Session 2019-21
No. 205

Friday
19 March 2021

PARLIAMENTARY DEBATES
(HANSARD)

HOUSE OF LORDS

WRITTEN ANSWERS

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Baroness Berridge	Parliamentary Under-Secretary of State, Department for Education and Department for International Trade
Lord Bethell	Parliamentary Under-Secretary of State, Department of Health and Social Care
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Baroness Goldie	Minister of State, Ministry of Defence
Lord Goldsmith of Richmond Park	Minister of State, Department for Environment, Food and Rural Affairs and Foreign, Commonwealth and Development Office
Lord Greenhalgh	Minister of State, Home Office and Ministry of Housing, Communities and Local Government
Lord Grimstone of Boscobel	Minister of State, Department of Business, Energy and Industrial Strategy and Department for International Trade
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Baroness Williams of Trafford	Minister of State, Home Office
Lord Wolfson of Tredegar	Parliamentary Under-Secretary of State, Ministry of Justice
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Written Answers

Friday, 19 March 2021

Business: VAT

Asked by ***Lord Taylor of Warwick***

To ask Her Majesty's Government what assessment they have made of the business readiness survey by Ready for Brexit, published on 9 March; and what plans they have to provide detailed guidance to businesses on VAT reporting requirements. [HL14115]

Lord Agnew of Oulton: The Government has provided extensive guidance to businesses on VAT, excise, and customs processes to support them in their readiness for the UK leaving the EU. This guidance includes videos, webinars and step-by-step guides. HMRC listen carefully to feedback and have introduced additional products on Rules of Origin, and the Government has also announced a £20 million SME Brexit Support Fund.

HMRC continue to work closely with a wide range of business representative organisations and trade associations to help businesses engage with new requirements, including through the latest public information campaign, cross-Government industry steering groups and events.

Coronavirus: Vaccination

Asked by ***Baroness Deech***

To ask Her Majesty's Government what plans they have to collect evidence of the effectiveness of the second dose of the Pfizer/BioNTech COVID-19 vaccination being administered more than 21 days after the first. [HL11727]

Lord Bethell: Based on the data available to the Joint Committee on Vaccination and Immunisation the first dose of either Pfizer/BioNTech or Oxford/AstraZeneca vaccine provides substantial protection within two to three weeks of in particular for severe COVID-19 disease. The second vaccine dose is likely to be more important for duration and sustaining such protection. An appropriate dose interval may further increase vaccine efficacy. In the short term, the additional increase of vaccine efficacy from the second dose is likely to be modest as the great majority of the initial protection from clinical disease is after the first dose of vaccine.

Public Health England (PHE) is monitoring the effectiveness of the vaccines in the real world, including the effects of dosage schedules. Early data from PHE's SIREN study shows a promising impact of vaccination on infection in healthcare workers aged under 65 years old.

Data shows one dose reduces the risk of catching infection by more than 70%, rising to 85% after the second dose of the Pfizer vaccine.

Asked by ***Lord Jones of Cheltenham***

To ask Her Majesty's Government what plans they have to vaccinate patients who are in hospital for reasons other than for treatment for COVID-19. [HL11743]

Lord Bethell: Hospital hubs will typically vaccinate eligible inpatients or eligible outpatients due to attend hospital where clinically appropriate.

Asked by ***Lord Bourne of Aberystwyth***

To ask Her Majesty's Government what plans they have to make it easier to use volunteers to support the COVID-19 vaccination programme. [HL11864]

Lord Bethell: We are working with the Royal Voluntary Service and St John Ambulance to recruit and train thousands more volunteer vaccinators, who will have all the relevant clinical training, as well as supervision, to ensure they can vaccinate in a way that is safe for patients and for themselves. This includes drawing on the skills of those who have volunteered through the NHS Bring Back Scheme, considering the use of a wider range of medical professionals as well as those currently working outside of the National Health Service.

Ongoing recruitment for both the clinical and non-clinical volunteering roles is via the NHS Volunteer Responder GoodSAM app. Requests for volunteer support for the COVID-19 vaccination programme are being directed through the lead provider in each area.

Asked by ***Baroness Grey-Thompson***

To ask Her Majesty's Government what provision they have made to ensure that vaccination venues are accessible for disabled people; and how that information is made available when booking tests. [HL12959]

Lord Bethell: Vaccination centres are subject to the same standards to support people with accessibility needs as all health care services. In addition, marshals and staff will help people attending vaccination centres to navigate safely.

When sent an invitation for vaccination by letter, the public are directed to the location's individual details on accessibility. The letter also provides guidance and advice which can be enlarged on a screen, provided in accessible formats as well as provided in hard copy.

Asked by ***Baroness Masham of Ilton***

To ask Her Majesty's Government what plans they have to include people paralysed with spinal cord injuries and who have not received a vaccine in the second phase priority vaccination groups. [HL13473]

Lord Bethell: Prioritisation for phase two has not yet been decided. However the Joint Committee on Vaccination and Immunisation's (JCVI) interim advice recommends an age-based approach, which the Government has accepted in principle.

The JCVI has advised that phase two will include all adults under 50 years old who were not included in phase one, starting with the oldest adults first. The JCVI's interim advice has not indicated that, as a group, persons paralysed with spinal cord injuries are at higher risk from COVID-19 and therefore they have not been prioritised for the COVID-19 vaccine programme. Final advice on phase two will be published by the JCVI in due course.

Asked by ***Lord Mendelsohn***

To ask Her Majesty's Government what plans they have to monitor the effectiveness of vaccines at preventing transmission of COVID-19, and when they expect to be able to assess whether vaccines are preventing transmission. [HL13923]

Lord Bethell: Public Health England (PHE) is monitoring the impact of COVID-19 vaccines on a broad range of outcomes, including symptomatic disease, infection, and hospitalisations. PHE has reported early vaccine effectiveness estimates in the elderly and in healthcare workers. These estimates show sustained protection against symptomatic disease, infection, hospitalisations, and mortality beyond 21 days after a single dose of the vaccine.

Preliminary evidence suggests that the COVID-19 vaccines protect against infection, both symptomatic and asymptomatic, at least in the short term, which is likely to lead to reduced transmission. Definitive evidence on transmission requires studies in household contacts of cases and such studies are not expected to be available until late April 2021.

Asked by ***Lord Mendelsohn***

To ask Her Majesty's Government when they expect to be able to assess whether the delay between doses of the Pfizer/BioNTech COVID-19 vaccine will have an effect on immunosuppressed people. [HL13924]

Lord Bethell: The number of individuals with immunosuppression is small relative to the wider population therefore accruing enough data to estimate vaccine effectiveness in specific subgroups will take time. Vaccine effectiveness assessments are reported regularly by Public Health England to the Joint Committee on Vaccination and Immunisation (JCVI) to inform vaccine policy recommendations. This will include assessment of vaccine effectiveness in immunocompromised individuals using general practice electronic health record data.

Once sufficient evidence becomes available the JCVI will consider options for a protection strategy for immunosuppressed individuals, including whether any specific vaccine or schedule is preferred in this population.

Asked by ***Lord Hylton***

To ask Her Majesty's Government what plans they have to prioritise prison staff for receipt of a COVID-19 vaccination. [HL14043]

Lord Bethell: For phase two of the COVID-19 vaccination programme, the Joint Committee on Vaccination and Immunisation's (JCVI) interim advice sets out that the most effective way to minimise hospitalisations and deaths is to continue to prioritise people by age, as it is assessed to be the strongest factor linked to mortality, morbidity and hospitalisation.

Prison staff will not therefore be prioritised in phase two of the COVID-19 vaccine programme. However, in order to minimise vaccine wastage in delivery of the programme, the JCVI has advised that where vaccines remain unused following an offer of vaccination to those in detained settings, such vaccine it could reasonably be offered to prison officers.

Covid-19 Corporate Financing Facility

Asked by ***Baroness Randerson***

To ask Her Majesty's Government what plans they have to increase the funding available through the COVID-19 Corporate Financing Facility; what plans they have to extend the term for such loans beyond 12 months; and how they intend to make such loans more accessible to the aviation industry. [HL14055]

Lord Agnew of Oulton: The Covid Corporate Financing Facility (CCFF) was set up in March 2020 to provide short-term liquidity for fundamentally strong firms. It was introduced during a period of exceptional volatility in financial markets to support corporate markets and ease the supply of credit to all firms.

As corporate credit conditions are increasingly supportive, the CCFF will close to new issuance from 23 March. Firms that have already accessed the scheme and meet the requirements are able to extend their loans for up to twelve months, providing funding until March 2022.

The CCFF has helped large corporates across a range of sectors, including the aviation industry. In total, the CCFF has provided over £34bn of support to some of the UK's largest firms, directly supporting businesses responsible for almost 2.5 million jobs in the UK.

The Government recognises the challenging circumstances facing the aviation industry as a result of Covid-19 and HM Treasury continues to support the Department for Transport's work leading the Global Travel Taskforce to facilitate a resumption of international travel. Firms can draw upon the unprecedented package of measures announced by the Chancellor, including flexibilities with tax bills and the extended furlough scheme. The aerospace sector and its aviation customers are also being supported with almost £11 billion made available through loan guarantees, support for exporters, and grants for research and development. This includes £8bn of UK Export Finance Guarantees.

Electric Vehicles: Charging Points

Asked by ***Lord Birt***

To ask Her Majesty's Government what plans they have to introduce regulations which standardise the connectors at charging points for electric vehicles. [HL14030]

Baroness Vere of Norbiton: This Government is working hard to ensure that motorists can access and pay for public charging easily. We launched a consultation last month on measures to improve the consumer experience of using public charging infrastructure. This includes proposals to make finding and paying for charging easier, and to set a minimum standard for the reliability of chargepoints.

We are seeing a natural progression towards the adoption of the Combined Charging System (CCS) standard; we do not believe there is the need for government intervention at this point.

Employment: Coronavirus

Asked by ***Lord Taylor of Warwick***

To ask Her Majesty's Government what assessment they have made of the report by the Resolution Foundation, Long Covid in the labour market, published on 17 February; and the estimate in that report that three out of ten self–employed workers are ineligible for COVID-19 financial support. [HL14070]

Lord Agnew of Oulton: The Government has taken action at Budget to improve the Self-Employment Income Support Scheme (SEISS), addressing a number of the recommendations put forward in the Resolution Foundation report. For example, the Government announced that, as the deadline for 2019-20 tax returns has now passed, HMRC will use these tax returns for the fourth and fifth grants, provided they were submitted by 2 March 2021. This means more than 600,000 people may now be able to claim the fourth and fifth grants, bringing the total number of people who could be eligible to 3.7 million.

The Government has also acted to improve the targeting of the scheme, as recommended by the report. The fifth and final SEISS grant, providing support in the summer, will include a turnover test (similar to those in operation in other countries' schemes) to ensure that the most generous support is targeted at those who most need it.

The Government does recognise that some of the rules, criteria and conditions that were vital to ensuring that the SEISS works for the vast majority mean that some people may not qualify. This is why a wider package has been put in place to help provide support to those who need it.

Those ineligible for the SEISS may still be eligible for other elements of the support available. The temporary £20 per week increase to the Universal Credit standard allowance has been extended for six months, and the Government has decided to extend the suspension of the Minimum Income Floor for three months, to the end of July 2021, so that where self-employed claimants' earnings have fallen significantly, their Universal Credit award will have increased to reflect their lower earnings. In addition to this, they may also have access to other elements of the package, including Restart Grants, the Recovery Loan scheme, business rates relief, and other business support schemes.

Neonicotinoids

Asked by ***Baroness Bennett of Manor Castle***

To ask Her Majesty's Government what assessment they have made of the report by Dr Susan Willis Chan and Dr Nigel Raine Population decline in a ground-nesting solitary squash bee (Eucera pruinosa) following exposure to a neonicotinoid insecticide treated crop (Cucurbita pepo), published in February 2021; and what plans they have (1) to take account of its recommendations before making any further application for exceptional approval to use neonicotinoid seed treatments, and (2) to review current approval methods to ensure that they take account of the impact of pesticide application on solitary and ground-nesting bees. [HL13892]

Lord Goldsmith of Richmond Park: The emergency authorisation recently granted for a neonicotinoid seed treatment for sugar beet was for the thiamethoxam-based product Cruiser SB. Because the cold winter conditions have reduced the likely pest pressures in 2021, the product will not be used.

The Chan and Raine study did not find significant effects on the solitary bees from use of a thiamethoxam seed treatment although it did find effects from a product containing a different neonicotinoid called imidacloprid. It would be wrong to draw firm conclusions from the study, particularly as the bee species used (the hoary squash bee) is not a UK native.

The Government recognises the need to protect pollinators, including solitary bees, from the effects of pesticides. As we build our national pesticides regime, we will ensure that potential risks to bees are carefully assessed.

NHS: Negligence

Asked by ***Lord Storey***

To ask Her Majesty's Government, further to the Written Answer by Lord Bethell on 6 August 2020 (HL7091), in how many of the 2,712 litigated clinical claims in 2019/20 for which damages were paid was (1) liability, or (2) causation, at issue. [HL14012]

Lord Bethell: The information NHS Resolution holds on individual clinical negligence claims does not identify or distinguish between liability and causation. Reasons for litigation are varied and include some cases where only liability is in issue, cases where only quantum, or the level of damages, is in issue and a cohort of cases where both are in issue.

In some cases, litigation is needed to reach resolution but neither liability or quantum are in dispute. Most notably, court approval is required for settlements where the injured individual lacks capacity or is a minor. Litigation may also be needed to reach a determination on a point of law or to pursue a contribution towards compensation from another party.

Asked by ***Lord Turnberg***

To ask Her Majesty's Government what assessment they have made of the changing costs of medical litigation; and what steps they are taking to address such costs. [HL14117]

Lord Bethell: In 2017 the National Audit confirmed that developments in the legal market are amongst the biggest factors influencing costs, rather than any detectable decline in patient safety.

The Department is working with the Ministry of Justice, other Government departments and NHS Resolution, to address this issue. The Government will publish a consultation on the next steps in 2021.

NHS: Procurement

Asked by ***Lord Hunt of Kings Heath***

To ask Her Majesty's Government what guidance they provide to NHS commissioners on the principles of value-based procurement (VBP); whether such commissioners have to abide by those principles when making decisions on the provision of healthcare products and services to patients; if not, what plans they have to ensure that they do; and when they estimate that NHS Supply Chain will publish the results of its pilot programmes on VBP. [HL14089]

Lord Bethell: The Public Contract Regulations (PCR) 2015 form part of the procurement landscape alongside the NHS (Procurement, Patient Choice and Competition) (No.2) Regulations 2013 (PPCCR). Made under Section 75 of the Health and Social Care Act 2012, the PPCCR apply to NHS England and NHS Improvement and clinical commissioning groups and are enforced by NHS England and NHS Improvement. Commissioners should ensure that they comply with both regimes when procuring healthcare services.

Regulation 68 of the PCR allows contracting authorities to determine the most economically advantageous tender and the lowest cost by using a life-cycle costing approach which includes all costs over the life cycle of works, supplies or services. Life-cycle costing is the key principle behind value based procurement. NHS Supply Chain has undertaken eight pilot studies with National Health Service trusts to assess how value based procurement can drive sustainable increased savings and improve patient outcomes in the NHS. The findings will be published later in the year and will then then be presented to and discussed with the NHS.

Oral Tobacco

Asked by ***Viscount Ridley***

To ask Her Majesty's Government which scientific research they used to inform their decision on whether to maintain the ban on snus. [HL14059]

Lord Bethell: Oral tobacco products such as snus were banned in the United Kingdom under The Tobacco for Oral Use (Safety) Regulations 1992, which implemented European Union Directive 92/41. This ban has been confirmed in subsequent regulations, most recently by the EU Tobacco Products Directive 14/40, which has been transposed into UK law in the Tobacco and Related Products Regulation 2016 (TRPR). The European Commission set out the evidence underpinning the ban in the Tobacco Products Directive's impact assessment and in previous Directives. A copy of the impact assessment is attached.

The Department is currently undertaking a post-implementation review of the TRPR and this includes a public consultation that closes on the 19 March 2021. The Department will review the evidence submitted to consider if the regulations have met their objectives or if any future regulatory changes should be considered.

Special Educational Needs

Asked by ***Lord Watson of Invergowrie***

To ask Her Majesty's Government when they expect to publish the outcome of their review of the support available to young people with special educational needs and disabilities, announced in September 2019. [HL13944]

Baroness Berridge: Our ambition is to publish SEND (special educational needs and disabilities) Review proposals for public consultation in the spring of 2021.

Tobacco: Health Hazards

Asked by ***Viscount Ridley***

To ask Her Majesty's Government what plans they have to request that the Committee on Toxicity undertakes a toxicological evaluation of (1) snus, (2) non-tobacco oral nicotine pouches, and (3) smokeless tobacco products used primarily by South Asian communities in the UK. [HL14058]

Lord Bethell: The Department is considering whether the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT) should undertake an evaluation of non-tobacco oral nicotine pouches in its work programme in the next financial year. Oral tobacco products are banned under Tobacco and Related Product Regulations 2016 and consequently there are no current plans to ask COT to evaluate such products. COT will not consider smokeless tobacco products because their dangers and harms are well documented in the existing evidence base.

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