

PARLIAMENTARY DEBATES

HOUSE OF COMMONS
OFFICIAL REPORT

Sixth Delegated Legislation Committee

**DRAFT LOCAL AUTHORITIES (PUBLIC HEALTH
FUNCTIONS AND ENTRY TO PREMISES BY
LOCAL HEALTHWATCH REPRESENTATIVES)
(AMENDMENT) REGULATIONS 2017**

Monday 27 March 2017

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Friday 31 March 2017

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The Committee consisted of the following Members:

Chair: SIR ALAN MEALE

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| † Berry, James (<i>Kingston and Surbiton</i>) (Con) | † Hodgson, Mrs Sharon (<i>Washington and Sunderland West</i>) (Lab) |
| † Blackwood, Nicola (<i>Parliamentary Under-Secretary of State for Health</i>) | † Mackintosh, David (<i>Northampton South</i>) (Con) |
| Brabin, Tracy (<i>Batley and Spen</i>) (Lab) | Smith, Angela (<i>Penistone and Stocksbridge</i>) (Lab) |
| † Chalk, Alex (<i>Cheltenham</i>) (Con) | † Soubry, Anna (<i>Broxtowe</i>) (Con) |
| † Cummins, Judith (<i>Bradford South</i>) (Lab) | † Stewart, Bob (<i>Beckenham</i>) (Con) |
| † Field, Mark (<i>Cities of London and Westminster</i>) (Con) | † Stuart, Graham (<i>Beverley and Holderness</i>) (Con) |
| † Fovargue, Yvonne (<i>Makerfield</i>) (Lab) | † Woodcock, John (<i>Barrow and Furness</i>) (Lab/Co-op) |
| † Grant, Mrs Helen (<i>Maidstone and The Weald</i>) (Con) | Gavin O'Leary, <i>Committee Clerk</i> |
| † Hall, Luke (<i>Thornbury and Yate</i>) (Con) | † attended the Committee |

Sixth Delegated Legislation Committee

Monday 27 March 2017

[SIR ALAN MEALE *in the Chair*]

Draft Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) (Amendment) Regulations 2017

6 pm

The Parliamentary Under-Secretary of State for Health (Nicola Blackwood): I beg to move,

That the Committee has considered the draft Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) (Amendment) Regulations 2017.

It is a pleasure to serve under your chairmanship, Sir Alan. I am delighted to be here to speak about these important regulations, which will continue to ensure the provision of five mandatory health and development assessments and reviews as set out in the healthy child programme.

The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) (Amendment) Regulations 2015 transferred responsibility for commissioning public health services for children aged nought to five from NHS England to local authorities, allowing local public health services to be shaped to meet local needs. That includes responsibility for delivering the healthy child programme.

The healthy child programme is the main universal health service for improving the health and wellbeing of children, providing families with health and development assessments and reviews, health promotion, screening and immunisation. It is supplemented by advice on health, wellbeing and parenting. The five reviews are offered by health visitors to pregnant women, new mothers and children from birth to age five and include the antenatal visit, new-born review, six to eight-week check, one-year review and two to two-and-a-half-year review. They are required to be provided by all local authorities in England.

Health visitors play a crucial role in ensuring that children have the best possible start in life and lead the delivery of the elements of the healthy child programme that relate to children aged nought to five. Health visitors provide valuable advice and support to families and are trained to identify health and wellbeing concerns. Through the health visitor programme, we have supported the profession more than ever before to transform the service.

In April 2015, when the health visitor programme was transferred, there was an increase of just under 50% in the number of full-time equivalent health visitors in the workplace since May 2010. Health Education England is ensuring sustainable development of the health visitor workforce, and more than 800 health visitor student training places are being commissioned.

Along with service transformation, that means that more families now have access to the support they need in those precious early years.

We are also committed to supporting school-age children and young people by promoting their health and wellbeing through school nursing services. There are about 1,100 school nurses in England, supported by other professionals such as community staff nurses, healthcare support workers and nursery nurses. In January 2016, Public Health England published commissioning guidance for school nursing, which makes clear that school nurses should be accessible and responsive to children's needs.

The 2015 regulations, which place a duty on local authorities to provide the five universal health visitor reviews, contain a sunset clause and will therefore lapse on 31 March 2017. The legal obligation on local authorities to provide health visitor services is also set to lapse on 31 March 2017. The draft regulations will prevent that from happening.

The current regulations also include a provision for a review to be undertaken of their operation. The Department of Health commissioned Public Health England to carry out a review of the operation of the five mandated universal health visitor reviews following the transfer of responsibility to local authorities, as set out in the 2015 regulations. A review was carried out in summer 2016, and Public Health England's report was published on 1 March 2017. The review found widespread support from local authorities and commissioners for the universal health visitor programme remaining in place in order to secure the delivery of long-term benefits from the healthy child programme, including improved health and wellbeing outcomes for children and their families.

There was also a strong view held by professional representatives of local government and the nursing profession that the services are essential for prevention and early intervention and a general agreement that they deliver a positive return on investment and contribute to other Government priorities such as reducing childhood obesity, reducing smoking in pregnancy and improving maternal mental health. I would like to thank Public Health England for its important work on the review and for helping to inform the regulations.

Local authorities will continue to be funded to deliver the mandated health visitor reviews. Local authorities will receive more than £16 billion between 2015-16 and 2020-21 to spend on public health, which includes children's services and health visitors. That is in addition to what the NHS will continue to spend on vaccinations, screening and other preventive interventions.

I announced earlier this month that we have decided to retain the ring fence on the public health grant for a further year, until 2019, as we move towards implementing 100% local business rate retention. That is a step on the way to a more locally owned system and will help to smooth the transition by providing some certainty for the next two financial years. It is right that local authorities have appropriate flexibility to deliver against their local priorities, but it is also appropriate that some key requirements are set nationally, such as the five universal health visitor reviews.

By continuing these mandated elements of the healthy child programme, we intend to maintain consistency across all local authorities when ensuring the delivery of

these services. The draft regulations will remove the sunset clause from the current regulations, ensuring that local authorities continue to provide these important visits to families. Removing the sunset clause will ensure that the duty on local authorities to provide these services does not lapse on 1 April. I am confident that that sends a clear signal to health visitors, family nurses, local authorities and the public of the Government's ongoing commitment to universal public health support for pregnant women, children and their families.

The Government are committed to improving our children and young people's health outcomes so that they become among the best in the world. What happens in pregnancy and the early years impacts on the life throughout its course. Therefore, a healthy start for all children is vital for individuals, families, communities and, ultimately, the nation. I commend the regulations to the House.

6.6 pm

Mrs Sharon Hodgson (Washington and Sunderland West) (Lab): It is a pleasure to serve under your chairmanship, Sir Alan. The Opposition are pleased that the Government have finally brought these regulations before us, especially with the end-date for the mandation of health visitor reviews being so close—it will be in five days' time, to be exact. I welcome a lot of what the Minister said.

The regulations are welcome as they continue the mandation of health visitor reviews, which are an important part of an early intervention strategy. We will therefore not seek to divide the Committee. However, I have concerns about health visiting and what the regulations will do that I wish to raise with the Minister and on which I seek reassurance.

This year marks 155 years since the start of health visiting, which has had a range of different guises over the years, in 1862. It is important that we protect this long and proud career and give it the support it deserves. It is therefore concerning to see in the provision relating

to regulation 5B of the principal regulations a potential watering down of who can do universal health visitor reviews, allowing other qualified health professionals to conduct reviews instead of health visitors. That is concerning when there is anecdotal evidence that health visitors are being told to delegate to other professionals, but are doing so only because they are so overstretched and busy with their huge workloads. That does not mean other health professionals cannot be complementary to the reviews, but the core reviews must be done by health visitors, because they are the specialists and it is their job to do it after being trained to undertake that role.

A health visitor's role should not be diminished. I hope the Minister agrees and will assure me that she will closely monitor that issue, as I certainly will, to ensure that health visiting is not a diminished profession and that we do not see a reduction in the quality of health visitor reviews. I look forward to her response.

6.9 pm

Nicola Blackwood: I am grateful for the shadow Minister's support for the regulations. As she said, they will be essential to ensure the future health of the upcoming generation. I listened to the points she made. She can see in the health visitor numbers, which stand at 4,200, and in the 800 training places that we are committed not only to health visitors and a strong health visitor training force but to the quality of assessment within that force. I hope that she is reassured on that point.

Health visitors support families to give children the best possible start in life. That is exactly why we have taken this strong action to continue to ensure the provision of the five mandatory health and development assessments and reviews so that this service will continue to be provided to all families. I hope that the shadow Minister is reassured.

Question put and agreed to.

6.10 pm

Committee rose.

