary of State for Health and Social Care, if he will take steps to ensure that (a) data on covid-19 data is robust and publicly accessible and (b) the public can continue to assess local risk of covid-19.

Maggie Throup:

Statistics are produced and released in line with the principles set out in the Code of Practice for Statistics, ensuring high quality and accessibility.

The content and frequency of reporting on COVID-19, such as the 'Coronavirus (COVID-19) in the UK' dashboard published on GOV.UK, is kept under review. The dashboard includes local data on testing, cases, vaccination, hospitalisation and deaths. The Office for National Statistics' (ONS) Coronavirus (COVID-19) Infection Survey is the Government's community surveillance programme. The ONS publishes weekly insights on infections across the United Kingdom, which includes sub-regional estimates of the proportion of people testing positive for COVID-19.

Rachael Maskell:

[9931]

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure that people who are immunosuppressed are able to access covid-19 (a) vaccinations and (b) advice to reduce risk of infection.

Maggie Throup:

COVID-19 vaccination appointments are available online through the National Booking System or via 119. An open letter from the National Health Service, charity and community leaders to people with a weakened immune system was published on 26 May 2022, encouraging individuals who are immunosuppressed to book an appointment or visit a walk-in centre to receive their vaccination. The letter is available at the following link:

<https://www.england.nhs.uk/2022/05/open-letter-from-nhs-charity-and-community-leaders-to-people-with-a-weakened-immune-system/>

The Government has also published guidance for those people whose immune system means that they are at higher risk from COVID-19. This guidance provides advice on vaccinations and treatments as well as protective behaviours to reduce the risk of infection. The guidance is available at the following link:

www.gov.uk/government/publications/covid-19-guidance-for-people-whose-immune-system-means-they-are-at-higher-risk/covid-19-guidance-for-people-whose-immune-system-means-they-are-at-higher-risk

■ Coronavirus: Screening

Daisy Cooper:

[6913]

To ask the Secretary of State for Health and Social Care, what recent assessment he has made of the effectiveness of the UK Health Security Agency's Coronavirus test device approval (CTDA) process for covid-19 diagnostics, in helping UK manufacturers to be world-leaders in clinical diagnostics delivery.

Daisy Cooper:

[6924]

To ask the Secretary of State for Health and Social Care, for what reason foreign-manufactured PCR tests are not subject to the same Coronavirus Test Device Approvals (CTDA) process to which UK manufactured tests must comply.

Daisy Cooper:

[6925]

To ask the Secretary of State for Health and Social Care, if he will make it his policy to provide applicants to the Coronavirus Test Device Approvals (CTDA) service with weekly status updates on their applications.

Maggie Throup:

The Coronavirus Test Device Approval (CTDA) validation process has ensured that the highest quality COVID-19 tests are available on the United Kingdom market. As of 24 May 2022, 244 applications for review under CTDA regulations have been

received, with 143 or 58% originating from manufacturers in the UK. The CTDA validation process applies equally to both foreign and domestic manufacturers.

While there are no plans to provide specific weekly updates, the UK Health Security Agency (UKHSA) frequently communicates with applicants through its dedicated review and complaint channels. The UKHSA keeps the CTDA process under continuous review and will consider further improvements for applicants.

■ Dementia: Diagnosis

Damien Moore: [10006]

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of the relationship between an early diagnosis and good mental health for people living with dementia.

Gillian Keegan:

Timely diagnosis of dementia ensures that a person with dementia can access the advice, information, care and support to allow them to live well with the condition and remain independent for as long as possible. Mental wellbeing is acknowledged as one benefit of an early diagnosis. 'Benefits of timely dementia diagnosis' indicates that those who receive a diagnosis can understand their experience and reduce their anxiety. This report is available at the following link:

https://www.dementiaaction.org.uk/assets/0000/4970/BENEFITS_OF_TIMELY_DEMENTIA_DIAGNOSIS_to_distribute_2013.pdf

We will set out plans for dementia in England for the next 10 years later this year, including dementia diagnosis.

Tim Farron: [9866]

To ask the Secretary of State for Health and Social Care, whether he has made an assessment of the impact of the funding his Department provided for tackling dementia waiting lists and increasing dementia diagnoses in 2021-22 on the national dementia diagnosis rate in the most recent period for which data is available.

Gillian Keegan:

No formal assessment has yet been made. NHS England and NHS Improvement continue to monitor the monthly diagnosis rate and are analysing trends at regional and sustainability and transformation partnership level to aid targeted recovery efforts. We will set out plans for dementia in England for the next 10 years later this year, including the specific health and care needs of people living with dementia and their carers and dementia diagnoses.

Tim Farron: [9867]

To ask the Secretary of State for Health and Social Care, pursuant to the Answer of 19 May 2022 to Question 1489 on Dementia: Diagnosis, whether he has had discussions with NHS England on whether the additional funding allocated to support general practitioners to pilot diagnostic approaches is likely to increase the number of dementia diagnoses in 2022-23.

Gillian Keegan:

We have had no specific discussions. However, NHS England and NHS Improvement are funding a project to fund two trusts in each region to pilot the Diagnosing Advanced Dementia Mandate tool to improve diagnosis of dementia in care homes. NHS England and NHS Improvement are holding a webinar in June 2022 on using this resource.

■ Dementia: Drugs

Kirsten Oswald:[\[8029\]](#)

To ask the Secretary of State for Health and Social Care, whether he has had discussions with the devolved Administrations on the proposal by Alzheimer's Research UK for the establishment of a Dementia Medicines Taskforce.

Kirsten Oswald:[\[8030\]](#)

To ask the Secretary of State for Health and Social Care, whether he plans to take steps in response to Alzheimer's Research UK's proposal for the establishment of a Dementia Medicines Taskforce.

Claire Hanna:[\[8218\]](#)

To ask the Secretary of State for Health and Social Care, with reference to projected increases in diagnoses of dementia, if his Department will make an assessment of the potential merits of establishing a dementia medicines taskforce to develop new treatments for the condition.

Gillian Keegan:

There have been no specific discussions with the devolved administrations. Officials have met Alzheimer's Research UK to discuss this proposal and considered routes for accelerating access to such medicines for patients with NHS England and NHS Improvement.

The Accelerated Access Collaborative and the Department's Commercial Medicines Directorate continually review the development of new medicines, including those for dementia. This provides early indication of such innovative treatments, engaging with the National Institute for Health and Care Excellence (NICE) and industry to identify challenges in delivering medicines to patients. The Innovative Licencing and Access Pathway accelerates patient access to medicines. The Innovative Medicines Fund supports early access to the most clinically promising treatments where further data is needed to support NICE's recommendations for use in the NHS. These initiatives will apply to dementia drugs.

We will set out plans for dementia in England for the next 10 years later this year, including on diagnosis, risk reduction and prevention and research. The strategy will include ambitions for research to develop new disease-modifying treatments.

■ Dementia: Health Services

Elliot Colburn: [\[9183\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure that NHS England prioritises dementia within the refreshed NHS Long Term Plan and new National Dementia Strategy; and if he will make a statement.

Gillian Keegan:

The updated NHS Long Term Plan is expected to be published later this year and discussions on its content are continuing. We will set out plans for dementia in England for the next 10 years later this year, including on diagnosis, risk reduction and prevention and research. The strategy will include ambitions for research to develop new disease-modifying treatments.

■ Dementia: Northern Ireland

Paul Girvan: [\[9974\]](#)

To ask the Secretary of State for Health and Social Care, what recent discussions he has had with the Department of Health in Northern Ireland about improving dementia diagnosis rates in that country.

Gillian Keegan:

We have had no specific discussions as health and social care for people with dementia in Northern Ireland is a devolved matter.

■ Dentistry: Qualifications

Luke Pollard: [\[9149\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to (a) increase the number of places available on the Overseas Registration Exam for dentistry and (b) address the backlog of candidates waiting to take that exam.

Luke Pollard: [\[9151\]](#)

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to ensure the continued mutual recognition of professional dental qualifications from the European Economic Area.

Luke Pollard: [\[9152\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made of the potential merits for the number of dentists practising in the UK of returning to the pre 2001 system of recognising the dental qualifications from leading Commonwealth dental schools.

Edward Argar:

On 22 February 2022, the General Dental Council (GDC) announced the full resumption of the Overseas Registration Exam (ORE) following its suspension in

April 2020 due to the COVID-19 pandemic. The GDC has published its 2022 sittings schedule for both components of the exam.

The capacity of the ORE is constrained by rules within the GDC's legislative framework. The Department has consulted on proposals to amend this legislation to allow the GDC greater flexibility on alternative routes to registration for international applicants. The consultation closed on 6 May 2022 and the responses are currently being analysed. Subject to the outcome of the consultation and Parliamentary approval, we aim to introduce the legislative changes in autumn 2022. As an independent regulator, the GDC will determine how this increased flexibility could be applied, including the appropriate way to assess overseas qualifications.

Automatic recognition arrangements are in place for relevant dental qualifications obtained in the European Economic Area and Switzerland for a period of 24 months from the end of the transition period or 48 months for Swiss qualifications. The Secretary of State for Health and Social Care is required to undertake a statutory review of these arrangements after the 24-month period. This review will be conducted at the start of 2023. However, automatic recognition of qualifications will continue until further legislation is introduced to amend or end these arrangements.

■ Department of Health and Social Care: Protective Clothing

Angela Rayner: [\[8012\]](#)

To ask the Secretary of State for Health and Social Care, how many (a) Government officials and (b) officials in his Department are employed to oversee the storage of personal protective equipment.

Edward Argar:

[Holding answer 6 June 2022]: The Department has 3.5 full time equivalent staff overseeing the storage of personal protective equipment.

■ Department of Health and Social Care: Public Opinion

Angela Rayner: [\[8011\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the Answer of 28 April 2022 to Question 156486 on Department of Health and Social Care: Public Opinion, which contractors were responsible for delivering the focus groups and polling services for his Department.

Edward Argar:

[Holding answer 6 June 2022]: The Department's Communications Directorate contracted with BMG Research Limited and Kantar UK Limited. The Office for Health Improvement and Disparities used Solutions Strategy Research Facilitation Ltd; Define; Flamingo Research Limited; Wavemaker Limited; YouGov PLC; and Kantar UK Limited.

■ Diabetes: Podiatry

Sarah Champion: [9881]

To ask the Secretary of State for Health and Social Care, what plans he has in place to recommence data collection through the National Diabetes Foot Care Audit in 2022.

Sarah Champion: [9883]

To ask the Secretary of State for Health and Social Care, what assessment he has made of the prevalence of diabetic foot complications during and following the covid-19 pandemic.

Maria Caulfield:

During the first wave of the COVID-19 pandemic there were significant reductions in rate of lower-limb major and minor amputations compared with the same period in the previous three years. As of January 2022, these rates have not yet increased.

The biennial National Diabetes Foot Care Audit has continued throughout the pandemic. The latest report was published on 11 May 2022 for the period July 2014 to March 2021 and is available at the following link:

<https://digital.nhs.uk/data-and-information/publications/statistical/national-diabetes-footcare-audit/2014-2021>

■ Doctors: Training

Daisy Cooper: [10021]

To ask the Secretary of State for Health and Social Care, if he will make it his policy to require the NHS to provide student doctors with pre-paid expenses cards to cover petrol costs incurred in driving to medical placements in the context on increases in the cost of living.

Edward Argar:

We have no plans to do so.

Helen Morgan: [8247]

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to ensure that there are sufficient training posts available for newly qualified doctors.

Edward Argar:

All medical undergraduate students can access a foundation programme training post and those due to begin foundation training in 2022/23 have been allocated places.

After foundation training, a medical doctor can apply to enter specialty training. In 2021, the fill rate for training posts was 99.2% across all specialties, following a 35% increase in applications. For those who have applied to begin training in 2022, Health Education England is investing in more than 750 additional training posts across all specialty programmes.

■ Endoscopy

Peter Dowd:

[\[9030\]](#)

To ask the Secretary of State for Health and Social Care, whether his Department has made an assessment of the potential merits of using single-use endoscopes on (a) hospital-acquired infections, (b) patient safety and (c) the prevalence of antibiotic resistant organisms in care environments.

Edward Argar:

[Holding answer 6 June 2022]: The purchase and use of single-use equipment is determined by individual National Health Service trusts which consider the relevant facilities, workforce, finances and patient population when selecting the most appropriate medical equipment.

NHS England and NHS Improvement are currently reviewing single-use endoscopes, taking into consideration hospital acquired infections, patient safety and the prevalence of antibiotic resistant organisms in care environments. This will review all factors, including economic and environmental sustainability. There are no current plans to deploy single-use endoscopes in any setting.

■ Evusheld

Alex Cunningham:

[\[1507\]](#)

To ask the Secretary of State for Health and Social Care, what plans his Department has to make Evusheld available to immunocompromised people.

Maggie Throup:

[Holding answer 18 May 2022]: Evusheld has been granted conditional marketing approval by the Medicines and Healthcare products Regulatory Agency (MHRA) on 17 March 2022. However, the MHRA highlighted uncertainty over the appropriate dose needed for protection against the Omicron variant. Understanding the efficacy of Evusheld is necessary prior to any procurement or deployment.

The UK Health Security Agency is currently undertaking further testing on the treatment's effectiveness against the Omicron variant. This will inform any decisions on the potential procurement of this treatment.

■ Eyesight: Medical Treatments

Marsha De Cordova:

[\[11857\]](#)

To ask the Secretary of State for Health and Social Care, how many people are currently on waiting lists for eye treatments in England.

Edward Argar:

The latest available data shows that as of March 2022, there were 632,817 people on the National Health Service waiting list for ophthalmology treatments in England.

■ General Practitioners: Pensions**Claire Hanna:** [\[6948\]](#)

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of the impact of the (a) increased rate of inflation and (b) consequential tax implications for GP pensions.

Claire Hanna: [\[6949\]](#)

To ask the Secretary of State for Health and Social Care, if he will hold discussions with the Chancellor of the Exchequer on (a) issues relating to GP pensions and (b) how annual allowances are calculated in relation to those pensions.

Edward Argar:

National Health Service pensions are automatically increased in value at the end of each scheme year. The generosity of the NHS Pension Scheme and well-remunerated careers mean that some senior doctors exceed the allowances for tax-free pension saving. A higher rate of revaluation will increase the size of pensions and may therefore increase annual allowance pension tax liability in a situation where inflation is increasing. However, when inflation reduces in the subsequent tax year, this may increase the scope for more pension growth before exceeding the annual allowance in that year. The vast majority of NHS staff build their pension tax-free. We have regular discussions with HM Treasury on a range of issues related to the delivery of NHS services.

■ Health Professions: Migrant Workers**Philip Davies:** [\[5375\]](#)

To ask the Secretary of State for Health and Social Care, what recent estimate he has made of the number of medical professionals from overseas practicing in the UK who have not taken the Professional and Linguistic Assessments Board test.

Philip Davies: [\[5377\]](#)

To ask the Secretary of State for Health and Social Care, how many complaints have been made against medical professionals from overseas who (a) have and (b) have not sat the Professional and Linguistic Assessments Board in each of the last three years, by country of origin of the medical professional.

Edward Argar:

No specific estimate has been made and information on the number of complaints is not collected centrally. The General Medical Council (GMC) is the independent regulator of all medical doctors practising in the United Kingdom which sets and enforces the standards all doctors must adhere to. The GMC is responsible for operational matters, including investigating complaints it receives about medical professionals and the administration of Professional and Linguistic Assessments Board tests. The GMC has advised that the information is not currently held in the format requested. The GMC is analysing and validating this data for future publication.

■ HIV Infection: South West

Luke Pollard:

[\[9143\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to help increase the take up of HIV testing in the South West.

Maggie Throup:

The HIV Action Plan is prioritising improved access to HIV testing in England, including in the South West. Local authorities are mandated to commission sexual health and reproductive health services through the Public Health Grant. It is the responsibility of local authorities to commission services to meet the needs of the local population, including the provision of HIV prevention and testing services.

We have established the national HIV and syphilis self-sampling framework to assist local authority commissioners to provide online testing. We have also allocated funding to HIV Prevention England to deliver health promotion activities, including the annual National HIV Testing week.

■ Medicine: Training

Tulip Siddiq:

[\[9073\]](#)

To ask the Secretary of State for Health and Social Care, whether he has plans to introduce additional support measures for medical students; and whether he has made an assessment of the potential merits of (a) granting access to full maintenance loans for medical students for the duration of their degree programme, (b) granting access to the NHS Learning Support Fund to replace the medical student NHS bursary and (c) making the Travel and Dual Accommodation Expenses reflective of the rise in the cost of living.

Edward Argar:

We have no current plans to do so. In years one to four of an undergraduate course, domestic students can access student loans from Student Finance England. From year five of an undergraduate course and from year two of a graduate-entry course, the non-repayable NHS Bursary is available, comprising payment for tuition fees, a non-means-tested grant and a further means-tested award. Students eligible for the NHS Bursary can also apply for a reduced rate non-means tested maintenance loan for living costs from Student Finance England. The Travel and Dual Accommodation Expenses rates of payments are reviewed annually, prior to the start of the academic year.

■ Members: Correspondence

Robert Largin:

[\[522\]](#)

To ask the Secretary of State for Health and Social Care, when he plans to respond to the enquiry of 15 February 2022 from the hon. Member for High Peak, reference RL34822.

Edward Argar:

We replied to the hon. Member on 31 May 2022.

John Penrose:[\[6736\]](#)

To ask the Secretary of State for Health and Social Care, when he plans to respond to the letters of 22 March and 19 April 2022 from the hon. Member for Weston-super-Mare on behalf of his constituent, Clarissa Payne, regarding the review into single-sex wards.

Edward Argar:

We replied to the hon. Member on 31 May 2022.

David Linden:[\[9117\]](#)

To ask the Secretary of State for Health and Social Care, when he plans to respond to the correspondence of (a) 24 February, (b) 7 April and (c) 28 April 2022 from the hon. Member for Glasgow East, reference DL11390.

Edward Argar:

We replied to the hon. Member on 27 May 2022.

Robert Largan:[\[9203\]](#)

To ask the Secretary of State for Health and Social Care, when he will respond to the correspondence of 5 April 2022 from the hon. Member for High Peak, reference RL37141.

Edward Argar:

We replied to the hon. Member on 4 May 2022.

Robert Largan:[\[9204\]](#)

To ask the Secretary of State for Health and Social Care, when he will respond to the correspondence of 5 April 2022 from the hon. Member for High Peak, reference RL37142.

Edward Argar:

We replied to the hon. Member on 26 May 2022.

Robert Largan:[\[9205\]](#)

To ask the Secretary of State for Health and Social Care, when he will respond to the correspondence of 5 April 2022 from the hon. Member for High Peak, reference RL37148.

Edward Argar:

We replied to the hon. Member on 30 May 2022.

■ Mental Health Services

Damien Moore: [\[10002\]](#)

To ask the Secretary of State for Health and Social Care, if his Department will (a) collect and (b) publish data on access by people (i) facing digital exclusion and (b) with dementia to Improving Access to Psychological Therapies services.

Gillian Keegan:

We have no current plans to do so. However, NHS England and NHS Improvement have committed to publishing and disseminating resources on inclusive digital transformation for local services and regional teams and understand the needs of specific cohorts at increased risk of digital exclusion.

The Improving Access to Psychological Therapies (IAPT) dataset collects and publishes data on access by people with dementia. However, as the volume of this data is low, it is suppressed to protect patient confidentiality. NHS England and NHS Improvement aim to increase the level of data collected for IAPT Long Term Conditions services, including dementia.

■ Mental Health Services: Older People

Damien Moore: [\[10004\]](#)

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of trends in the level of referrals of people aged over 65 to the Improving Access to Psychological Therapies programme since 2019.

Gillian Keegan:

The following table shows the number of referrals of people aged over 65 years old to Improving Access to Psychological Therapies (IAPT) services. The data shows a decline in referrals from 2020/21 due to the impact of the pandemic as many people aged over 65 years old were more likely to be isolating. While complete data for 2021/22 is not yet available, the number of referrals is now increasing.

YEAR	NUMBER OF REFERRALS
2018/19	104,347
2019/20	105,438
2020/21	74,565
2021/22 to Quarter 3	72,717

Source: Psychological Therapies, Annual Reports on the use of IAPT services, NHS Digital

■ Mental Health Services: Vacancies

Mr Barry Sheerman:[\[5354\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to address the shortage of psychologists in the NHS.

Gillian Keegan:

Health Education England has expanded the clinical psychology training intake by 85% in the last three years. This is expected to deliver an additional 2,520 psychologists in the National Health Service workforce by 2025.

The Mental Health Recovery Action Plan also includes a £111 million investment in the training and education of the NHS mental health workforce. This aims to provide an additional 27,000 mental health professionals in England by 2023/24. Of these, 30% are expected to be psychology professionals.

■ Monkeypox

Rachael Maskell:[\[8060\]](#)

To ask the Secretary of State for Health and Social Care, whether his Department has devised a scale of likely infection for an outbreak of monkeypox in the UK.

Maggie Throup:

Monkeypox does not spread easily between individuals and the risk to the United Kingdom population remains low. The UK Health Security Agency will detect further cases through active case finding in the National Health Service and heightened vigilance among healthcare professionals. As a precaution, we are monitoring all close contacts of the cases to provide advice and monitor their health.

■ Monkeypox: Disease Control

Rachael Maskell:[\[8061\]](#)

To ask the Secretary of State for Health and Social Care, in the context of the growing number of cases of monkey pox in the UK, whether he plans to make a statement on (a) the nature of that disease, (b) how it is spread and (c) how to protect the public from transmission.

Maggie Throup:

The Secretary of State for Health and Social Care updated Parliament through a Written Ministerial Statement ([HCWS49](#)) on 23 May 2022.

In the United Kingdom, the monkeypox virus is extremely rare and its detection in unlinked cases indicates community transmission. The UK Health Security Agency (UKHSA) will detect further cases via its expert diagnostic capabilities and is working with the National Health Service to ensure heightened vigilance among healthcare professionals. Monkeypox has low transmissibility and is only spread from person to person through direct contact, contact with clothing or linens used by an infected

person, or potentially by close respiratory contact via coughing or sneezing by an infected individual. The risk of monkeypox to the public in the UK is very low.

■ NHS Trusts: Surgery

Wes Streeting: [\[2574\]](#)

To ask the Secretary of State for Health and Social Care, if he will provide a breakdown of (a) the number of surgical day cases and (b) the number of surgical inpatient cases in each NHS trust in England in each month in (a) 2019, (b) 2020 and (c) 2021.

Edward Argar:

A table showing the number of finished consultant episodes where a procedure was recorded as a surgical day case and ordinary admissions in each National Health Service trust in each month from 2019 to 2020 is attached. Data for 2021 is currently being validated.

Attachments:

1. table [table.xlsx]

■ Pneumonia: Diagnosis and Health Services

Daisy Cooper: [\[9166\]](#)

To ask the Secretary of State for Health and Social Care, when the NICE Guideline Pneumonia in adults: diagnosis and management (CG191) will be reinstated, following its withdrawal in 2020 from active circulation.

Daisy Cooper: [\[9167\]](#)

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of the impact of the withdrawal of the NICE Guideline Pneumonia in adults: diagnosis and management (CG191) on clinical practice.

Edward Argar:

The National Institute for Health and Care Excellence (NICE) plans to commence the update of the guideline in summer 2022. NICE advises that for managing COVID-19 pneumonia and identifying and treating bacterial pneumonia secondary to COVID-19, healthcare professionals should follow recommendations in 'COVID-19 rapid guideline: managing COVID-19'. For guidance on managing bacterial pneumonia not secondary to COVID-19, healthcare professionals should follow NICE's guidelines on 'Pneumonia (community-acquired): antimicrobial prescribing' and 'Pneumonia (hospital-acquired): antimicrobial prescribing'. No specific assessment has been made of the impact of the withdrawal of 'Pneumonia in adults: diagnosis and management'.

■ Primary Health Care: Diagnosis

Daisy Cooper: [\[9165\]](#)

To ask the Secretary of State for Health and Social Care, with reference to the 2016 Review on Antimicrobial Resistance, which recommended that all antibiotic prescribing

should be informed by rapid diagnostics, what steps he is taking to help ensure that primary care settings are equipped with point-of-care multiplex testing technology.

Maggie Throup:

NHS England and NHS Improvement have established a workstream following the United Kingdom's antimicrobial resistance nation action plan. The workstream is examining how the adoption of innovations in diagnostics can be accelerated and the application of point-of-care testing to ensure optimal prescribing of antimicrobials in clinical settings.

■ Respiratory System: Infectious Diseases

Daisy Cooper:

[\[9170\]](#)

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to increase the use of point-of-care testing in care homes in order to support the assessment of respiratory illnesses with overlapping symptoms such as (a) covid-19, (b) influenza and (c) Respiratory Syncytial Virus (RSV) to reduce rates of transmission.

Gillian Keegan:

There are no current plans to use point-of-care testing in care homes to support the assessment of multiple respiratory illnesses. Asymptomatic, symptomatic and outbreak testing for COVID-19 continues to be provided for staff and residents in care homes and on admission to prevent transmission. We will continue to review testing arrangements in adult social care in line with the latest clinical advice.

■ Ronapreve

Tulip Siddiq:

[\[9075\]](#)

To ask the Secretary of State for Health and Social Care, whether the Government has (a) made an assessment of which groups of immunosuppressed patients should be eligible for treatment with the drug, Ronapreve, as a result of their lack of response to the covid-19 vaccine and (b) plans to undertake antibody testing on those individuals to assess their response to that drug.

Maggie Throup:

While the Medicines and Healthcare products Regulatory Agency has approved Ronapreve for prophylaxis, the treatment has since been found to be ineffective against the Omicron variant and therefore has been withdrawn from general use. There are currently no plans to implement targeted antibody testing for immunocompromised patients. National Health Service clinicians can arrange antibody testing for patients based on their assessment of clinical need.

■ Social Services

Tulip Siddiq:

[\[9072\]](#)

To ask the Secretary of State for Health and Social Care, whether he has plans to (a) introduce a zero social care cap for people under 40, (b) raise the minimum income guarantee in the social care means test or (c) abolish social care charges.

Gillian Keegan:

There are no plans to introduce a zero social care cap for people aged under 40 years old or to abolish social care charges. The level of the minimum income guarantee is reviewed on an annual basis and it was increased on 6 April 2022 in line with inflation. The revised rates are set out in The Care and Support (Charging and Assessment of Resources) (Amendment) Regulations 2022.

From October 2023, the Government is introducing a cap on care costs and more generous means testing limits to allow more people to receive financial support with the cost of their care. The £86,000 cap on personal care costs is universal, regardless of an individual's age, region or wealth. This will ensure that no-one will face unpredictable or unlimited care costs.

■ Sotrovimab

Mr Tanmanjeet Singh Dhesi: [\[9988\]](#)

To ask the Secretary of State for Health and Social Care, whether people who are classified as severely obese are eligible for Sotrovimab on the NHS.

Maggie Throup:

Severely obese patients are currently ineligible for treatment with Sotrovimab or other anti-viral medications, unless they meet the existing eligibility criteria.

HOME OFFICE

■ Asylum: Employment

Rachael Maskell: [\[9056\]](#)

To ask the Secretary of State for the Home Department, what recent assessment she has made of the potential merits of allowing people who are waiting for their asylum applications to be decided to work in the local economy.

Kevin Foster:

We allow asylum seekers to work if their claim has been outstanding for 12 months or more, through no fault of their own. Those permitted to work are restricted to jobs on the Shortage Occupation List (SOL).

A review of the policy has concluded and there will be no changes made at this time.

■ Body Searches: Children

Marsha De Cordova: [\[8161\]](#)

To ask the Secretary of State for the Home Department, how many children were stripped searched without an appropriate adult being present in (a) 2019-20, (b) 2020-21 and (c) 2021-22.

Rachel Maclean:

The information requested is not held.

The Home Office collects and publishes data on stop and search on an annual basis as part of the 'Police Powers and Procedures' statistical publication. The most recent data are available here:

<https://www.gov.uk/government/statistics/police-powers-and-procedures-other-powers-england-and-wales-year-ending-31-march-2021>

The Home Office have recently introduced a data collection on strip searches to the Annual Data Requirement. Police forces will be providing this data for 2021/22 on a voluntary basis, and it is due for publication towards the end of 2022. The data collection will include details on the age, sex and ethnicity of persons strip searched by the police in England and Wales; however, information on whether an appropriate adult was present during a strip search will not be collected.

■ Members: Correspondence

David Linden: [9115]

To ask the Secretary of State for the Home Department, when she plans to respond to the correspondence of (a) 4 April and (b) 3 May 2022 from the hon. Member for Glasgow East, reference DL11506.

David Linden: [9116]

To ask the Secretary of State for the Home Department, when she plans to respond to the correspondence of (a) 11 April and (b) 9 May 2022 from the hon. Member for Glasgow East, reference DL11591.

Kevin Foster:

PQ 9115 – MPAM reference: MPAM/0299013/22 – The Home Office responded to the correspondence on 26 May 2022

PQ 9116 – MPAM reference: MPAM/0283361/22 – The Home Office responded to the correspondence on 26 May 2022

■ Passports: Applications

Mike Amesbury: [9137]

To ask the Secretary of State for the Home Department, how many passport applications submitted to the Passport Office in the last six months have been fully processed within (a) four weeks, (b) six weeks, (c) eight weeks and (d) ten weeks.

Kevin Foster:

Ahead of unrestricted international travel returning, HM Passport Office prepared extensively to serve an unprecedented number of customers, with 9.5 million British passport applications forecasted throughout 2022.

These preparations, which include the recruitment of 650 additional staff since April 2021 and with plans in place to recruit a further 550 by this summer, have ensured

that passport applications can be processed in higher numbers than ever before. This was demonstrated in March and April 2022 when HM Passport Office achieved record outputs by completing the processing of two million applications.

Since April 2021, HM Passport Office has been advising people to allow up to 10 weeks when applying for their passport from the UK. However, Her Majesty's Passport Office will always endeavour to process applications as quickly as possible, and in the simplest of cases that require fewer manual interventions these may be processed much more quickly.

■ Refugees: Afghanistan

Rachael Maskell: [\[9050\]](#)

To ask the Secretary of State for the Home Department, whether her Department plans (a) to move Afghan refugees between bridging hotels and (b) resettle those refugees in communities in the UK.

Rachael Maskell: [\[9051\]](#)

To ask the Secretary of State for the Home Department, what steps she is taking to provide Afghans residing in bridging hotels with mental health support; and when she expects for all Afghans held in those hotels to be resettled.

Kevin Foster:

Due to the scale and pace of the evacuation in Afghanistan we have had to use hotels as a temporary accommodation measure.

We do not want to keep people in temporary accommodation for any longer than is absolutely necessary. We have moved – or are in the process of moving - over 6,000 people into permanent homes since June 2021. There is a huge effort underway to support the families into permanent homes as soon as we can so they can settle and rebuild their lives, and to ensure those still temporarily accommodated in hotels are given the best start to their life in the UK. Whilst families are in bridging hotels, we want to give them the best start to their life in the UK, whilst recognising from time to time we do need to move people between bridging hotels.

Schools and colleges have access to a range of government support programmes to help children and young people with their mental health and we are also rolling out Mental Health Support Teams that work with groups of schools and colleges, identifying specialist needs of pupils in their areas.

All refugees in bridging accommodation have now registered with a GP or are being helped to do so. A full range of vaccinations is being offered, alongside mental health support and other services, and the NHS has provided an additional £3m of funding to CCGs to support the specific needs of the evacuees.

We have been working to support Afghan families into homes of their own, so they can settle into their local communities, feel safe and independent and rebuild their lives in the UK. We are also looking at ways to make more suitable homes available in the private rented sector, and to provide alternatives to hotels for families who may

have to remain in bridging accommodation for long periods: for example, by making available Service Family Accommodation (SFA) units on the MoD estate where appropriate.

JUSTICE

■ Magistrates: Recruitment

Alex Cunningham:

[\[7976\]](#)

To ask the Secretary of State for Justice, how many completed magistrate applications were received in the three months up to 31 March 2022 in each region.

James Cartlidge:

We are currently unable to provide data on completed magistrates applications as this data is not yet publicly available, in accordance with the Code of Practice for Statistics.

Over £1 million has been invested in the recruitment of new and diverse magistrates, the Government's top priority for the magistracy. In January a revised, streamlined recruitment process was introduced to ensure applying to magistracy is more inclusive and accessible but remains robust and challenging. This is supported by an inclusive marketing campaign targeting a wider, more diverse audience. As of 3 April 2022, 33,580 individuals had expressed an interest in joining the magistracy as a result of the national recruitment campaign.

■ Office of the Public Guardian

Wera Hobhouse:

[\[9951\]](#)

To ask the Secretary of State for Justice, what steps his Department is taking to reduce delays in the Office of the Public Guardian.

Tom Pursglove:

A backlog of applications to register lasting powers of attorney (LPAs) built up during the pandemic. As restrictions eased, there was a subsequent significant increase in the numbers of applications being received.

The Office of the Public Guardian (OPG) is working hard to tackle the backlog. Frontline operational staff have worked in the office throughout the pandemic and continue to do so, with the OPG's Birmingham office operating at maximum capacity. Staff are working day and evening shifts to maximise the use of office space. Managers are also encouraging staff to work overtime through the week and at weekends to increase the volume of LPAs registered.

Staff are being recruited on a rolling basis and the use of agency staff is being extended.

We want to make it easier for the public to apply for LPAs, which is why we have announced plans to digitise the service, making it simpler and quicker to use.

TRANSPORT

■ Railways: Suicide

Mr Tanmanjeet Singh Dhesi:[\[9980\]](#)

To ask the Secretary of State for Transport, what recent steps his Department has taken to prevent suicide on the rail network.

Wendy Morton:

The Department actively works with the rail industry and wider stakeholders to prevent suicide, safeguard the vulnerable and deliver a safer transport network. More widely, the industry works in partnership with British Transport Police to drive a well-established programme to target trespass and disruption.

TREASURY

■ Business Rates: Reform

Steve McCabe:[\[900400\]](#)

To ask the Chancellor of the Exchequer, what discussions he has had with Cabinet colleagues on progress made on reforms to the business rates system.

Lucy Frazer:

With the conclusion of the business rates review, the Government has delivered meaningful reform and cuts worth £7 billion to business over the next five years.

The review has implemented significant new measures to reduce the burden of business rates on firms, including a freeze in the multiplier and further relief for high street businesses during 2022-23, new support for green technology from 2022, and improvement relief from 2023. The Government is committing to more frequent revaluations, which represents significant reform of the system and will ensure that liabilities are more responsive to changing market conditions. This addresses a key ask of stakeholders for more frequent revaluations, reducing the burden of business rates to make the system fairer.

■ Government Securities: Ukraine

Hywel Williams:[\[8966\]](#)

To ask the Chancellor of the Exchequer, what steps he is taking to protect Ukraine from Russian litigation in English courts on the payment of bonds.

John Glen:

The UK judiciary is independent of the UK government and will make this ruling based on the arguments made before it.

In response to Russia's invasion of Ukraine we have announced an unprecedented package of sanctions to cut off the funding for Putin's war machine.

Our sanctions are working, including those directed at the Central Bank of Russia and Russia's foreign currency reserves, of which around 60% are frozen globally.

■ Philips Trust Corporation: Insolvency

Holly Lynch: [\[9936\]](#)

To ask the Chancellor of the Exchequer, what assessment he has made of the potential merits of providing support for those who held policies with the Philips Trust Corporation Limited, following the company going into administration on 22 April 2022.

John Glen:

The administrators of Philips Trust Corporation are working to secure the best results for customers and creditors.

As the Philips Trust Corporation was not a regulated firm, any losses are unlikely to be covered by the Financial Services Compensation Scheme, except in limited circumstances.

WALES

■ Buildings: Repairs and Maintenance

Daisy Cooper: [\[9172\]](#)

To ask the Secretary of State for Wales, with reference to the written statement of 12 May 2022 by the Welsh Minister for Climate Change entitled Update on building safety, if he will take steps to work with the Department for Levelling Up, Housing and Communities to deliver a system of protection from fire safety remediation costs for Welsh leaseholders, in line with those planned for leaseholders in England.

Simon Hart:

The UK Government are actively engaging with the Welsh Government and other Devolved Administrations on building safety matters. While it is for each Administration to take their own approach to building safety as a devolved matter, there is positive potential for sharing approaches to proportionality, data, engagement with industry, and other areas of mutual interest.

Pledges with developers are explicitly stated to be without prejudice to any discussions or arrangements the developers might have with Devolved Administrations. The UK Government is happy to support Devolved Governments in any approaches they may wish to take to secure similar commitments from developers that are appropriate to arrangements in each nation.

Whilst acknowledging that building safety is devolved, there are benefits to sharing learning from the development of the Building Safety Levy and how it applies in England. Systems, regulatory frameworks and the scale of the issue will vary across the UK meaning that no one solution will fit all. The UK Government is happy to support the Devolved Administrations to explore which solution is available to them and best suited to their needs.

There has been an active programme of engagement between UK Government and Devolved Administration officials on building safety since November 2020. Fortnightly meetings have had a standing agenda focused on the Building Safety Bill and activities undertaken by the Devolved Administrations. These have been supplemented by meetings on topics of specific interest, such as technical discussions on the Building Safety Fund. To further support the Devolved Administrations in considering how industry should pay in their nations, and other building safety matters, the UK Government has set up an official level task and finish group.

WORK AND PENSIONS

■ Winter Fuel Payment: Disability

Rachael Maskell:

[\[11747\]](#)

To ask the Secretary of State for Work and Pensions, if she will make it her policy to extend the Winter Fuel Allowance to disabled people.

Guy Opperman:

Winter fuel payments are an age-related payment made to those who have reached state pension age. There are no plans to change the eligibility criteria at this time.

The Government has provided a generous package for those most in need, with one-off Cost of Living Payments.

Winter fuel payments will be increased this winter to £500 for a household with someone of state pension age and under 80 and £600 for a household with someone aged 80 or over. Disabled customers who are of state pension age will receive a Winter Fuel Payment.

Around six million people across the UK who receive disability benefits will receive a one-off Cost of Living payment of £150 by the end of September. For the many disability benefit recipients who receive means tested benefits, this £150 will come on top of the Cost-of-Living payment of £650 this year, made in two instalments - the first from July, the second in the autumn.

WRITTEN STATEMENTS

CABINET OFFICE

■ Data Sharing under the Digital Economy Act 2017

Parliamentary Secretary (Mrs Heather Wheeler):

[\[HCWS78\]](#)

The Cabinet Office's Central Digital and Data Office (CDDO) has today published the Government's response to the public consultation on data sharing to support early learning and childcare in Scotland.

In January 2022, the UK Government in partnership with the Scottish Government consulted on draft regulations to enable data sharing to target funded early learning and childcare (ELC) for certain 2 year olds in Scotland. The consultation set out draft regulations to allow data sharing between HMRC, DWP, the Scottish Government and Scottish local authorities in order to help identify and contact households that have a 2 year old eligible for funded early learning and childcare. The regulations would create an objective for the purpose of which relevant data may be shared under section 35 of the Digital Economy Act 2017 (otherwise known as the "public service delivery power").

There were 69 responses during the 8 week consultation period. Responses were decidedly positive. A clear majority of respondents agreed that the proposed data share would improve and target a service to eligible households and improve their wellbeing. Respondents also agreed that the data sharing would deliver tangible benefits to households, including early stage support to promote education, health and social equalities.

Importantly, the majority of respondents agreed that the personal data items to be shared - specifically including the customer (parent or carer) name, address and National Insurance number (for unique identification), as well as a child(ren) indicator to confirm the existence of a child, or children - is limited to what is necessary and consistent with ELC service delivery.

The UK Government is reassured that the responses are broadly positive and welcome the helpful input from respondents. As the Scottish Parliament can only approve proposals for new objectives which solely involve specified Scottish bodies permitted to make use of the public service delivery power, and the proposed objective would involve disclosure and processing of data held by UK departments (HMRC and DWP), the draft regulations must be taken through the UK Parliament by the UK Government. The UK Government will take forward legislation as soon as parliamentary time allows.

I have asked that the government response be deposited in the libraries of both Houses in Parliament and published on GOV.UK.

■ Publication of Sir Robert Francis QC's infected blood compensation study

Minister for the Cabinet Office and HM Paymaster General (Michael Ellis):

[[HCWS79](#)]

Today the Government is publishing the study by Sir Robert Francis QC, which was commissioned by my predecessor as Paymaster General, the Rt Hon Penny Mordaunt MP.

The study makes recommendations for a framework for compensation and redress for the victims of infected blood, which can be ready to implement upon the conclusion of the Infected Blood Inquiry, should the Inquiry's findings and recommendations require it.

Sir Robert's study is comprehensive and detailed, and reflects the contributions of many individuals directly affected by infected blood, their recognised legal representatives, and campaign groups representing the infected and affected communities, many of whom participated in a series of meetings held by the study from July 2021 to February 2022. Sir Robert makes clear the importance of these contributions by introducing his study with a collection of moving, heartbreaking and sometimes shocking quotations from some of those who spoke to him. It is right that their views and experiences should be at the heart of his work, and I would like once again to thank all those who contributed to the study and shared their experiences with Sir Robert. I do not underestimate how difficult this must have been for many, and I am grateful for their courage.

Sir Robert will give evidence about his work to the Infected Blood Inquiry on 11th and 12th July. Before then, it is important that the Inquiry, and recognised legal representatives of its infected and affected core participants, have an opportunity to consider his work; it is most important that the government is able to reflect upon Sir Robert's evidence to the Inquiry in considering his study.

There is a great deal of complexity to the issues that the study covers and a wide range of factors to be taken into account in considering Sir Robert's recommendations. This analysis cannot be completed hurriedly but officials across government are focussing on this so that the government can be ready to respond quickly to the Inquiry's recommendations, as was intended when the study was commissioned. I will update the House as this work progresses.

I would like, once again, to thank Sir Robert and his team for their work and the timely delivery of the study.

I have asked that a copy of the Study be deposited in the libraries of both Houses in Parliament.

TRANSPORT

■ Transport Update

Minister of State for Transport (Andrew Stephenson):

[[HCWS77](#)]

The "Golborne Link," part of the HS2 Crewe – Manchester scheme, is a proposed c.13 mile connection which would branch off the main HS2 line towards Manchester near Knutsford, in Cheshire, to rejoin the West Coast Main Line (WCML) near Golborne, just

south of Wigan. Construction was due to start in the early 2030s and it was due to open in the late 2030s or early 2040s as part of the second stage of HS2 services to Scotland.

In October 2020, the government established the independent Union Connectivity Review, led by the chairman of Network Rail, Sir Peter Hendy, to consider how best to improve transport connectivity between the nations of the UK.

Sir Peter's final report, in November 2021, set out that the Golborne Link would not resolve all the rail capacity constraints on the WCML between Crewe and Preston. He recommended that the Government should reduce journey times and increase rail capacity between England and Scotland by upgrading the WCML north of Crewe and by doing more work on options for alternative northerly connections between HS2 and the WCML.

Ahead of the Government's response to the Union Connectivity Review, we can confirm the Government will look again at alternatives which deliver similar benefits to Scotland as the Golborne link, so long as these deliver for the taxpayer within the £96bn envelope allocated for the Integrated Rail Plan. We will look at the potential for these alternatives to bring benefits to passengers sooner, allowing improved Scotland services from Manchester and Manchester Airport, as well as from Birmingham and London. HS2 trains will continue to serve Wigan and Preston, as well as Lancaster, Cumbria and Scotland.

Government therefore intends to remove the Golborne link from the High-Speed Rail (Crewe-Manchester) Bill after Second Reading. That means that we will no longer be seeking the powers to construct the link as part of this scheme. The Crewe-Manchester HS2 mainline will remain in the Bill as before. Plans for Northern Powerhouse Rail will also be unaffected.

Our plans for the first-stage HS2 services to Scotland in Phases 1 and 2a of the scheme (between London and the West Midlands, and the West Midlands and Crewe) will also be unaffected, with HS2 trains operating from London to Scotland when services begin running, in the late 2020s or early 2030s.

We will publish a Supplement to the January 2022 HS2 Crewe – Manchester scheme Strategic Outline Business Case, setting out the implications of removing the Golborne Link, prior to Second Reading.

I am also publishing revised safeguarding Directions for the Crewe – Manchester Scheme to reflect the Bill's limits and protect the land that may be required for the construction and operation of the high speed railway.

I am maintaining safeguarding along the Golborne Link while alternatives are considered. This means we plan to keep existing compensation programmes in place for affected homeowners so that they can still access support as needed. The Government periodically reviews land requirements needed for the project and updates the extent of safeguarding accordingly.

A copy of the Safeguarding Directions will be placed in the Libraries of both Houses and made publicly accessible online.