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PARLIAMENTARY DEBATES  
(HANSARD)

# HOUSE OF LORDS

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<b>Abbreviation</b>	<b>Party/Group</b>
CB	Cross Bench
Con	Conservative
DUP	Democratic Unionist Party
GP	Green Party
Ind Lab	Independent Labour
Ind SD	Independent Social Democrat
Ind UU	Independent Ulster Unionist
Lab	Labour
Lab Co-op	Labour and Co-operative Party
LD	Liberal Democrat
Non-afl	Non-affiliated
PC	Plaid Cymru
UUP	Ulster Unionist Party

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# House of Lords

Thursday 8 September 2022

11 am

Prayers—read by the Lord Bishop of Oxford.

## Oaths and Affirmations

11.07 am

Lord Wrottesley took the oath, following the by-election under Standing Order 9, and signed an undertaking to abide by the Code of Conduct.

## Horizon Europe Question

11.08 am

Asked by *Viscount Stansgate*

To ask Her Majesty's Government what assessment they have made about the United Kingdom's participation in the Horizon Europe research programme.

**The Parliamentary Under-Secretary of State, Department for Business, Energy and Industrial Strategy (Lord Callanan) (Con):** My Lords, the Government remain ready to associate to Horizon Europe. We have entered into formal consultations with the EU, aiming to finalise the UK's association. If the UK is unable to associate soon, we will be ready to introduce a comprehensive alternative programme that delivers many of the benefits of Horizon through international collaboration, end-to-end innovation, and a strong and attractive offer to encourage talented people to build their careers here in the UK.

**Viscount Stansgate (Lab):** My Lords, I thank the Minister for his Answer, but I have asked this several times and there has been no progress whatever. We have not even had a Minister of Science during the crucial period of this summer. Does the Minister not realise that the uncertainty about this issue is running the very real risk of a brain drain? Surely the Minister wants to keep the best and the brightest in this country. Do the Government really want to sacrifice British science on the altar of the Northern Ireland protocol? Moreover, will the Minister accept that the Royal Society, major learned societies, Cancer Research UK and even this House's own Science and Technology Committee make the point that a plan B is not the answer?

It is not the money but the irreparable damage to the collaboration between scientists around Europe and wider afield that is at risk. If the Government feel that there is a strong case for their position, perhaps the new Leader of the House could arrange a debate in government time to discuss this extremely important issue. We cannot call ourselves a science superpower unless we find a way to join Horizon Europe. What are the new Government going to do about this?

**Lord Callanan (Con):** The noble Viscount is attacking the wrong target. We remain ready to associate to Horizon Europe at the earliest possible opportunity, in line with our agreement with the EU on the TCA. It is the EU that is preventing this agreement, which is why we have launched the dispute procedure. The noble Viscount is linking two entirely separate issues: the Northern Ireland protocol is a separate issue in a separate agreement. This is the EU's fault; it is trying to hold science hostage under the banner of another issue. We remain ready to associate, so, however many times the noble Viscount asks me the question, he will get the same answer.

**Lord Clement-Jones (LD):** My Lords, the creation of ARIA was an admission of the bureaucratic nature of the current UKRI research funding system. The Government must adopt plan B, which would be regrettable, and introduce a new research funding stream for international research co-operation. Will they commit to streamlining UKRI procedures to make them as flexible and generous regarding direct costs and innovation, and as start-up friendly, as current European funding? Surely it cannot be the Government's intention to increase red tape if we are unable to remain in Horizon Europe.

**Lord Callanan (Con):** I very much agree with the noble Lord; it is very much not our intention to increase red tape. We are not ready to give up on Horizon yet, but it is obviously regrettable that the EU does not want to finalise our association and abide by the agreements that it entered into. We have launched the dispute procedure mechanism as a last try to persuade it of the benefits of this co-operation. We have excellent co-operation in other areas, such as energy, where we are helping the EU out in its hour of need. So we hope that it will see sense and abide by the agreement that it entered into, but, as the noble Lord said, we have a plan B if that proves not to be the case.

**The Earl of Clancarty (CB):** My Lords, the press release of 16 August announcing formal consultations with the EU uses much stronger words than the Minister has. It says:

“UK membership of Horizon Europe would be a win-win for both the UK and EU.”

Will this Government continue to support the words of the then Foreign Secretary, Liz Truss? Will they hold their nerve to achieve that goal, whatever temporary blockage there may be?

**Lord Callanan (Con):** I stand completely by those words: it would be a win-win, and we want to do it. It would be to the benefit of the EU and the UK scientific community, and it is regrettable that the EU is refusing to finalise the agreement that it entered into.

**Lord Hamilton of Epsom (Con):** My Lords, will my noble friend tell us why we cannot be associate members of the Horizon project, like Israel and Tunisia? Israel is not a member of the EU, and Tunisia is not even a member of the Eurovision Song Contest.

**Lord Callanan (Con):** My noble friend makes a good point, as he often does. I am not sure that the Eurovision Song Contest is a sufficient precursor to Horizon Europe, but, to be serious, his point is very valid: other non-EU countries are associate members. We want to join; that was the agreement that we entered into, and I hope that the EU will see sense and abide by the agreement that it signed.

**Lord Anderson of Swansea (Lab):** My Lords, surely the Government's default programme is a second best. The Minister has said that it will deliver "many of the benefits" of the current programme. Where are the gaps, and what will not be delivered?

**Lord Callanan (Con):** I am not sure that it is second best; it is an alternative. We have many scientific co-operation programmes with many other parts of the world; the EU is not the be-all and end-all of scientific co-operation. However, we think that there is a lot of value in Horizon Europe, which is why we agreed that we should join up. Of course, we are prepared to pay all the associated costs. That was the agreement that we entered into and we want to try to join, but we have a plan B if that proves impossible.

**Lord Patel (CB):** My Lords, for a change, I start by congratulating the Government for appointing one of the best candidates as CEO of ARIA—well done. One key issue of the Horizon Europe programme—apart from us becoming a full member, which should be our aim—is the collaborations we develop with other scientists worldwide. If we do not become part of Horizon Europe, there is no strategy in the plan B to increase collaboration internationally for our scientists.

**Lord Callanan (Con):** I thank the noble Lord for his kind words about the CEO of ARIA and completely associate myself with them. He makes an important point: we have many collaborations with other scientists across the world. We think that this is very valuable and we want to build on it, but there are many scientific institutions in the EU with which we would also like to co-operate through association to Horizon. Of course, we will look at alternatives and will certainly work with alternatives in other parts of the world.

**Baroness Garden of Frognal (LD):** My Lords, subjects such as maths are crucial in ensuring that the UK achieves the Government's ambition of becoming a science and technology superpower. The Minister has outlined a UK programme but that will not have the power of Horizon in collaborating internationally. How can we ensure that the UK remains attractive as a place for STEM experts to move to and work in, if our reputation and scientific capability suffer due to a lack of association with Horizon?

**Lord Callanan (Con):** The main attraction of the UK in terms of collaboration with other parts of the world is our world-leading scientific community—which is why it happens now. We have a number of the best universities and researchers in the world. We are very proud that there are many people of other nationalities who want to come to the UK to continue their research

programmes, and we have a considerable investment programme to enable that to happen. We want all that to continue and we will build on that, but we also want to work with our European colleagues, which is why we want to associate to Horizon Europe.

**Lord Cormack (Con):** My Lords, we have a new Prime Minister and her words, when she was Foreign Secretary, have been quoted and my noble friend the Minister has endorsed them. We want to have a new beginning; we wish the new Prime Minister every possible success, for all our sakes. Would it not be a good idea if she were to write to the President of the European Commission reiterating what she said as Foreign Secretary and expressing the hope that we can build new relations with our former partners in the EU?

**Lord Callanan (Con):** I am sure that the Prime Minister will be having many conversations with EU leaders and the European Commission. I am not sure that another letter would make a tremendous difference to the EU's position on this; in my view, it is being incredibly unreasonable. We will continue to work with the EU. We have co-operation in a number of areas, so it is a win-win situation in which both sides benefit, and we want it to continue.

**Baroness Blake of Leeds (Lab):** My Lords, innovation thrives on collaboration, as we have heard. Delaying resolving the relationship shows that the UK is not stepping up to face the challenges of the future. We must accept our responsibility in this relationship. We have heard that organisations such as the UK Dementia Research Institute are on course to become world leaders in the field, but they need the collaboration of the brightest and the best of Europe. What assessment has the Minister made of the impact that the uncertainty around the UK's association with Horizon Europe is having on the UK's research field?

**Lord Callanan (Con):** There are some negative impacts: the current uncertainty is damaging for scientific co-operation. There are many researchers who want to get on with the job, and we have put in place transitional arrangements to help them in the meantime. We want all that co-operation to continue. The noble Baroness cites some good examples, and this is exactly why we want to associate to Horizon Europe. We call on the EU to do that and to finalise the agreements that it freely entered into and signed. I am sure that the House is united in wanting that to continue.

## Royal Navy: F35B *Question*

11.19 am

*Asked by Lord West of Spithead*

To ask Her Majesty's Government when the Royal Navy will be able to deploy a carrier with the full complement of 36 United Kingdom-owned F35B in its air wing.

**The Minister of State, Ministry of Defence (Baroness Goldie) (Con):** My Lords, the noble Lord's figure of 36 F35B as the optimum deployment for a carrier is not a measurement recognised within the MoD. Each Queen Elizabeth-class carrier has been designed for the flexible usage necessary in a modern defence capability, including transporting a mix of fixed-wing and rotary aircraft, but the composition and size of an embarked air group in a deploying carrier will be tailored to meet the operational requirement.

**Lord West of Spithead (Lab):** My Lords, I thank the noble Baroness for her Answer. I was very heavily involved in getting the aircraft carriers, and one of the bases for their size and scale was that they needed to carry 36 fast jets and be able to do operations over a three-day period. That is why they ended up at that size. You need to do that if you are going to be a hot-war situation, when they will do serious damage to the Queen's enemies and can look after themselves. There is a war going on in Europe, and there could be a world war. We do not have enough aircraft to fill the carriers should we need to. In the defence review that is to be carried out, which was referred to by the Secretary of State for Defence two days ago, can the Minister ensure that it will look very closely at making sure we have enough aircraft and, even more fundamentally, enough pilots? The UK Military Flying Training System is a disaster at the moment and we have too few fast-jet pilots.

**Baroness Goldie (Con):** I pay tribute to the noble Lord for his role at the time of conceiving the two carriers, but that concept is now fairly mature and life has moved on. As I have indicated, the MoD has taken a view that we need flexibility. We need the capacity to be sure that, depending on operational requirement, we have these F35s, both land based and, if necessary, ship based, which is a sensible proposition to advance. I remind the noble Lord that the UK's carrier strike group is a unique-value capability. The UK is the only ally to contribute a formed maritime task group complete with carrier-strike capability to NATO via the NATO readiness initiative.

**Lord Robathan (Con):** My Lords, given that this hot war has been going on for six months in Ukraine, can my noble friend reassure the House that we have sufficient land forces, as well as naval and air forces, to sustain an operation such as this for six months? Most people say that we do not.

**Baroness Goldie (Con):** I hesitate to contradict my noble friend; I know he poses his question in very good faith. I would say to him that the role that the British military has been playing in relation to Ukraine is essentially one of support and advice, and of course, most recently and importantly, of training within this country—a very welcome facility for the armed forces of Ukraine. We also maintain our necessary capability to protect the security and defence of this country.

**Baroness Smith of Newnham (LD):** My Lords, for once the noble Lord, Lord West of Spithead, focused on helicopters and the air; I will focus on the sea.

In the light of the fact that HMS "Prince of Wales" had to come back to dock because of technical issues and that earlier in the year all the Type 45s were in dock because of various issues, does the Minister feel that our naval capability is adequate, and what focus will Her Majesty's Government, with the new Prime Minister, be putting on making sure that we are sufficiently resilient in the naval sphere?

**Baroness Goldie (Con):** On the HMS "Prince of Wales", that has of course been a regrettable development. I can confirm that the "Prince of Wales" is alongside in Portsmouth and will proceed to Rosyth dry dock in due course. In the meantime, HMS "Queen Elizabeth" has departed to carry out duties with the United States. On the broader question of the fleet, the noble Baroness will be aware that the fleet has been a very important supporter of the carrier project. Many of our ships were in attendance discharging duties. Most recently, there have been ships in the Mediterranean escorting Russian ships. I therefore reassure your Lordships that the fleet is in a good state. What is exciting is the planned development of the fleet, not just with Type 26 and Type 31 but now with Type 32 and Type 83 coming into scope.

**Lord Stirrup (CB):** My Lords, the noble Baroness's previous answer focused on the size of one carrier air group on one carrier. Even when Lightning numbers have been increased, the UK will still have only one air group for two carriers—an average of half an air group per carrier. The United States has an average of over one-and-a-half air groups per carrier, because it recognises that only this will enable it to maintain operational tempo. The Government have shown great ambition for deployments of the carrier and carrier air groups; will they recognise that if they are to sustain this ambition into the future, they need to provide the necessary resources to back it up?

**Baroness Goldie (Con):** There are various situations where the United States and the United Kingdom approach differently configurations of capability. The noble and gallant Lord will be aware of the planned increase of the F35B flight support in 2025, when it will go from 26 at the moment up to 48. The ultimate plan is to increase it to 74. That is exciting and should reassure noble Lords that there is very robust capability.

**Lord Foulkes of Cumnock (Lab Co-op):** My Lords, what is the cause of HMS "Prince of Wales" being taken out of operation, who is responsible and when will it be fully operational?

**Baroness Goldie (Con):** I am unable to give any specific answers. The "Prince of Wales" will need to make her way to Rosyth to go into dry dock. At this stage, it is not known what the cause is; we know that the problem is mechanical failure on the propeller, on the shaft and the coupling, but what is causing the problem will become clearer only once inspection can be carried out. I see the noble Lord is shaking his head; I have huge admiration for him, but I did not realise that naval architecture was part of his skillset.

**Lord Campbell of Pittenweem (LD):** My Lords, with other members of the NATO Parliamentary Assembly, I visited the Lockheed Martin factory in Dallas where the F35 is built. In the course of that visit, I was subject to a large number of questions as to precisely how many further aircraft the United Kingdom proposed to buy. Once upon a time, the figure was 138—I doubt that is still current. Will the Minister take the opportunity, as of today's date, to give a definitive answer on the number of this fifth-generation aircraft that the United Kingdom Government are prepared to buy?

**Baroness Goldie (Con):** As I indicated to the noble and gallant Lord, the current level of F35s is 26; by 2025, there will be a further 22, bringing the flight up to 48. The intention is to buy a further tranche of additional F35B aircraft, which has been announced and will bring the UK total fleet up to 74 aircraft.

**Lord Marlesford (Con):** My Lords, does my noble friend agree that, as the present economic crisis was triggered, and indeed largely caused, by Putin's invasion of Ukraine, additional military expenditure, especially in as far as it helps expedite the expulsion of Russian troops from the territory of Ukraine, is part of dealing with the economic crisis?

**Baroness Goldie (Con):** As my noble friend will be aware, the integrated review absolutely and sharply identified the principal threat as far as the UK is concerned as being Russia. That has now manifested itself in an ugly and defined shape. He will be aware that the spending review accorded to the Ministry of Defence a record-busting extra £24 billion over the course of this Parliament. That is indicative of the Government's commitment to defence. Obviously, with the new Prime Minister and, I have to say, a very determined Secretary of State for Defence, I am sure that the future significance—as my noble friend has indicated—of our defence capability will be constantly highlighted.

**Lord Coaker (Lab):** My Lords, the Minister can see from the number of questions that people are really concerned to hear from the Government a firm commitment that we will have a sufficient number of aircraft for our aircraft carriers. That is why she has been pressed, and some of the reassurance she has given to the House today is good. On the use of the aircraft carriers, can she say a bit more about the trials that are going on, about UAVs being used off the carriers and where that has got to? What are the Government's objectives and plans with respect to that? Will it impact on the numbers of F35Bs that are to be ordered? Also, more worryingly, what will it mean for the way the aircraft carriers are configured and will any changes be needed to accommodate that?

**Baroness Goldie (Con):** As the noble Lord will be aware, the F35 is a state-of-the-art aircraft and we are very pleased to have them. We are very pleased to be adding to our fleet and we look forward to these additions. They are already armed with very sophisticated weaponry, but the Royal Air Force intends to continue

upgrading them with the wider programme and to equip them with UK weapons, which will include the UK-developed SPEAR Cap 3 and Meteor. To augment their strike capability and to complement and, perhaps, potentially replace some of the roles delivered by its crewed helicopters, the Royal Navy is exploring options for a range of uncrewed air systems.

## NHS: End-of-life Care

### Question

11.30 am

Asked by **Lord Balfre**

To ask Her Majesty's Government what assessment they have made of the provision of end-of-life care by the NHS, particularly in respect of Archie Battersbee.

**The Parliamentary Under-Secretary of State, Department of Health and Social Care (Lord Kamall) (Con):** The Government are committed to providing high-quality end-of-life care, working closely with the NHS and other stakeholders. The Government are commissioning an independent review into the causes of disputes between those with parental responsibility and those responsible for the care or medical treatment of critically ill children such as Archie Battersbee. The requirement was specified in Section 177 of the Health and Care Act 2022 to lay a report before Parliament by 1 October 2023.

**Lord Balfre (Con):** I thank the Minister for his Answer and for our meeting earlier this week. I stress that what I am looking for is a review, not an inquiry. We are not trying to pin blame and I hope that the review will have a wide range of disciplines and not be dominated by doctors and lawyers. Because although they say they acted in the best interests of the child—I am prepared to agree that—the parental grief will last for the next 50 years, for the rest of their lives, and we need to get this right. I hope the Minister will be able to reassure me that this will be a wide-ranging review that will involve all the disciplines involved in care.

**Lord Kamall (Con):** I return the favour by thanking my noble friend for the meeting, but also for the frequent conversations we have had about mediation, for example. I know my noble friend is a qualified and experienced mediator. We are quite clear that the review has to attach no blame. We want to hear from as many people as possible. It will investigate the causes of disagreements in the cases of critically ill children between providers of care and persons with parental responsibility. It will look at whether and how these disagreements can be avoided, how we can sensitively handle their resolution, provide strong evidence and inform future recommendations to support end-of-life healthcare environments in the NHS. As much as possible, it will promote collaborative relationships between families, carers and healthcare. We can see it from both sides: as a parent, just put yourself in the shoes of someone who has to make these difficult decisions. Sometimes they feel that the medical profession

acts like God; on the other side, there are medical professionals who believe that the parents do not really understand all the details. Let us make sure that we get this right.

**Baroness Finlay of Llandaff (CB):** My Lords, I too thank the Minister for having met me earlier in the week to discuss this issue. When parents receive devastating news, they are in such a state of shock that communication with them, however sensitively undertaken, risks being misunderstood. Parents are unaware of the limitations on their ability to request interventions or transfer for their child, unlike when the child is at home. So will the Minister confirm that the review will take direct, in-person evidence from parents who have been in this terrible situation and who wish to contribute from their experience—not to apportion blame, but to improve care for others?

**Lord Kamall (Con):** I thank the noble Baroness, Lady Finlay, for the conversations we have had since the passage of the Health and Care Bill. My officials have been incredibly appreciative of her bringing her expertise to this field and, in fact, for educating them—and me—on some of the sensitive issues that people have to deal with in these environments. We want the review to be as wide as possible; we do not want to cut it off; probably the only thing we want to avoid is blame. We want to do this in a sensitive way; we want to hear from the families; we want to make sure it is a balanced review, and we hope to take evidence for the review from as many people as have a view on this. That is why we are taking our time; we have to publish it by 1 October 2023.

**Baroness Butler-Sloss (CB):** My Lords, as a family judge I tried a very considerable number of end-of-life cases, in relation to both children and vulnerable adults, so I hope this review will take into account that when the parents and the medical profession are locked in disagreement, there is a way out, where the judge who tries the case actually looks exclusively at the best interests of the child—taking into account, of course, what the parents think and what the doctors and the nurses think. It is crucial to have that ability to go to a family judge, who will deal with these cases sympathetically but firmly.

**Lord Kamall (Con):** The noble and learned Baroness makes an incredibly important point about getting this right and getting the right balance. We know how difficult and sensitive these cases are when they have come to court. One issue that has been discussed by a number of parties is mediation: can we avoid it going to court in the first place, but also at what stage should mediation take place? It should not just be offered right at the end when everything has ended. We must make sure we really hear the voices of professionals as well as those affected, and families, to get the right balance. So far, we have relied heavily on the courts for some of these cases, sadly, but we just want to make sure we get this right.

**Baroness Brinton (LD):** My Lords, over the last six years, the provision of palliative care for children and young people has become very patchy. CCGs across

England have been closing down palliative care for children. Are the Government taking action to hold integrated care boards to account publicly on implementing their duty to commission palliative care for children and young people?

**Lord Kamall (Con):** The noble Baroness will be aware that earlier in the week, when we had the debate on integrated care boards and their responsibilities, we added—thanks to the work, once again, of the noble Baroness, Lady Finlay—palliative care services to the list of services that integrated care boards must commission. Integrated care boards will be accountable to NHS England, but also the CQC will be doing a lot of evaluation and they will be measured against the list of services that they have to commission. Clearly, there will have to be accountability on palliative care services.

**Baroness Merron (Lab):** My Lords, when a child is at the end of their life, quality palliative care should ensure, of course, both the child's comfort and managing pain and symptoms, but also provide support and care for the entire family. These are clearly heartbreaking situations for everybody involved, so will the Minister assure your Lordships' House that the review will take account of the support that is given to the whole staff team, including ancillary workers? They, of course, have a key role to play.

**Lord Kamall (Con):** One thing that often happens at reviews is that we realise how complicated these issues are. One often cannot pinpoint one key issue, or one silver bullet, as it were. Therefore, quite often—and I was on a call on a different issue yesterday—we thought we had to tackle certain issues but realised there were wider systemic issues. Clearly, that is going to be the case here. NHS England's palliative and end-of-life care programme is an all-age programme, but there are specific pieces of work focused on children and young people. We have also been working very sympathetically with charities such as Together for Short Lives. It has been commissioned to produce written guidance to provide ICBs and ICSs more detail, as the noble Baroness asked for, but also to make sure we make it a better environment and learn.

**Lord Alton of Liverpool (CB):** My Lords, in my conversation with the family of Charlie Gard, they were emphatic that adding to the tragedy of the loss of a child, the thing they found hardest was having to go to court and go through an adversarial system. Anything the review can do to prevent the necessity of court action, notwithstanding wonderful judges such as my noble and learned friend, would be welcomed by such families.

**Lord Kamall (Con):** I think many noble Lords will echo the sentiments of the noble Lord on that. That is why we want the review to be as wide-ranging as possible. People have suggested mediation, but should that be mandated or voluntary? There is also a difference between commercial mediation and family mediation. Commercial mediation is usually binding, whereas family mediation is not always binding. A further question is: at what stage do we offer mediation? One

[LORD KAMALL]

thing we are being told is not to offer it when everything else has failed: we should offer it as soon as possible, to encourage a collaborative approach.

**Baroness Stowell of Beeston (Con):** My Lords, clearly it is important that the professionals are involved in this review, but I think it is also important—as this review begins and my noble friend considers the terms of reference—that emphasis really is given to families, because these tragic cases are symptomatic of a wider problem that a lot of people face when they engage with officialdom and professionals, which is feeling that they are not being taken seriously. It is even more acute when the situation is the one that these families find themselves in, when they are parents and have important status as parents, and the issue at hand is the life and death of their own child. My noble friend has been very good at reassuring this House, but I ask if he could just give greater emphasis again to the importance of the families in this review.

**Lord Kamall (Con):** Once again, I thank my noble friend for joining the meeting this week on this issue. It is quite clear that we want to hear from all voices. We encouraged the families to come forward. We have heard a number of cases, including some raised by noble Lords personally, who have been in contact with the families, and raised their concerns. Quite often they felt that their voices were not heard and they did not really understand the issues; they were in a very emotionally difficult time to take some of those issues in and understand the choices that were available. Sometimes they felt rushed into it by medical professionals. I think sometimes medical professionals have to show a bit of humility and not act like God.

## Care Homes: Energy Costs

### Question

11.41 am

Asked by **Lord Harries of Pentregarth**

To ask Her Majesty's Government what assessment they have made of the likely impact of increased energy costs on care homes; and what extra support they intend to provide in response.

**The Parliamentary Under-Secretary of State, Department of Health and Social Care (Lord Kamall) (Con):** The Government are committed to working with local authorities to help manage the pressures of inflation, for various reasons, on adult social care. We acknowledge the impact that challenges such as energy price rises will have on residential care providers and right across the system. As noble Lords will be aware, the Prime Minister has stated that a package of support for energy costs is her priority. Sadly, in terms of timing, we expect announcements shortly and will see how that feeds into the social care sector.

**Lord Harries of Pentregarth (CB):** I thank the Minister for his reply. As he well knows, care homes are already under great financial pressure. In the six years up to

2020, more than 1,600 had to close—many of them rated good or very good—and the rise in energy costs is already absolutely staggering, from something like £660 per bed per year to over £5,000 per bed per year. Of course, some help will be offered this afternoon, but is the Minister confident that the Government have really taken on board the sheer scale and seriousness of this situation for care homes?

**Lord Kamall (Con):** The noble and right reverend Lord makes a really important point about this issue and the impact on social care. What we are seeing right across government is the impact of this energy crisis: that is why the Prime Minister is making this announcement. We will then have to look into the details of how that affects the different sectors. We have heard from the social care sector, we have heard from care homes and we have heard from patients themselves about their concerns about the cost. I am afraid I cannot give more details at the moment. The Government are working very closely at the moment with local authorities and are in constant conversation about how we can help reduce the burden. Once we have more details of the package, we can look at that in more detail.

**Lord Scriven (LD):** My Lords, heating costs are just the tip of the iceberg for care homes. What does the Minister have to say to people such as June, a care home worker in Sheffield of 24 years, who is now having to leave the sector that she loves, just to get enough money to be able to feed her family?

**Lord Kamall (Con):** The Government recognise that for a long time the social care sector has been treated like Cinderella: a poor relation of the health system. That is why we had the Health and Care Bill, to make sure that we have care right through people's lives. One thing about social care is how disparate and fragmented it is. One reason we have the register is to understand who is out there—who is doing what, their qualifications and their levels of pay, but also how we can make sure that they feel it is a rewarding vocation and career.

**Lord Howell of Guildford (Con):** My Lords, is my noble friend aware that many care homes and, indeed, even more retirement homes and retirement communities are serviced by what are called heat networks. These are combined systems; we used to call them combined heat and power, but heat networks are the modern description. These were not covered at all by the previous energy cap. Could the Minister be assured, and assure his friends, that in the coming arrangements they are properly covered as well?

**Lord Kamall (Con):** As my noble friend will be aware, many care homes are privately owned and run. Quite often, we do not get into that level of detail but I will take the question back to my department once we are aware of the package that is announced.

**Baroness Pitkeathley (Lab):** My Lords, to add to the problems of care homes to which noble Lords have referred is the report in today's newspapers that the new Secretary of State for Health intends to use them



as places to discharge people who cannot have a social care package in their own homes. Can the Minister assure the House that, if this happens, all attention will be paid to the huge problem that care homes already have in recruiting enough staff to carry out their existing functions?

**Lord Kamall (Con):** All noble Lords will be aware of the challenges facing care homes and their owners, including recruiting sufficient staff. People have referred to a number of different issues; one is vocation and feeling valued—quite often they feel as if they are poor relations. Another issue is supply, which is one reason we have looked at a visa to try to encourage more workers from overseas. If we make it a proper vocation, people will want to train in it, get those qualifications and feel they have a valued career.

**The Lord Bishop of Durham:** My Lords, I was going to ask a very similar question; the Minister did not answer the specific question about the Secretary of State's proposal that she may move people from hospitals into care homes and ensuring that that is joined up. Will he comment on that proposal?

**Lord Kamall (Con):** I am afraid I was so busy swotting for these Questions and the three-hour debate afterwards that I missed the news, so I will have to take that back to the department and make sure that we give an answer. I will not avoid giving one.

**Baroness Brown of Cambridge (CB):** My Lords, have the Government considered the impact of increased energy costs on our major scientific facilities, such as the Diamond Light Source? If increased energy costs eat up the increases in UKRI budgets, this will severely impact our ability to deliver the Government's ambition of the UK becoming a science and technology superpower.

**Lord Kamall (Con):** That is a really important angle that I had not considered, to be honest. We recognise that, across government, many Ministers in many departments will be waiting at the moment with bated breath for the Prime Minister's announcement to work out the impact on those stakeholders who have been contacting Ministers and others about the impact of energy costs. Clearly, something has to be done. The Prime Minister will announce it and then we will have to work through its impact. If I am still in post, I can come back to say how that will impact the health and care sector.

**Baroness Altmann (Con):** My Lords, will my noble friend look into the situation of care homes, whether they are in the private sector or not, that have not currently participated in the government handouts to help with energy costs? Second home owners have had discounts on their bills, but there has been no per-bed contribution from the Government to help care homes which are already struggling and for which many families are paying enormous sums.

**Lord Kamall (Con):** My noble friend makes a point that I was not aware of, so I am afraid I will have to take it back to the department. However, it appears a very reasonable point.

**Baroness Wheeler (Lab):** My Lords, what support will the Government specifically give those care homes whose pre-Covid Care Quality Commission ratings have been downgraded from good to inadequate as a result of staff shortages? This is on top of their deep concerns over energy costs. Recent press reports say that up to three-quarters of care homes in England have been reassessed in this way.

**Lord Kamall (Con):** Clearly, one of the issues in the overall review of the social care sector is that, when the CQC and others report on care homes and other places, action is taken. One of the things we will do is talk to the right stakeholders and individuals, but we also have to work in partnership with local authorities—as quite often it is their responsibility—to try to make sure we raise the standard.

**Baroness Hussein-Ece (LD):** My noble friend Lord Scriven asked a specific question on what the Government are doing about pay. The Minister will be aware that there is a crisis in the care sector in recruiting and retaining staff. I declare an interest as I have a family member in a residential care home and am acutely aware of the situation. What is being done to make sure that they are properly funded so that we can retain and recruit much-needed care staff in all residential homes?

**Lord Kamall (Con):** When I speak to officials in the care part of my department about this issue, one of the things they say, in consultation with a number of individuals in the care sector—not only employees but owners—is that morale is clearly low, partly because of pay but also because they feel they do not have a proper vocation. It is very confusing to have all these qualifications; they are not recognised elsewhere and there is no clear career path. One reason we are putting together this register is that we want to understand the landscape out there—it is incredible that this has not yet been done—including the number of qualifications, the issues and what sort of career structure can be offered.

**Lord Whitty (Lab):** My Lords, several noble Lords have referred to the terrible financial situation of the whole social care sector and its employees. I recall the last Prime Minister said he was going to fix social care. Nothing happened. Does the current Government recognise that a step to help out the social care sector, over and above other businesses, would be at least a first step towards fixing the sector?

**Lord Kamall (Con):** One reason we brought forward the Health and Care Bill was that we wanted to make sure that social care was given proper status. Social care has been seen as the poor relation to healthcare for far too long by successive Governments. What we want is a proper health and social care system, properly integrated. Sometimes social care workers leave the social care workforce and move to the health side because they feel it is more valued as a profession. We want to make sure the same is true of social care providers.

**Baroness Manzoor (Con):** My Lords, the NHS has a great history of running great campaigns. I am thinking of “Clunk, click” and the campaigns against smoking and alcohol. Can the Minister say, because not only the cost but the supply of energy is very important, how the department is co-ordinating to ensure that there is a campaign to reduce the energy used in homes, particularly those in the higher income brackets?

**Lord Kamall (Con):** I thank my noble friend for the question. The issue is much wider than just health. We are working with local authorities to understand the impact on the care sector, but there is also a huge cross-government approach on education and energy efficiency. We have to wait and see the package before we can look at this in detail with the sector, and at what measures can be offered.

### Arrangement of Business

11.51 am

**Lord Kennedy of Southwark (Lab Co-op):** My Lords, it is my understanding that in the other place the Prime Minister is leading a debate on the energy crisis and her proposals. As it is a debate and not a Statement, can the Government give some thought and hold discussions in the usual channels to arrange for a debate in government time in this House to discuss this most pressing issue?

As Opposition Chief Whip, I congratulate the noble Baroness on her appointment as Government Chief Whip. She is both a popular and a highly effective Member of your Lordships’ House. I look forward to working with her again.

I thank the noble Lord, Lord Ashton of Hyde, for his service as Government Chief Whip. I always enjoyed working with him; he was kind, courteous and straight in all our dealings. I always enjoyed our conversations that took place many times during the day and even sometimes into the night.

**The Lord Privy Seal (Lord True) (Con):** My Lords, if I might—unusually—respond on a usual channels question, I should like to thank the noble Lord for his kind words about my noble friend Lord Ashton, which are widely shared, and about my noble friend Lady Williams. I think this poor old man will often need a helping hand to stop him stumbling and I cannot think of a securer colleague than the noble Baroness.

As for the fundamentally important question that the noble Lord poses, which perhaps goes a little wider than the energy question, my right honourable friend the Prime Minister indicated yesterday a set of what she considers the urgent requirements for the country. They may well eventuate in provisions being laid before Parliament, which it would be my duty to make sure your Lordships’ House has the opportunity to discuss. I fully take his point about the nature of the debate in the other place meaning that I am not standing here repeating a Statement on energy. This is a question of fundamental importance, and I can give an undertaking that we will take it away and have those discussions in the usual channels to see how we can accommodate your Lordships’ House.

### Leasehold Reform (Tribunal Judgments and Legal Costs) Bill [HL]

*First Reading*

11.53 am

*A Bill to amend the Landlord and Tenant Act 1985 and the Commonhold and Leasehold Reform Act 2002 to limit the right of landlords to recover legal costs in excess of a prescribed scale; to make Tribunal judgments binding on all leaseholders and to require landlords to account to all leaseholders; and for connected purposes.*

*The Bill was introduced by Baroness Hayman of Ullock, read a first time and ordered to be printed.*

### Jagtar Singh Johal

*Commons Urgent Question*

*The following Answer to an Urgent Question was given in the House of Commons on Wednesday 7 September.*

“I am grateful to the honourable Member for asking the Urgent Question, and I pay tribute to his tenacious support for his constituent Mr Jagtar Singh Johal since his arrest in India in 2017. I appreciate what a difficult time this must be for Mr Johal’s family and friends. Again, I pay tribute to his Member of Parliament for all that he is doing for his constituent in these challenging circumstances.

Consular assistance to British nationals (overseas) is the primary public service of the Foreign, Commonwealth and Development Office and a priority for the Foreign Secretary. Since Mr Johal’s arrest over four years ago, Ministers and officials have consistently raised our concerns about his welfare and treatment directly with the Government of India. With Mr Johal’s consent, this has included raising allegations of torture and mistreatment, and his right to a fair trial. The former Prime Minister, my right honourable friend the Member for Uxbridge and South Ruislip, Boris Johnson, raised Mr Johal’s case with Prime Minister Modi in April. The then Foreign Secretary raised Mr Johal’s case with the Indian Minister of External Affairs, Dr Jaishankar, most recently in Delhi on 31 March. Lord Ahmad of Wimbledon, the Minister of State with responsibility for south Asia and the Commonwealth, is also in regular contact with his counterparts across the Indian Government. Since 2017, Ministers and officials have raised Mr Johal’s detention on almost 100 occasions, and they will continue to do so.

In May, the UN working group on arbitrary detention published its opinion that Mr Johal is arbitrarily detained. We take this seriously, and we are committed to doing what we can to assist Mr Johal. On 9 June, the then Foreign Secretary met the honourable Member for West Dunbartonshire, Martin Docherty-Hughes, and Mr Johal’s brother Gurpreet to discuss this matter.

In February this year, lawyers acting for Mr Johal issued a civil litigation claim against Her Majesty’s Government in the High Court. Last month, they detailed their allegations. We must let the legal process take its course, and I will therefore not comment on this matter, in line with long-established practice, as I

am sure all Members will appreciate and as you, Madam Deputy Speaker, outlined before the start of the Urgent Question. I can assure the honourable Member for West Dunbartonshire and the House that we will continue to do all we can to support Mr Johal and his family.”

11.54 am

**Lord Collins of Highbury (Lab):** My Lords, I first acknowledge all the hard work the Minister has taken on this case. In the Commons yesterday, Sarah Champion reminded the Minister there, Rehman Chishti, of the Foreign Office policy to call for the release of arbitrarily detained British nationals, yet the Government have not done this in Jagtar’s case. This is despite the former Prime Minister accepting that Jagtar is arbitrarily detained. The Commons Minister said in response that it was for the new Foreign Secretary and Prime Minister to make such a determination. Will they do so, and when? They should commit now to seek Jagtar’s urgent release and return to the United Kingdom.

**The Minister of State, Foreign, Commonwealth and Development Office (Lord Ahmad of Wimbledon) (Con):** My Lords, I thank the noble Lord, and he is correct: I have been working on this since I first took on the portfolio as Minister for South Asia in 2019. One of my first actions was to meet directly with Gurpreet Johal and the wife of Mr Johal because it was important for me to extend that support directly. The noble Lord is also right about the issue of Mr Johal being arbitrarily detained; the UN working group has alluded to this. We have taken it seriously and I am sure that the noble Lord will know from my own dealings with him that I have taken this on board. My understanding of the timeline on the UN side is that there is until 4 November for India to formally respond to what has been suggested. We look at all the details very carefully and I assure him that we are doing everything that we can at the current time in securing the current detention conditions of Mr Johal and access to consular visits, which are regular. I meet the family regularly and ensured that the former Foreign Secretary, now Prime Minister, met them; and I have met the constituency Member of Parliament on a number of occasions. I will continue to update the noble Lord, both within Chamber and outside, with further details on this case.

**Lord Purvis of Tweed (LD):** I commend the Minister on his work in this area. It has been consistent and clear. I am personally pleased that he continues in his post in the Foreign Office—I did not mean that he should not have been promoted; of course that goes without saying but, at the very least, I am pleased he is still in his position. The question is not now just the welfare of Jagtar; it is about whether Ministers are seeking his urgent release. Can the Minister be clear: is that what representations are now being made about to our Indian friends? There is an incongruity in that the UK is currently negotiating with India the human rights chapters of an FTA at the same time at which there is, as the UN has put it, an “egregious human rights challenge”. Are we making it clear to our Indian friends that we will not enter into an FTA until this issue is resolved?

**Lord Ahmad of Wimbledon (Con):** My Lords, I have made representations here with the former Indian high commissioner—there is a change not just in government; the new high commissioner is about to start and I have sought an early meeting. This is a case that the Indian Government are fully aware that the United Kingdom has consistently raised, along with three other cases. They continue to feature part and parcel in the raising of cases and the issues and concerns we have about Mr Johal’s continued detention in India. On the noble Lord’s latter point, I assure him—again, subject to changes which may take place within the FCDO—of my commitment and that we will not pursue trade to the exclusion of human rights. It is a particular area of focus for me, as the Minister for Human Rights, and we regard this as an important part of the deep, candid and constructive relationship we have with India, which allows us to raise these issues. The discussions on various issues have featured those of consular cases.

**Lord Tyrie (Non-Affl):** Could the Minister clarify two simple points? First, is it still the Government’s view that Jagtar Singh was arbitrarily detained? The answer is either yes or no. Secondly, have the Government at any time demanded, and are they still demanding, his release?

**Lord Ahmad of Wimbledon (Con):** My Lords, on my noble friend’s first point, as my honourable friend said in the other place, the former Prime Minister made a statement on the issue of arbitrary detention. We have looked very carefully and continue to look at the issuance of the arbitrary detention opinion of the UN working group, and in this respect we are taking up all the issues that have been raised, including those in my direct engagement and discussions with the family, including Mr Johal’s brother. I have been clear with them in a private capacity about my own views on this. The Government are very clear where we look that there is credible evidence of arbitrary detention. We work both publicly and privately to support and tailor our assistance to the given individual who may be detained in this way. Our primary focus in the case of Mr Johal very much remains, first and foremost, full consular access. I believe there have been 48 occasions over his detention period, every six to eight weeks, on which we have been granted that access and where we look at the primary issues of his welfare and health, and that continues. We continue to work directly with the Indian Government in making representations. I am very cognisant of the situation. This detention has continued for over 1,000 days, and it is important that we seek a resolution to this.

**Lord Singh of Wimbledon (CB):** My Lords, Jagtar Singh Johal was a UK blogger who drew attention to India’s continuing abuse of the human rights of minorities. The Indian Home Minister has publicly described Muslims as termites—that is the extent of the abuse of human rights. For his actions, Jagtar Singh Johal has been incarcerated and tortured for years in an Indian jail and is facing the death penalty. We have heard that we have constructive talks with the Indian Government. That has been going on for years—

[LORD SINGH OF WIMBLEDON]

what has actually been achieved? We talk about the importance of freedom of speech, but does the Minister agree that it smacks of hypocrisy when we choose to look the other way while negotiating a trade deal with India?

**Lord Ahmad of Wimbledon (Con):** My Lords, on the noble Lord's final point, I assure him that we do not look the other way. Our relationship with India is strong; it is a relationship between friends and constructive partners. It is very much because we invest in that relationship that we can raise sensitive issues including this particular case and others on both sides, allowing for an exchange. We are making progress, certainly in my view. Of course, I am totally with the family; the continued detention has caused them much anxiety and continues to do so. Again, let me be absolutely clear that the UK Government oppose the death penalty in every respect, and the Indian authorities are fully aware of the UK's position on this.

**Lord Campbell of Pittenweem (LD):** My Lords, the Minister has obviously made a great deal of effort on this matter and is to be complimented on doing so. Are the Government satisfied by the quality of legal representation that Mr Johal is subject to at the moment in what is clearly a very tense, and for him unnerving, experience?

**Lord Ahmad of Wimbledon (Con):** My Lords, ultimately, of course, it is for the family to determine their lawyers and legal representation, but we engage regularly both with the family here and with our consular officers in India. The Indian high commission deals directly with both Mr Johal and his legal representatives, but this issue is very much for the family. I do not know if there is a specific issue which has been raised with the noble Lord, but if he wishes to raise one with me outside the Chamber I would certainly be pleased to look at it.

**Lord Lexden (Con):** My noble friend Lord Tyrie asked for short and direct answers to his questions, but he got rather long ones. Could we return to the essential point, the second one that my noble friend made: are the Government demanding this man's release?

**Lord Ahmad of Wimbledon (Con):** My Lords, I am not avoiding the direct answer, but all noble Lords will appreciate the sensitivity of this issue, and indeed this particular case, for a variety of reasons. I have deliberately stated what the government position is, but I assure my noble friend of the absolute commitment that we are very much focused on the welfare of Mr Johal. On the issue of arbitrary detention, I have already outlined the current timeline, and I am sure we will see India's response to the UN report. I will certainly continue to update your Lordships' House on this case. As someone who deals with India quite extensively on various issues of consular cases, in my experience I have seen that we see results not where we raise these issues in a very public way but where we seek to unlock them privately and candidly.

## Primary and Community Care: Improving Patient Outcomes

### *Motion to Take Note*

12.06 pm

*Moved by Lord Patel*

To move that this House takes note of (1) the role of primary and community care in improving patient outcomes, and (2) the need for reform.

**Lord Patel (CB):** My Lords, I am pleased to open the debate today. I thank the Minister and all noble Lords who have their names down to speak and look forward very much to their contributions. This debate takes place at a time when the whole NHS is under immense pressure, with media headlines such as "NHS in crisis", "End of general practice as we know it" and "Will we have an NHS in the future?", to quote a few. The focus of today's debate is primary and community care—the backbone of our health service—how its performance affects patient outcomes, and whether there is a need to reform the primary care service.

Primary care has been the bedrock of the NHS since its inception in 1948. It has been revered by patients and has delivered huge health improvements. When Nigel Lawson—now the noble Lord, Lord Lawson of Blaby—said that the NHS was a national religion, it was because of patients' love of its primary care services. The two professional groups worshipped by the people were the general practitioners and nurses in primary and community care, not the brilliant obstetricians, colorectal surgeons, palliative care doctors and—I say on behalf of the noble Baroness, Lady Murphy, who had to withdraw because of cataract surgery yesterday—not even the psychiatrists. Primary care is now in a different place. It is still the bedrock of the service, but the foundations are shaky, even crumbling. Unless fixed, the whole system will collapse.

What is primary and community care? It is the first point of contact for healthcare and is provided mainly by GPs, but also increasingly by nurses, dentists, optometrists, pharmacists and many other allied health and care providers, including physiotherapists, mental health nurses, care co-ordinators and, in the community, health visitors, specialist nurses, midwives and end-of-life carers. The system is about caring for people rather than treating specific diseases. A system designed to work as an integrated team, with the patient as its centre and focus, has now been broken through incoherent policies, being starved of resources, and a lack of attention to the need in primary care to develop a technologically driven healthcare system and the infrastructure and professionals needed for an efficient and effective system to run.

Primary care is the setting for 90% of patient contacts, involving some 26 million patients a month. Huge increases in demand are putting pressure on the whole system and leading to long waits in general practice, emergency care and planned care. These pressures have created the biggest single fall in public satisfaction with the NHS in decades. A recent survey suggests 68% of patients do not feel they will receive timely treatment if they fall ill, 50% think it is harder to get a

GP appointment and 40% think the service has deteriorated. With general practice under immense pressure, recent data from the GP Patient Survey and the British Social Attitudes survey suggest two-thirds of people are dissatisfied with service provision, with the quality of care received perceived to be an issue.

If the problems in general practice and its performance are not resolved, it will lead to the demise of general practice as we know it and, in turn, the collapse of the whole system of primary care and the wider healthcare system. We will see a repeat in general practice of what has happened in dentistry, where 90% of NHS dentists are not accepting any new adult patients.

Putting aside the rhetoric, GP numbers are declining, despite higher numbers in training. Recruitment and retention are poor. More GPs are retiring early, with pressures of work, bureaucracy and pension rules cited as reasons. Reports of nearly 57% of GPs working three days a week or less and increasing numbers doing only private work—approximately 1,500 at the most recent count—are a worry. The service may become more privately driven.

Contracts and the independent status of general practitioners dominate all discussions related to primary care. The small-business model of GP contracts is still favoured by professional organisations, but a House of Lords report suggested that model is not fit for purpose. A recent Policy Exchange report, *At Your Service*, advocates a universal shift to a fully salaried model over time as part of wider reforms in primary care. More and more younger general practitioners are choosing to be salaried.

Of course, no change in service delivery can occur without general practitioners being part of it and, importantly, playing a leading role. General practice can and should provide that leadership, but at the same time recognise that strong leaders remain strong and gain respect by at times letting go of some strongly held values, such as their gatekeeper role or even their responsibility for minor contractual issues. I am sure GP professional organisations are aware of this: my conversations with them suggest that they are not averse to change, but wish to be involved in any policy developments. The workforce issues are not confined to general practitioners. Similar problems exist with nursing, health visitors and community care professionals, all of whom are a crucial part of an effective system of primary care.

Of course, there have been efforts to try to improve the system and deliver patient care. The establishment of primary care networks, starting in 2019, is one key example. While the majority of general practices belong to them, not all do. Success at delivering service at scale in primary care—that is the important point—by PCNs has been variable, and now the BMA is threatening to withdraw its support, with lack of resources and contractual issues given as the reasons for doing so. Some other measures undertaken to improve service are the recently established diagnostic hubs and the recent involvement of pharmacists in blood pressure monitoring.

I was impressed that the voluminous briefings we have all received all cry out for a need for change in primary care that delivers three things: workforce, infrastructure and technology, including IT. Various

recent reports have come up with suggestions for improving the primary care system: the report *Fit for the Future: A Vision for General Practice*, produced by the Royal College of General Practitioners; the *At Your Service* report I mentioned from Policy Exchange; and the *Fuller Stocktake* report by Dr Claire Fuller, an eminent general practitioner, which was commissioned by NHS England. All of these reports have suggestions for an integrated system that delivers primary care at scale. In commenting on some of the reports, the King's Fund has suggested that tinkering with “more of the same” will not produce results. Reforms need to be driven from the bottom up, by the people who do the work.

Undoubtedly, we need a primary care service that delivers at scale, is fully integrated with other parts of the health and care system and, above all, is responsive to patient needs and delivers better patient outcomes and health improvement. So what is the way forward? My personal view, which I hope noble Lords would support, is that first and foremost we need political recognition that an effective primary care system is a prerequisite to a sustainable NHS. To this end, proposals for change to make future primary care fit for purpose have to be led by the Secretary of State for Health and Social Care. The words from the Prime Minister and the Secretary of State hitherto are encouraging and I hope they will be followed by some actions.

On the other hand, this House has an opportunity to play an important role by setting up a special Select Committee to report on the future of primary and community care, identifying possible barriers and solutions that could make important contributions to making primary and community care fit for purpose and fit for the future. I hope this gets support from noble Lords.

As for questions for the Minister, I have only one: is there a recognition by the Government that primary care is now in intensive care? None of the piecemeal reforms, mostly of process, will work. Strong, bold leadership is needed to bring about the system change it needs. Otherwise, it will die, and with it the NHS. I beg to move.

12.18 pm

**Lord Bethell (Con):** My Lords, I thank the noble Lord, Lord Patel, for bringing about this important debate. As ever, he has a canny nose for the timing of these things and he is absolutely spot on. I know from my time in office that the pressures on primary and community care are intense and I agree that we need an urgent rethink. That is why I will put my name to any forthcoming proposal from the noble Lord to the Liaison Committee for a Select Committee on primary and community care.

The NHS has experienced long waits in hospital care before, which are extremely distressing, but it has never faced such a grave challenge in general practice—and as we know, general practice is the bedrock of the NHS. This is the right moment for noble Lords to distil complex recommendations for primary and community care into succinct, wise counsel for the Government to consider. I will share a few thoughts on how that might work. First, primary and community

[LORD BETHELL]

care is the first point of contact with the care system for the public. When we consider the remit of this Select Committee, we must remember that for many people this is not a GP. It is likely a website, an app, a school nurse, a community hospital or a pharmacist.

Secondly, there is definitely a workforce crisis—briefings from the Royal College of GPs, the Royal College of Nurses, the King's Fund and others make that very clear, and I am grateful for their persuasive statistics—but the crisis in primary and community care is not just a workforce crisis that can be answered through solving recruitment, retention, workload and the GP contract, although those are extremely important challenges. Anyone who listened to the Minister's answer yesterday to the OPQ about GP training will be clear that there is no massive new wave of GPs set to save the day. As the noble Lord rightly pointed out, only one in four GPs are currently working full-time, and training numbers are going sideways, so we should assume that there will be fewer GPs rather than relying on imaginary regiments of doctors riding to the rescue. Rather than deluding ourselves, we should make our plans accordingly.

Thirdly, we should not over-romanticise relational-based care when the role of the GP is evolving as quickly as that of the bank manager or the priest, and when many patients never ever visit the practice. We got through much of the pandemic with most practices shut, after all. People have extraordinarily diverse needs, from the long-term sick who certainly need regular clinical, face-to-face care to those at the other end of the scale, the occasionally sick or injured who might need a more transactional relationship. We must avoid lazy generalities, and we need a modern service that is flexible enough to meet different needs. That is why I would like any Select Committee studying primary and social care to look at four issues in particular.

The first is the importance of prevention. Too much traditional thinking around primary and community care assumes that patients turn up with symptoms and are guided by the GP on to some care pathway. These days, though, by the time patients have symptoms, it is often too late for the best treatment. This system-wide focus on late-stage acute medicine is costing the country a fortune in hard expenses and opportunity costs: expensive procedures, long recovery times, falling longevity, falling workforce productivity, and hefty social care and welfare bills. It is a huge price to pay. Primary and social care should play a much more proactive role in achieving “domain one” of the NHS outcomes framework, which is preventing people dying prematurely.

Secondly, technologies to “transform” healthcare are at our fingertips. I saw the power of digital transformation in primary care from my experience during the pandemic, with virtual wards, testing, the vaccine rollout, surveillance through the REACT survey, the prompt delivery of antivirals, and so on. We should study how primary and community care put digital first and become the foundational layer for scaling digital healthcare through the NHS. This approach is outlined in the persuasive policy paper from Policy Exchange that the noble Lord, Lord Patel, mentioned, *At Your Service*, by Dr Sean Phillips, Robert Ede, and Dr David Landau. They rightly argue that there is much to do to enhance the existing infrastructure and

clarify the legal regulation of data. That is why I am interested in their recommendation for a digital health and care Bill, and in a “smart” first contact navigation programme—an “NHS Gateway”—that can deliver a more personalised “front door” to the NHS. We also need to address the use and sharing of data in primary care for management, clinical and research uses, with suitable resources allocated for this absolutely invaluable work.

Thirdly, I support the recommendation by Dr Rebecca Rosen at the Nuffield Trust for embedding more non-medical clinicians—such as pharmacists and dieticians—into primary care, an approach that worked well for us in the pandemic. There are lots of great examples already in primary care of working differently, from community health worker models in Westminster to the Healthier Fleetwood approach. The question that arises from these experiments is: how do we make innovation in primary care the norm rather than the exception?

Lastly, I will say a word about diagnostics. The pandemic demonstrated the value of consumer diagnostics, attached to digital reporting and used at home or on the high street. These tools engage people with their own healthcare, improve personal responsibility and relieve the pressure on overburdened healthcare systems. It makes no financial or clinical sense that people book a hospital or GP appointment for often extremely simple procedures such as swabs, serology, and faecal and blood pressure tests. During the pandemic, the Lighthouse Lab processed 150 million PCR non-NHS test samples, lateral flow tests were shipped at up to 4 million a day at their peak, and over 2 million blood samples were taken at home by finger prick and posted to labs to maintain the ONS infection study. I give a loud cheer to our new diagnostic hubs, but I fear that on diagnostics we are going back to the old-fashioned, cottage-industry-based pathology mindset rather than embracing the opportunity presented by the consumer diagnostic revolution.

Let us not fight the last war or try to recreate Dr Finlay. This Select Committee must examine the opportunities presented by this crisis for moving away from cumbersome paternalistic models towards a data and diagnostic-empowered citizen patient. That is what a Beveridge 2.0 could look like. That is the way to grow the economy and protect our people.

12.25 pm

**Lord Hunt of Kings Heath (Lab):** My Lords, it is a great pleasure to follow the noble Lord and to thank the noble Lord, Lord Patel, for his speech. I fully echo his desire to see a special Select Committee created; I hope that the Liaison Committee members present will take note of that.

The noble Lord said that primary care is the bedrock of our health service, and I agree. If it does not function effectively, the whole healthcare system suffers, and it is clearly suffering greatly at the moment. It is not just workforce shortages or the crumbling estate. A recent Civitas report made for sober reading. It ranked the performance of the UK healthcare system with that of 18 comparable countries and, lamentably, it placed the UK second to bottom across a series of

major healthcare outcomes, including life expectancy and survival rates from cancer, strokes and heart attacks. Recently, the Health Foundation has drawn attention to the UK having an astonishingly low number of MRI machines and CT scanners: fewer per person, according to the OECD, than any other developed country. That is besides having fewer doctors and nurses than our north European neighbours and very poor uptake of new medicines.

We see England's hospitals being caught in a vice. On the one hand, the race to work through the enormous backlog of care means an unceasing stream of new patients into fewer beds. On the other hand, a decade of flatlining, at best, funds for social care means that even when treatment is concluded, thousands of patients remain in hospital beds waiting for follow-up care. Emergency departments have no beds to send new arrivals to the wards, patients with urgent needs wait for hours on end, ambulances cannot hand over patients, and are stuck in a queue outside A&E. We have to see the inadequacies of primary care in this much wider context.

The pandemic has accelerated the move to online booking and phone consultations with general practitioners. That has made care quicker and easier for many people, and we should not ignore that. On the other hand, it has led to many other patients facing enormous difficulties in getting face-to-face access to their general practitioner. The NHS England stat last October which showed that over 15% of practices recorded less than 20% of their GP appointments being held face-to-face is very worrying indeed. Last month, *Pulse* magazine reported that 1.5 million patients had lost their GP in the last eight years after the closure of almost 500 practices. Recruitment issues were part of the problem but we should not ignore the issue of workload, inadequate premises and sheer morale issues.

The noble Lord, Lord Patel, mentioned Dr Claire Fuller's very interesting report to the NHS England CEO. She concluded that patient satisfaction with access to general practice is at an all-time low and described the 8 am Monday scramble for appointments as synonymous with huge patient frustrations. She said: "left as it is, primary care ... will become unsustainable in a relatively short period of time."

We have all had evidence from the Royal College of GPs, which says that despite a government agreement to an increase of 6,000 in GPs, the number of fully qualified full-time equivalents has actually fallen by 1,622 between September 2015 and 2021. I mention again that I do not understand how the Government could have reduced the number of medical training places to 7,500 this year, following two years of there being about 10,500. It is amazing and extraordinary that the Government could have allowed that to happen. I had better declare my interest as a GMC member in that regard. The Health Foundation predicts that the shortage of GPs is set to become worse. It thinks that the current 4,200 shortfall will rise to more than 10,000 by the end of this decade.

Noble Lords have mentioned the recommendations of the Royal College of GPs: a new recruitment campaign, freeing up bureaucracy and investing in new technology—and I very much agree with the noble Lord, Lord Bethell, on that. But that is really not sufficient to tackle the

fundamental issues we face. Noble Lords may be aware of a recent report by your Lordships' Public Services Committee which looked at public service workforce issues generally. The stark conclusion is that every part of the public sector has targets for recruitment and none of them will be met. There is a lack of realism in accepting that and starting to do the work that needs to be done when faced with these acute problems. Again, I agree with the noble Lord, Lord Bethell, on that.

We need a realistic conversation about what we can expect primary care to do in future. Most of the evidence we have received says basically that we need more GPs but assumes that we carry on with the same 1948 model of primary care. That is not sustainable at all. We must be realistic and start talking about why that can no longer be the way we go forward.

Dr Fuller's report to the NHS CEO was interesting. She argued for the streaming of services, with access to care for people who get ill but use health services only infrequently, and a distinction between their needs and those of people who are chronically ill and need care, to know their GP and access to multidisciplinary support. That is the start of thinking more fundamentally about primary care in future.

We must ask ourselves about the role of gatekeeper. People are wedded to the idea of the GP as gatekeeper—or, let us be truthful, as rationer of services. But when we look at outcome figures for, say, cancer, we must ask whether the lack of direct access to specialist care is one of the reasons that our outcomes are so poor. I do not know whether that is true or not, but we certainly need to ask the question.

How can we increase GPs' job satisfaction? We must do something to give them the confidence to carry on in primary care in a way in which they get job satisfaction. We have many overseas doctors coming to work in the hospital sector. Can we change some of the rules and understandings in primary care to enable them to work there as well?

Finally, is the organisational model fit for purpose? We know that many GPs no longer aspire to partnership. What ought to take the place of that? If we are moving to a salaried service, partly in the employ of private-sector providers, how can we ensure that those GPs are getting the support, professional leadership and confidence to wish to stay in the sector in future?

I look forward to the Minister's response. We do not need a lot of statistics, which, frankly, is not the answer to the fundamental issues we face. If ever we needed a special Select Committee, this is it.

12.34 pm

**Baroness Masham of Ilton (CB):** My Lords, I thank my noble friend Lord Patel for this necessary debate, and I declare an interest. In November 1981, I was given an honorary fellowship award by the Royal College of General Practitioners, and I have been and am a user of the NHS, being a high-lesion paraplegic. I ask the Minister: how is the NHS going to be improved without an adequate workforce?

We have a growing elderly population, with many complex conditions, who need treating. I am absolutely perplexed that many well-qualified students with many

[BARONESS MASHAM OF ILTON]

A and A\* exam results, and who would like to study medicine, are being turned away by universities because the universities do not have an adequate number of places or because they are too expensive to train. This seems ludicrous when there is such a shortage of GPs and specialist consultants. This is a frustrating situation. What can the Government do to rectify it? Should we not try to be self-sufficient for the future years by training our enthusiastic young people, not training just half of what we need? We must invest in our future.

I bring to the notice of your Lordships and the Minister the situation of sick notes. It seems to be a difficulty for small businesses when an employee goes off sick and keeps getting repeat sick notes. Because of confidentiality, an employer cannot get advice from the GP. Are these repeat sick notes being given over the telephone, and for how long can they keep coming? Since the coronavirus epidemic, many GPs prefer telephone calls to face-to-face visits to surgeries. Small businesses need advice, as they have to put in staff to cover the absent staff who are off sick. At this difficult time, it may be the last straw which breaks the camel's back.

Bed-blocking is well known and seems to be getting worse. This is not the fault of patients but it is very serious. Ambulances are being held up by multiple patients needing beds and waiting to get entrance to hospital. One of the main problems is that many elderly people have serious falls and cannot leave hospital until there is a care package in place at home so that it is safe for their return, otherwise they will be back in hospital. There is a desperate need for carers and a community team of physiotherapists, occupational therapists and speech therapists for patients who need to be safe at home. This does not come cheap. More funds are needed in both home care and hospital. It is no good robbing Peter to pay Paul; we need both.

My noble friend Lord Patel is asking for a House of Lords Committee on this important matter. It cannot wait: something should be in place before winter sets in. Whatever is set up needs to start the moment Parliament returns in October.

I end by saying that dentistry in the NHS is in crisis. Something must be done to save many people from agony and frustration. Dentistry has not caught up after the Covid epidemic. I have every sympathy with anyone who has toothache from an abscess, having had one myself last week. The conclusion is that reform of the dysfunctional NHS dental contract is now a matter of urgency. A reformed service will not work if there is no workforce left by the time it is finally introduced.

12.39 pm

**Viscount Eccles (Con):** My Lords, it is a great privilege to follow those four opening speeches. However, I knew that I was getting myself into quite unnecessary trouble by putting my name down for this debate. Having had no internal experience of the National Health Service, I cannot follow the catalogue of problems which we have so far heard.

I start by declaring an interest: I am in receipt of community care. I will not go into detail, but I was in hospital two or three times and the NHS picked up

that this would probably lead to the need for aftercare. Lo and behold, community care appeared. It has been very interesting and extremely helpful, but it raises two matters.

First, there was no explanation for why this was happening; it just happened. There has been no explanation which might lead one to understand the objectives or the value of the work, and possibly even the value for money of the work, being done in what is undoubtedly an endeavour to ensure independence—an endeavour for which I am very grateful.

The second matter that has arisen is that I cannot any longer understand whether there is a borderline—and if there is, where it is—between primary care and what might loosely be called hospital-based care. Because of my short stays, two hospitals have picked me up and are determined to monitor all sorts of aspects of what they found during their investigations. A lot of that work is what I would describe as primary care. I will not go into details, as that is not the point of such a presentation, but, for example, skin trouble, which has been persistent and different and has apparently quite complicated causes, seems to have moved away from primary care.

The other aspect of these experiences means that, for various reasons, I have not been able to create any personal relationship with a general practitioner. I have been responsible for some of the changes that have led to that, but so has the medical centre, where the people change quite rapidly.

When thinking about these experiences and about what I do not understand about the National Health Service and how it is organised and run, I am very thankful for what has happened in the delivery of my medical services; I have every reason to be grateful. There have been glitches along the way—a rare side effect, which affects only 1% of the population, but that just proves that I am an awkward person, as so many people are. I am truly grateful for the way in which the NHS has dealt with the various problems that I have had—and here I am, past my sell-by date.

When thinking about that, I reflect on my two grandfathers. They were both medical men, and they were both involved in the negotiations which led up to the Aneurin Bevan health service Acts. If they were with us today, they simply would not understand what is going on. The changes have been so radical—in society, in the behaviour and reaction of people in society, in the medical profession, and in the technology that has come over the past 74 years—that they would not understand what is going on and why it is going on in the way that it is. This leads me to think that we must be coming to a need to discuss, rethink and maybe alter the Aneurin Bevan settlement.

There have been so many efforts over that time, and yet we have heard the catalogue of the first four speeches of this debate. It is clear that something is amiss and that we need to think about this very big organisation, with its huge difficulties. The gearing in such a large organisation and the importance of that fact that, when medical services are delivered, it is very personal—they are essentially between two people; you and some medical practitioner who has been through a long training and has the knowledge—means that it will either work as it should or will run into troubles.



In thinking about where we are, I hope that the first thing that we will consider very carefully is the relationship between the political sector—this is a nationally provided service, funded from taxation and free at the point of delivery—and the medical profession. There is no natural fit between politics and medicine. There was not at the beginning of the health service, and indeed there were compromises made at that time which we still live with. In starting a discussion, we must go back to fundamentals, and we certainly need the medical profession to stand up and be counted on how it sees the way in which the delivery of medical services should be shifted. What is the borderline between primary care and secondary or hospital-based care? What are the fundamental questions which must be asked and answered if we are to go forward?

12.48 pm

**Baroness Pitkeathley (Lab):** My Lords, I am grateful to the noble Lord, Lord Patel, for leading this debate and, beyond that, for the leadership that he provides to this House on all matters health related. Although he used the words community care to refer to community care health services, I know that he will forgive me if I slip over into the other bits of community care, which are so vital when we consider healthcare and which work in collaboration with primary care.

Patients and carers must be the focus of this debate, because improving outcomes for them is what primary and community care services are all about. But I must put in a word of warning here on behalf of those patients and carers: if you ask a typical patient or carer to define primary or community care, they would struggle, as the noble Viscount so ably and vitally reminded us. I must say it is a pleasure to see him with us, not at all past his sell-by date. A typical patient simply does not know the difference and why should they? They refer to “my doctor”, “the hospital” or “the carers who come in to see my mother”. They do not know about different streams, different types of training or regulation; they are puzzled only by why test results take so long to reach their GP, why some care is free and other care has to be paid for.

I have lost track of how many friends and neighbours I have advised should be in receipt of NHS continuing care funding for their elderly parent, when they have immediately been advised to seek a place in a private and very expensive nursing home, without any reference to possible alternatives. What puzzles patients and carers most of all is the lack of communication and integration between services. “Why on earth do they not talk to each other?” they say. “Why do I have to tell my story all over again to every new person I see? Why did my GP not know that I was being discharged from hospital?” Every time I speak to a patient or carer, I find myself at a loss to explain why these things happen.

It is not as though they are new problems or that we do not know how to solve them. We know about integration, shared budgets, joint training initiatives, more realistic funding and better workforce support. We had great hopes when the integration White Paper was published earlier this year: it promised shared planning and delivery for health and social care and making access easier. But there was little to explain

how a joined-up system would be managed, be accountable to the public and balance what is delivered locally with national standards and entitlements. That is another cause of bewilderment among patients: “Why does my sister in Devon or Doncaster get something that I have been told I can’t have where I live?”

I must turn to the disaster area of social care, because you cannot focus on any problems in the NHS without fixing social care. I was amazed, as many of your Lordships would have been, to hear the outgoing Prime Minister claim, on Tuesday, that he had fixed it. You could have fooled me or anyone else who works in the system. Why are ambulances in short supply and taking longer to reach those in need? It is obvious: they are queuing at hospitals because there are no beds to move people into from A&E. One in seven hospital beds is now occupied by a patient who is fit to be discharged but cannot be, because there is nowhere for them to go, because of chronic underfunding in the system. With such long-term shortages in the workforce, even those who have a care home place may be neglected, while unpaid carers carry even more burdens, as I have reminded your Lordships on all too many occasions.

I was grateful that the Minister was able to secure a concession for carers in the recent Health and Care Act, enabling them to be consulted at the point of discharge. However, all too often, local services to support them are sparse or non-existent. The charitable sector, which is often the main source of support, is also under severe pressure.

One reason is Brexit—so many former employees were from the European Union—while another is poor wages and another is lack of respect for the social care professions, which are always seen as the poor relation when compared with health services. The Minister referred to that in his Answer to a Question earlier.

The new Prime Minister said that she will stop the health and social care levy, which was meant to fund, first, backlogs in the NHS and, secondly, social care. Will she now give all that money to social care? If so, how much will it be and how many constraints will be placed on how it is used?

The lack of attention to and funding of preventive services is a constant problem, as the noble Lord, Lord Bethell, reminded us. Small amounts of money spent early in a patient journey can head off many problems, but too often we wait for a crisis, which requires far more resources and has poorer outcomes anyway. GPs can be vital in identifying such early-intervention opportunities, but are often denied the opportunity to do so. We must remember too that the cost of living crisis will only make problems of access worse and there will be more demand because of cold homes and inadequate diets.

Many have mentioned problems with primary care and the supply of GPs. The reason there are so many patients who walk into A&E is often the difficulty they experience getting a GP appointment. I know this is a major problem in many areas, but I must put in a word for some GP practices, such as my own, which provide services way beyond those we expect and attempt to support their communities with services and initiatives for the homeless, the lonely and those with mental health problems.

[BARONESS PITKEATHLEY]

I turn to the reforms needed. We need more progress on integration, taking note of some of the local initiatives, which are fine examples, and not being constrained by the “not invented here” syndrome, which is a problem for many people who work in the health service. We must also face up to the workforce crisis. The Public Services Committee, on which I serve, has been mentioned, and it showed that no recruitment targets are being met. It was a great pity that the Government did not accept the amendments for regular reviews of the workforce put forward by the noble Baroness, Lady Cumberlege, when the Health and Care Act was going through. To address shortages, Governments, regulators and employers must succeed in retaining existing professionals and recruiting and training additional ones. This may mean that they have to challenge conventions about education and training and be far more flexible in how we deploy that workforce. How many times have I heard calls in this House for integrated training across health and social care, but has any real progress been made?

Being more flexible about patient need requires some professions to give up their protected status and to recognise that a nurse, physiotherapist, pharmacist or healthcare assistant can meet patient needs as well as or—dare I say it?—even better than a doctor. It is a pity that radical reforms of the regulation of the health professions have never been tackled, in spite of many promises.

The new Prime Minister said that the NHS will be a strong focus for her Administration. She will always find those who work in health and care committed, dedicated and willing to embrace change. What they ask for in return is honesty about the problems they face and recognition of their devoted service.

12.56 pm

**Lord Kakkar (CB):** My Lords, I join other noble Lords in thanking my noble friend Lord Patel for the very thoughtful way in which he introduced this important debate. In so doing, I remind noble Lords of my own interests. In particular, I am chairman of the King’s Fund and King’s Health Partners.

In opening this debate, my noble friend described—and many other noble Lords added to his description—the substantial challenges that the NHS faces in general and in particular in primary and community care. So far in the debate, there has been a consensus and recognition that failure to address those challenges will ultimately lead to the NHS, in general, becoming totally unsustainable. We see the manifestations of this every day in the crisis to ensure that patients in an acute situation can be delivered to hospital through the ambulance service; in the substantial waits and, quite frankly, clinically unsafe environment that now represents many accident and emergency departments; in the tremendous pressures demonstrated in the acute management of patients in medical, surgical and other disciplines in our hospitals; and, most importantly, in the failure to discharge patients from hospital back into the community. The result of all that is an NHS that is considered, regrettably, now to be failing in many aspects. That failure is attended by an increasing loss of confidence among our fellow citizens.

I strongly support my noble friend Lord Patel’s proposal to establish an ad hoc Select Committee of your Lordships’ House to examine in more detail the challenges and opportunities for reform in primary and community care. In proceeding along that line and in having identified the many challenges faced, the issue is to understand how we might address them. To do that, first, we must deal with a major problem, which is the discordant perception and expectation among some important groups, with regard to what should be delivered by primary and community care services in the NHS. The expectations are those of politicians, of the public, and of health and care professionals. Those expectations are starting to differ widely when we look at the reality of what can be provided through a model of primary and community care established at the birth of the NHS.

That model, having at its heart family doctors well versed with the needs of their patients in broadly small communities in small practice settings, was fine some 70 years ago, but the demographic changes in our country, and the nature of chronic diseases that now attend so many citizens, which have a profound impact on their quality of life and their need to avail themselves of health services, are quite different from 70 years ago.

In addition to that, advances in medical and clinical practice provide important opportunities to impact on many of these conditions, but those advances require changes in the way we deliver care, pathways of care and an important emerging recognition that the hospital cannot be the place where the majority of patients with chronic conditions are managed. They must be managed in the community. Indeed, many must be managed in their home. That requires a different approach to understanding how professionals in primary care and community care settings need to be trained and the skill sets required. It also requires a confidence in understanding that what clinicians might have done previously should be done by other professionals.

Therefore, a professional workforce must be developed, with a recognition that skill sets will have to be developed differentially and that those who might previously not have been involved in delivering direct care—more specialist nurses, community nurses and practitioners—will now need to be encouraged and developed to do so. It also requires the adoption of innovation and technology to ensure that this care can be delivered safely in the community. Patients and their relatives need to be confident that they can understand and have confidence in the digital and technological solutions provided in their own homes and in community hubs and community settings.

Regrettably, none of this seems to be being addressed cohesively, so we rightly welcomed the opportunity provided in the most recent Health and Care Bill for the development of more broadly integrated community care settings and integrated care partnerships and boards to supervise the delivery of that care and bring different elements of the healthcare system together. But we need to go far beyond that. The Minister will be aware that in the debates on that Bill, which he so ably took through your Lordships’ House, there were suggestions, which we have heard from other noble Lords, regarding ensuring that workforce planning, a better understanding of the methodology used in planning,

and the parameters considered in terms of demographic change, emerging technologies, advances in our understanding of pathophysiology and the capacity to deliver care should be included in very sophisticated workforce planning that will help us understand not only the number of healthcare professionals required but their potential disposition by way of discipline and specialty, and the capacity, with emerging understanding, knowledge and technology, to train different groups of healthcare professionals so that, as we have heard, they can work more cohesively together as a team, delivering so much more of the care in the community and at home so that patients never need to come to the hospital.

Indeed, other European countries have been able to achieve these ambitions. They have much lower levels of bed occupancy in their acute hospitals. Therefore, they see no particular anxiety about times such as winter, when acute admissions will inevitably increase. We have failed to achieve that. This failure is now taking us to a place where the system will, as I said, become entirely unsustainable.

In closing, I urge Her Majesty's Government to have the courage to start addressing the problems we face and to start establishing a narrative and communication to bring together professionals, politicians, the public and patients to help understand and develop a consensus around the very important, serious and far-reaching decisions that now need to be taken to ensure that we strengthen primary and community care with new models; to ensure that those models are properly co-ordinated with the changes that need to occur in secondary and tertiary care; and, attending all that, to ensure that we have appropriate workforce planning across those different environments and care settings, attended by a proper review of the regulatory framework in which those professionals will deliver care and a better understanding of how we will ensure proper adoption of innovation through funding innovation streams beyond the recurrent funding for day-to-day delivery of care.

1.06 pm

**Lord Farmer (Con):** My Lords, it is a pleasure to follow the informative and thoughtful speech of the noble Lord, Lord Kakkar. I too thank the noble Lord, Lord Patel, for securing what is a very timely debate, given the new Health Secretary's pledge to put patients first, and the opportunity to talk about how community-based care can improve patient outcomes.

I declare my interest as director and controlling shareholder of the Family Hubs Network Ltd, which advocates for family hubs and advises local authorities on how to establish them. Family hubs are well-placed to deliver a broad range of paediatric physical and mental health services that are more accessible for families. The noble Lord, Lord Hunt of Kings Heath, mentioned accessibility. That accessibility, and the integration of health with other family support in a non-stigmatising and parent-educating environment, has the potential to transform outcomes. Paediatric health needs that are psychosocial and practical require a whole-family approach. Moreover, delivering them in hospital settings a couple of bus rides away from where people live makes it far less likely that children will attend.

Watson and Forshaw's study found that a third of all paediatric hospital appointments were missed over a six-month period. Even more concerning, a third of those children who were "not brought in" by their parents were known to social services and therefore likely to come from families already struggling greatly with the basics of child-rearing. Distance from home contributes to the social gradient in health and perpetuates the inverse care law that those with the greatest healthcare needs have the poorest access to that care.

Accessibility matters greatly if services are to be delivered for the convenience of hard-pressed parents and their children, rather than the system. I welcome family hubs' inclusion in the statutory guidance for the preparation of integrated care strategies. These are described as

"a way of joining up locally and bringing existing family services together to improve access, connections between families, professionals, services, and providers, and putting relationships at the heart of family support. The Family hub model brings together services for families with children of all ages (0-19) or up to 25 with special educational needs and disabilities ... with a 'Start for Life offer' at its core."

Otherwise, access was not prioritised in this guidance, but it should be.

A provider of healthcare services in one county, contracted to provide similar services in two integrated care systems and in two very different ways, told me:

"In one ICS, our contract to deliver children's community health provision gives us the autonomy to deliver in the community and close to people's homes. Where we can, we deliver this in Family Hubs so we can provide education for the parents, early help and appropriate expertise. We provide allergy, continence, perinatal mental health, speech and language and other support, all of which prevents unnecessary attendances in GP practices and A&E. However, in another ICS where we are sub-contracted by an acute hospital, we are required to deliver the same services from a hospital setting. The parent and patient experience differs significantly from one that is educated, empowered and supported to one that is the recipient of a treatment."

Moving on to how health is described in the DfE's *Family Hubs and Start for Life Programme Guide*, the lens always seems to be the very early years. Reference is made, for instance, to

"a clinical setting such as a maternity hub",

mental health is couched in terms of helping families receive appropriate support for their parent-infant relationship and the specific conditions mentioned, such as neonatal necrotising enterocolitis, infer babies' health needs. This is an important start, and the Department of Health and Social Care is, at this point, mainly interested in family hubs as the place where start for life services can be delivered, but their potential is so much greater than that, as my earlier example made clear.

Can my noble friend the Minister let me know what encouragement DHSC is giving to the wider provision of health in family hubs? I ask because, at present, the Family Hubs Network and others have found a distinct lack of awareness of their potential to ease the load on health providers. Health professionals tell us that paediatricians at local hospitals still do not know about family hubs, but need to. They often see families with well-established problems, such as obesity and incontinence, which are best treated closer to home with regular contact with early-help practitioners in

[LORD FARMER]

family hubs. Social prescribers and therefore local GPs, even in areas where there are flagship family hubs, are similarly unaware.

Hubs are also a better place to take on the non-health problems which consume so much of GPs time. In 2015, Citizens Advice's report, *A Very General Practice*, itemised how much time GPs spend on various non-health issues and found, unsurprisingly, that 80% of GPs said that such demands cut into their time for meeting patients' health needs. Citizens Advice called for non-health demands to be met in ways that free up GPs to focus on patients' health, particularly where they require specialist knowledge. The top three non-health issues that patients raise during consultations could and should be part of the family hub offering: 92% of patients mentioned personal relationship problems, 77% problems with housing and 76% problems with work or unemployment. Only one-third of GPs felt they were advising patients adequately.

Family hubs already join up services, including housing and employment coaching, from a wide range of government departments. DWP runs reducing parental conflict programmes in family hubs, where it is easier and less stigmatising to access relationship support, particularly for low-income families. Similarly, the MoJ's pilot family hub in Bournemouth links with the family court and enables separating parents to get help earlier, and avoid costly and adversarial court processes.

Last week, the Children's Commissioner's *Family Review* said that every government department should bring forward family-strengthening policies, led strongly from the top. Family hubs should be the key delivery sites for them and expand their remit, for example, to include better support when parents make child maintenance claims, measures to tackle rural loneliness and disadvantage and intergenerational opportunities. A Cabinet-level Minister needs to co-ordinate these across government, backed by the new Prime Minister. Liz Truss pioneered this in government when she commissioned my review into the importance of prisoners' family ties to prevent re-offending and intergenerational crime. She has also promised to look at family taxation, so I am expecting great things from her.

The Children's Commissioner also said how important family stability is for children and parents. Profound mental and physical health ramifications flow from family breakdown. In a major study of more than 43,000 children, clinicians said that family relationships problems are the most common reason children and young people access mental health services. Resolving them often requires a whole-family integrated approach that it would be better for the health service to deliver in family hubs rather than secondary or primary care settings, which necessarily individualise conditions. Reform to make this a mainstream, default approach, where appropriate, is urgently needed for better patient outcomes, but it requires leadership from government to divert the NHS away from its well-worn tracks. Will the Minister kindly arrange a meeting for us to discuss this further with his new boss?

1.15 pm

**Baroness Finlay of Llandaff (CB):** My Lords, like others I congratulate the noble Lord, Lord Patel, on raising this crucial debate. I declare that I am a fellow

of the Royal College of General Practitioners as a GP—indeed, a medically qualified Dr Finlay—and got my fellowship before moving to hospice work. I am also a patron of the Louise Tebboth Foundation to prevent GP suicides and am president of the Chartered Society of Physiotherapy. I will focus on family medicine specialists—GPs—but we must not forget the major impact that physios and others have on conditions through direct access.

I chaired the Independent Commission on Medical Generalism for the Royal College of General Practitioners and the Health Foundation. Our 2011 report concluded that the generalist approach is essential across healthcare and that if it did not already exist it would have to be invented, while work by Barbara Starfield showed that the health of a nation depended on the quality of its primary care services. I do not believe that that has been dented by Covid.

Patients are the *raison d'être* of healthcare delivery. People become ill at all times of the day and night, presenting with undifferentiated conditions. Some conditions progress rapidly, in others the course is fluctuating or resolves. In our communities, many people live, work and contribute to society with a broad range of chronic long-term multiple co-morbidities. Some have rare conditions. Differentiating abnormal from the normal requires diagnostic skills and risk-assessment experience. Good primary care training is essential, providing adequate experience in paediatrics, women's health, acute and early presentations of serious illnesses and the complexities of medicine in the elderly—and now the workload of GPs has become increasingly linked to social problems in society and mental health.

However, the problem we have is that GPs are leaving practice faster than they can be recruited. The 27,500 whole-time equivalents GPs are made up of a workforce with a headcount of around 40,000. As the noble Lord, Lord Hunt of Kings Health, pointed out, there are now 2.5% fewer GPs than in 2019 and 5% fewer than in 2015, but the average GP is responsible for 16% more patients than 10 years ago. More patients need to be seen than there are 10-minute appointments in a day, let alone time for home visits.

Seeing 40 to 60 patients a day, many of whom have complex medical and social problems, for five days a week is unsustainable. GPs become burnt out and leave. They seek work in other areas in medicine, but often in much more administrative or peripheral roles. Many GPs develop an extended role, developing expertise in some branch of medicine, such as women's health, diabetes or hospice work, or in emergency medicine departments as part of a portfolio of clinical work. They need to carry on working but feel burnt out with the workload of routine general practice.

The GP is the first point of contact for undifferentiated complex problems. They can provide a holistic and comprehensive service for the long-term and acute care of the population they serve in their communities. An integrated approach must address the whole person: the physical, psychological, spiritual and emotional aspects which have led to the condition that has presented. Importantly, there is good evidence that, where continuity of care is in place, there are better clinical outcomes at lower cost, with greater patient satisfaction. We desperately

need more GPs—incoming newly qualified GPs—but also to find ways to retain our experienced, highly skilled doctors who are leaving the profession in large numbers.

These doctors are trained family medicine specialists, and they need parity of esteem with consultant specialists in secondary or tertiary care. From that position, some will need to be able to pursue particular special interests, which will support other services such as mental health—thereby combining the family medicine specialist's interest with some days in community practice—where integration with social care provision is essential.

There have been efforts to increase the numbers of allied health professionals in primary care to help with the shortage of GPs. But there is increasing evidence that, unless these professionals are carefully integrated into the primary care team, they cannot replace the experience and value of a GP. They need support and nurturing. The incoming chair of the council of the Royal College of General Practitioners, Professor Kamila Hawthorne, wants to create associate membership of the college for those allied health professionals who contribute to the primary care team to ensure better integration and understanding between the different disciplines in proper team working. In GP clusters that work well, all disciplines coming together has been shown to improve clinical outcomes and decrease the burden on secondary care. Change will be embraced if those delivering care can lead it and funding issues cannot be ignored in terms of the way that people are paid and reimbursed for their services.

There are other disciplines and services in the community. Hospice home care teams and Marie Curie nurses can be an essential supplement to primary care provision, but they need to be involved early. As many GPs have an interest in palliative care, I hope that the specialty will reopen to those with MRCGP, rather than allowing entry to consultant level training only to those with RCP membership, because their mature clinical experience in the community is invaluable, especially for hospice at home.

We must recognise that the diagnostic, management and risk-assessment skills of the trained GP are essential for our communities and the NHS. Community work is not easy, but it can be very fulfilling if allowed to work properly. The employment of family medicine specialists, with parity of esteem with the hospital consultant body, would allow those who wish for a much more flexible career approach to develop their special interest roles while retaining a firm foothold in family medicine in the community, with all its complexities. Working with their communities, with their own patient population and with all aspects of social care, they can be community leaders.

In the pandemic, around 30,000 doctors were granted temporary emergency registration and over 9,500 have remained licensed to practice until now. At the end of the month, they must apply to restore their registration and for their licence to practise to remain. To date, around 8,000 have not acted despite a streamlined process being in place. Will the Government request NHS trust responsible officers to be available to doctors in their area who wish to relicence?

I have not focused on pensions, but it has aggravated the problem of the loss of GPs from practising. As judges have been given an exemption from the pension cap, will the Government review the pension cap for clinicians? It would be far more cost effective than gaps being filled by expensive locums or leaving services with gaps unfilled and a population without the healthcare it needs.

More medical school places, greater flexibility around revalidation and an ability to have flexible career paths could help supply and retention. However, the problems leading to attrition must be addressed, and the scenario from dentistry is the flashing warning light in front of our eyes.

**Lord Baker of Dorking (Con):** Before the noble Baroness sits down, I thank her for a very interesting, well-informed speech. She identified the pressures placed upon GPs, which are not going to be relieved easily. Would she welcome what happens in a country such as France, where many—

**Baroness Bloomfield of Hinton Waldrist (Con):** I am very sorry, but the noble Lord is not on the speakers' list.

**Lord Baker of Dorking (Con):** Can I not ask a question of a speaker?

**Baroness Bloomfield of Hinton Waldrist (Con):** No, not in a time-limited debate with a provided speaking time.

**Lord Baker of Dorking (Con):** What a pity, it was a very good question.

**Baroness Bloomfield of Hinton Waldrist (Con):** That I do not doubt.

1.24 pm

**Baroness McIntosh of Pickering (Con):** I add my congratulations to the noble Lord, Lord Patel, for calling such a timely debate. It is rather curious to hold a debate without any general practitioners being present to contribute. I understand that in your Lordships' House there are no general practitioners. I declare my interest as advising the board of the Dispensing Doctors' Association, which represents over 4,000 general practitioners in over 1,000 dispensing practices, accounting for 15% of all practitioners.

What lies at the heart of this debate and what I would like to focus on is how health services are delivered in rural areas. There are twin challenges which lie at the heart of this debate; there is a rural and urban aspect to health policies, which is often overlooked. We often have a metropolitan elite running the Civil Service at the highest possible level. There is also the challenge of the conflict between primary and secondary healthcare. It is a flawed approach to seek reform to primary care without looking at the bigger picture. I entirely endorse what the noble Lord, Lord Kakkar, said about needing a cohesive and holistic approach to any possible reform.

[BARONESS MCINTOSH OF PICKERING]

I put on record that there were 365 million GP consultations in 2021, which equate to about 6.5 consultations per patient. Excluding Covid vaccinations, that equates to over 311.5 million consultations—the same number delivered in 2019. There were 179 million face-to-face appointments in 2020-21, according to NHS Digital. It is also important to state that GP pay peaked in 2005-6 and has fallen every year to 2013-14. It is still not back to the pay between 2004-8, without taking inflation into account. The source for that, again, is NHS Digital.

My concern is the lack of joined-up government in delivering healthcare across the piece. Neither the Department of Health and Social Care nor NHS England rural-proof policy. That flouts the detailed proposals set out by the noble Lord, Lord Cameron of Dillington, in 2015, when our current Prime Minister was the Defra Secretary. Whenever rural-proofing is raised with officials, we are told it is a Defra issue. I hope that it is something my noble friend the Health Minister will take a personal interest in. Perhaps this could be addressed by a House of Lords committee, such as the one sought by the noble Lord, Lord Patel.

The expression “delivering at scale” fills me with alarm and anxiety. Policy which delivers at scale must recognise the challenges of delivering health policy in all its settings, particularly rural ones. For example, do officials understand the lead times to run a vaccination campaign and how this affects a GP workload? GP practices need to order vaccines in November and by January by the latest to run an autumn schedule. There has been much vacillation and incoherent messaging to contractors about the flu and Covid booster campaigns this year. I think that has added to uncertainty in GP practices and to their lack of preparation time.

The preference for large vaccination centres run directly by the NHS does not work in rural areas. Indeed, the National Audit Office reported:

“In terms of delivery costs, dedicated vaccination centres have been the most expensive method at £34 per dose compared with £24 for GPs and community pharmacies. GPs and community pharmacies were the most popular delivery model for all priority groups”.

There has clearly been wastage of valuable medicines in the big centres, which I see as an example of delivering at scale. I argue that it simply does not work in rural settings, where it is extremely difficult for patients living in a rural area to access such a big out-of-town urban centre.

Dispensing in rural areas is often the best choice for those with chronic conditions, and often rural practices dispense because there is no viable pharmacy. This dates back to Lloyd George and national insurance when it was first set up. Dispensing practices receive a disproportionate number of outstanding inspections from CQC, for some bizarre reason. They are often the last public service left in many communities and are highly valued by their patients.

I applaud the work done by successive Ministers for Health, not least my noble friend Lord Bethell, succeeded by my noble friend Lord Kamall, but the digitalisation of the health service in a health rural setting has not been a huge success. There are huge problems of rural

connectivity. Poor broadband and mobile signals hamper delivery of the service and make remote consultations almost impossible. There is no electronic prescription service available for dispensing patients. Recruitment of GPs is difficult but, where they train in rural practices, they tend to stay and become partners.

I argue that the system of drug reimbursement needs to be overhauled to remove perverse incentives so that what is good for patients is also good for the NHS and contractors. I add that the closure of community hospitals in rural areas has put increasing pressure on acute hospitals and, indeed, community nurses. That has exacerbated the situation, as others have set out in this debate.

We need to assess the impact of Covid and the delays in diagnosis and treatment. We need to consider the impact on the morale of front-line medical and nursing staff. I applaud the fact that the Government are looking at the pension cap, which has been addressed by others today. We need to look at models such as that agreed by senior judges, which I think would be acceptable to all parties; that seems a good model to use.

In the briefing preparing for today, I noticed that one concern is that the need for regulatory reform has been extended at the moment only to regulating physicians and anaesthetists. When will that be extended and in what timeframe to, for example, general practitioners and all doctors generally? That goes to the heart of having a positive, cohesive approach.

I have a question for the Minister. Bearing in mind that some 15% of the population live in an area served by dispensing doctors—in rural, isolated, sparsely populated areas—how do the Government intend to deliver healthcare in those settings on the same basis as in urban settings?

I conclude with parity of esteem. My father was appointed as one of the first ever general practitioners in 1948. His brother eventually became a general consultant. He referred to my father rather affectionately as a panel doctor. Until then we end this contest and conflict between hospital consultants and senior GPs, I do not believe we will achieve the parity of esteem that best serves patients and the health service.

1.34 pm

**Baroness Meacher (CB):** My Lords, I too applaud my noble friend Lord Patel for tabling this important debate. As he and many others have said, the NHS is broken; I really do not think that is any exaggeration. The fact is that the demand for GP services has increased over the years, as we know and as others have mentioned. It is incredible when you think about it that between 1990 and 2010 life expectancy increased by 4.2 years. People are living longer with more long-term and complex conditions. Remarkably, over 15 million people now live with at least one long-term condition. Where do these people go? To their general practitioner, so it is no surprise that they are in trouble. The effects of the pandemic are going to be with us for years. Where do all these tens of thousands of people waiting for treatments, assessments and so on go? They go to their GP, who cannot really help them, but they are desperate.

The impact of all this on GPs is colossal, made worse by the falling number of GPs, as the noble Baroness, Lady Finlay, referred to. We now have a downward spiral in primary care as GPs suffer ever greater pressure of work, ever longer days, burnout and the sense that they cannot deliver the quality of service that they wish to for their patients. A growing number are leaving the service or planning to do so—terrifying numbers of GPs are now actively engaged in the business of how and when exactly they will leave the service.

A family member is cutting their hours, as are many others, so, when we talk about the number of GPs, are we talking about full-time equivalents or are we merely talking about heads, many of whom will be working part-time? A family member GP works at a practice with 13 GPs but only three are now working full-time—he himself has cut his hours to six sessions—yet about 10 years ago I believe that all of them were working full-time. Of course, those who are working full-time are working 12 hours a day so they are literally burned out, and I watch that happen.

A common response is that GPs must employ more pharmacists and nurses. That is right, of course, but this has been happening for years and the main problem is that these people are also very hard to recruit. There are not enough of them. The big issue, raised by the noble Lord, Lord Hunt, is of course the inadequate level of prevention and preventive work within general practice even today. I must say that I feel that every general practice should have a dietician to take on the vast numbers of people in this country suffering from obesity, many of whom take up large amounts of a GP's time. Frankly, they need to go to a dietician and get things sorted out. Perhaps that is rather a tough view but it is mine. Another specialism that I feel could take on a lot of work in a preventative capacity is psychological therapy. How many people go to their GP because they are basically a bit depressed, unhappy or whatever it is? Again, if a GP could really make sure that people's distress was being handled, I think that would make an enormous difference.

I want to address a further point. I regard the Pulse proposal to end GP contracts and bring the vast majority of GPs into trusts as salaried doctors as foolish and potentially costly and dangerous. Too often, Governments seek to resolve the problems of the NHS through reorganisation, but this distracts all the managers from top to bottom into worrying about their own jobs, their colleagues' jobs and so on instead of focusing on patients, and the patient focus gets lost. Personally, I would warn against revolution and say that, really, we need to deal with all these things through evolution. As I have said, a lot could be done by bringing in preventive personnel who could alleviate a lot of the problems of GPs. Employ more medical and pharmaceutical staff, psychological therapists, dieticians and nursing staff—definitely, yes.

Also, as the noble Baroness, Lady Finlay, mentioned, the Government need to sort out the pensions crisis rapidly and urgently. I hope that the Minister can give us an update today on what exactly the Government plan to do on this, because very senior and valuable doctors are leaving the NHS every day because of this problem. We cannot afford for this to be delayed at all, so please could the Minister give us some help on that one?

As a Dutch GP who came to work in the UK said recently, GPs are not the problem:

“They are knowledgeable, driven and hard working.”

He said that the NHS structure, secondary care and the media are the problem. I do not know what to make of all of that, but we need to value our GPs—that is what I take from that. We need a serious review and urgent support to ensure the sustainability of the primary care services that we value so highly. I strongly support the proposal of my noble friend Lord Patel to establish a special committee in this House to take on this work.

1.40 pm

**Baroness Hodgson of Abinger (Con):** It is a great pleasure to follow the noble Baroness, Lady Meacher. Like others, I thank the noble Lord, Lord Patel, for securing this debate and introducing it with his usual thorough and considered approach. It is particularly timely, given the recent Health and Social Care Committee report's conclusion that healthcare providers in England are facing

“the greatest workforce crisis in their history.”

We have heard this from many speakers today. A cancer specialist wrote last weekend in the *Daily Telegraph* that NHS general practice had reached the “point of no return” and was “irrevocably broken”, citing that, since 2013, 474 practices had closed permanently, affecting 1.5 million patients.

We hear consistently about the crisis of patients not being able to access doctors, with only 56% of patients reporting that they had had a good experience in making an appointment and 53% saying that they found it easy to get through to the practice on the phone. Most worryingly, the survey also found that 55% of people—up by over 13% over the past year—said that they had avoided making a GP appointment, with the major reason being that it was too difficult.

Many GP practices have taken on the system of triaging patients. Although I understand that this can have some benefits for doctors, it can also be very intimidating. I have had an experience of a very aggressive triaging doctor shouting at me when I was asking for a doctor to come to my very sick elderly mother. It was extremely upsetting, especially because it was followed by a refusal to attend. People who are stressed or unwell are unable to deal with being treated like that, and it creates a barrier to people receiving the care that they should.

As the noble Baroness, Lady Pitkeathley, mentioned, the result of this can be that people give up trying to see their GP and go straight to A&E instead, causing increased overcrowding there, with the knock-on effect of ambulances being unable to discharge patients and then unable to attend other urgent cases. Although we are being urged to stay away from A&E, if patients cannot access their doctor, it may be their only option to get care. There is an enormous loss of faith in GP services. A British Social Attitudes survey found that, since 2019, the proportion of patients who were satisfied with their GP services has plummeted from 68% to 38%, the lowest level on record.

It is clear that GPs are also feeling hugely under pressure. A report published by the Health Foundation charity paints a picture of high stress and low satisfaction

[BARONESS HODGSON OF ABINGER]

with workload among UK GPs. Just one in four UK GPs are satisfied with the time that they are able to spend with patients—appointment times are among the shortest of the 11 countries surveyed. As we heard, only one in four GPs in England is now working full time, and most GPs work three days a week or fewer.

Although I am sure that the pandemic has exacerbated this situation, the cracks were there before. One of major things that has gone wrong is that many doctors now do not know their patients. There is enormous benefit in knowing your GP, especially for the elderly, those with small children or those with serious and ongoing health issues, and it makes it much easier for GPs to treat them. I accept that that is not always the case for younger and healthier people, who may need to see their GP very infrequently.

Last year, a Norwegian study published in the *British Journal of General Practice* demonstrated this. It showed that those who had the same doctor for between two and three years were about 13% less likely to need out-of-hours care, 12% less likely to be admitted to hospital and 8% less likely to die that year, rising to 30%, 28% and 25% respectively after they had had the same doctor for 15 years. Meirion Thomas, whom I referred to earlier, highlights that continuity of care is crucial in early cancer diagnosis. Survival rates in the UK lag behind almost all comparable high-income countries. Recent research has shown that 37% of patients with cancer in the UK present in A&E with acute symptoms and with advanced disease associated with a poor prognosis.

The Norwegian report stated:

“It can be lifesaving to be treated by a doctor who knows you”.

Smaller practices delivered this—yet, in the UK, the trend has been for GP practices to become bigger and pool their patients, thus eroding the relationship between doctors and patients. Although patients over 75 in the UK are given a named doctor, some doctors interpret this as just having to look at the patient’s records. Although I understand that patients who wish to be seen urgently cannot always see their GP that day, it is impossible for a doctor to be responsible and deliver appropriate care for a sick elderly patient without ever meeting them. Older GPs say their job satisfaction came from knowing patients, often whole families, and caring for them through the years. Yet so many doctors training as GPs then leave or work as locums because the pay is much better and there is less form filling.

The job has changed in other ways too. The head of the Royal College of General Practitioners recently said that family doctors were working at an intensity that was “unsustainable”, leading to many cutting their hours or taking early retirement—other speakers have referred to this. I gather that, on average, a doctor is asked to deal with 40 patients in a day, with some GPs being asked to see closer to 50. Apparently, GPs feel that the right number is probably around 30. This overload is leading to burnout and early retirement, as we have already heard. The Royal College of General Practitioners has said that 65% of GPs say patient safety is being compromised due to appointments being too short.

What can we do to improve all this? We had much better primary care 20 years ago; the damage started in 2004 with the change in the GP contract. We urgently need a system that works both for patients and doctors, but a health system needs to be patient-focused. As the noble Lord, Lord Patel, said, this is about caring for people. Training more GPs is perhaps an easy answer, but people also need to be encouraged to look after their own health so that they have fewer visits to a doctor and are healthier for longer—prevention is absolutely key. Health checks are very important. We should also include mobility checks. People who cannot exercise well can tend to put on weight, leading to diabetes and heart problems, and checks would also help the prevention of hip and knee problems.

I welcome the new women’s health strategy for England, which will tackle the gender health gap and improve the health and well-being of women and girls. We must make it advantageous for doctors to work in a practice rather than being a locum. We need to cut down on the number of patients they are asked to see daily, and make the job more enjoyable and satisfactory for them—less stress might encourage more to work full-time. We also need to encourage doctors to know their patients again; the system works best when doctors know their patients and patients have faith in their doctors. This will lead to better outcomes and help ease pressure on the whole system. If that is the case, Zoom appointments and phone calls—which can cut down on time—can be beneficial, but if a doctor does not know their patient, it is much harder to treat them satisfactorily in this way.

The NHS app is excellent for things such as repeat prescriptions. Could modern technology do more to remove some of the bureaucratic functions and form filling? Practice nurses should be able to deal with more conditions, while qualified pharmacists could give a wider selection of medication without a prescription. Community nurses are a huge asset, and we need to ensure that doctors work closely with them. Mental health takes up more and more time: are there better ways of dealing with this, rather than endless medication? In addition, we should encourage people with certain conditions not to go first to their GP—for example, those with back pain should go to a physiotherapist, osteopath or sports therapist, and people should go elsewhere for sight and hearing checks.

It is urgent that primary healthcare works better for patients, as well as being a job that is once again enjoyed by doctors. Bold steps need to be taken. I absolutely support the suggestion by the noble Lord, Lord Patel, of setting up a Select Committee to look at this. If we can once again restore primary healthcare, it will greatly ease the whole health system and deliver better outcomes.

1.49 pm

**Baroness Watkins of Tavistock (CB):** My Lords, it is a pleasure to follow the noble Baroness. I congratulate my noble friend Lord Patel on securing time for this important debate and support his proposal for a special committee. I declare my interests as a registered nurse and as president of the Florence Nightingale Foundation.



Other noble Lords have spoken about the medical workforce—in particular, general practitioners—and the need to invest in dentistry services. I will focus on the multidisciplinary teamwork in general practice and community care, with a particular emphasis on nurses, midwives and health visitors. In England, the primary care networks have enabled some community nurses and GP practices to work closely together at a local place level. This is building on a successful neighbourhood model that has been in existence for many decades. However, as briefing from the Queen's Nursing Institute reminds us, a one-size-fits-all model does not apply because of the variety of geographical neighbourhoods—including rural and urban communities—and the different needs within those communities.

The Fuller stocktake report referred to by other noble Lords gives good examples of where services work closely together, successfully emphasising that the focus in both community and primary care should be on good outcomes for patients, not a one-size-fits-all approach for the sake of administrative uniformity. It is for that reason that the local integrated care boards should ensure that local practitioners, in partnership with the people they serve, are closely involved in determining the shape of local community services. It is widely recognised in government that there is a significant workforce shortage in the NHS, including in primary and community care. Yet everything points to the need for more care to be delivered in patients' homes and in community settings, and this must be considered in workforce planning.

It is particularly vital that we educate more qualified specialist district nurses to lead and manage teams in the community. This in turn links to patient safety and quality outcomes. Similar investments are necessary in the mental health and learning disability community nursing services. Our extremely esteemed colleague my noble friend Lord Kakkar, who is a surgeon, defined this very accurately in his speech, so it is a pleasure to agree with him. There is significant untapped potential in the nursing workforce and many other healthcare professions including, for example, physiotherapy and occupational therapy. All healthcare professionals should be encouraged to use the skills and knowledge they have to the highest level of practice for which they have been educated. Instead, many feel frustrated that they are not enabled to work to their maximum potential. We need to be clear about career development for healthcare professionals working in community settings. This would aid retention and develop more independent and professional practice, meaning that many patients with long-term conditions would need to be seen by GPs only when their healthcare status changed significantly.

It is argued that the first 1,001 days from pregnancy to the age of two are a period of unique rapid development which lays the foundations for a child's lifelong mental and physical health. Midwives, who lead interventions, including support with breastfeeding, smoking cessation and parental emotional well-being, have a positive and far-reaching impact on a child's subsequent health development and life chances. The reverse is also true, and it is often during pregnancy that families get locked into the intergenerational cycles of inequality. For example, babies born to families on lower incomes

are significantly more likely to be born underweight, have higher risks of mortality and experience of developmental problems.

The latest NHS workforce figures for England show that there were 541 fewer midwives in June 2022 compared with 12 months earlier. The drop in numbers was particularly pronounced in the north of England—evidence of the need to level up. The most recent Office for National Statistics figures show that 11,000 more babies were born in 2021 than in the previous year, so we have fewer midwives yet more births. The Institute of Health Visiting estimates that there is a shortfall of 5,000 full-time equivalents in England—a loss of over a third since 2015. It is worth noting that there were 536 child serious harm events in 2020-21 including, sadly, some child deaths. This was an increase of nearly 20% on 2019-20.

The health visitor performance matrices from August 2022 show that the lowest-performing local authorities had 4.2% of new birth visits within 14 days and 5% of two to two-and-a-half-year reviews, against the highest-performing local authorities, where the figures were 99.3% and 100% respectively. This means that, in some parts of the country, almost all children receive a two to two-and-a-half-year review whereas, in others, fewer than one in 10 children is assessed by health visitors for what are deemed to be mandated contacts. This kind of postcode lottery should be of significant concern to us all. Health visitors make a difference through improved identification of children with developmental delay and vulnerabilities by supporting families through early intervention and thus improving outcomes.

Does the Minister agree that it would be helpful to harness the skills and experience of all clinicians in the delivery of public health and to locate health and care services in easily accessible and prominent community facilities? This would enable healthcare teams to work closely together and make preventive care easily accessible to all. Early intervention is not only crucial to the health and well-being of families and children but good for community cohesion and economic productivity, as well as leading to savings in the cost of unemployment, crime and mental illness.

Finally, I turn to information from the Royal College of Nursing. In June this year, it reported that over half of nurse respondents in primary care said that there were insufficient nursing staff to safely meet the needs of their patients, and two-thirds said that the skill mix was not appropriate to meet the needs and dependencies of the service users and patients effectively. With advanced skills, registered nurses in primary and community care should be able to lead care for patients who have received accurate diagnosis and treatment plans from GPs and/or hospital consultants. Safely delivering high-quality care improves patients' outcome and reduces readmission to hospital.

Key to patient outcomes are the structure and processes of health and social care services—and, I would add, housing. Investment is urgently needed to improve the digitalisation of patient records and test results in primary care. Patients want effective healthcare delivered by compassionate, professional, trained staff and to understand their treatment, which assists them in adhering to their own personal care plans. The latest idea

[BARONESS WATKINS OF TAVISTOCK] in general practice is to be told, “You’ve had this blood taken, but if you don’t hear from us then everything is fine.” None of us trusts it, to be honest.

Local integrated care boards should be involved in planning the most appropriate structures and processes of services to meet their local need, but must also be mindful of ensuring uniformity of access to NHS-funded services in England; I recognise that not all services have to be delivered directly by the NHS. Access to community-based physical and mental health services is as important as the right to an operation or emergency care following an accident. Can the Minister assure the House that this aim will be supported by the Government to improve patient outcomes and reduce the disparity of access to primary and community services in England?

1.58 pm

**Baroness Brinton (LD):** My Lords, it is a pleasure to follow the noble Baroness, Lady Watkins, and to hear the voice of the nurse talking about their important role within primary and community care. I also congratulate the noble Lord, Lord Patel, on securing this vital debate: I cannot think of a better champion to talk about reform of medical services—I will not use the word “NHS” because I think “medical services” is what we are discussing here today. I thank all the organisations that have sent us briefings.

Like the noble Baroness, Lady McIntosh, I want to go back to 1947-48. My husband’s grandfather was a general surgeon at Huddersfield Royal Infirmary, as well as being a GP and a qualified pharmacist. He had to make the choice in 1948 and he chose the hospital. It was right for him. An amusing side note is that after his death, when we were clearing his house, his entire pharmacy was in the attic, in those glorious 19th century-type glass bottles. He took his joint role very seriously. One thing that has happened to general practice over the last 10 to 15 years has been the beginning of general practice specialisation, which is almost inevitable because of the specialisations of hospital doctors as well. I think that, although I have not heard much discussion of it, we should focus on that as well.

Primary care is the bedrock the NHS but, Cinderella-like, is often out of the limelight while providing that first point of essential contact for a patient, be it with their GP, the practice nurse or the healthcare assistant. But what is primary care? Always, the public will tell you that it is the GP, but we have heard in this debate today that it is so much more. It is community nurses; it is physiotherapists; it is occupational therapists; dentists; end-of-life care practitioners; health visitors; school nurses; and those who provide support to people with long-term conditions. And, of course, it is the invisible support staff who back them all up.

But primary care is broken and too many of those working in it are at breaking point too. The noble Baroness, Lady Finlay, helpfully laid out the real problems in her contribution. The noble Baroness, Lady Hodgson referred to some research. Unfortunately, research by GP Online, published in January this year, showed that GPs were completing 46 patient contacts a day, and the corresponding admin work that goes with it, which is 84% more than the 25 daily contacts

recommended as a safe limit. Ministers have complained frequently, including during the recent leadership campaign, about too many part-time GPs, but that research also showed that, because of the 30% increase in paperwork over the last five years, most GPs are working 12 to 14 hours a day: that is one to three hours extra at the end of the day on admin alone, as routine, as well as being on call. One GP, responding to a publication of this survey, said, “It’s awful, it’s unbearable, there is too much to do to get it all done safely and if you try to be efficient, patients complain. I’m shattered and there is just no stopping the demand.” The noble Baroness, Lady Meacher, spoke movingly about the increasing number of GPs leaving. This is why.

I come back to the more general strategic issue, outlined so well by the noble Lord, Lord Kakkar, who gave us an overview of the crisis facing us. The service has changed; the funding has changed. Twenty years ago, when Governments of all colours started to reduce the number of hospital beds on the grounds that people did not need to stay so long in hospital, which is absolutely right—although demography needs to be taken into account, and they have gone beyond that point—what failed to happen was an understanding that recovery time and support is needed in the community, and there was no corresponding increase in support, finance and reframing of primary care services. That is one reason we have the problem that we do.

The noble Baroness, Lady Masham, raised the issue of sick notes, and perhaps reforms are needed there. I make the point that that is one of those admin jobs that has increased and grown. It may be that we have to review how sick notes are dealt with.

The noble Viscount, Lord Eccles, talked about his experience of community care and said he was given no explanation of why it happened. I have to say, from a recent discussion with a person awaiting an assessment of care adaptations that would be needed to their home as their long-term condition was worsening, that no explanation was given other than that they would have this appointment. That individual was terrified that their house was going to be changed out of all recognition for things they did not want to happen. When they actually had the assessment, their life was transformed, but the difficulty was that for the three weeks between being told that someone was going to come and make changes to their home to the point at which that happened, the communication was not good enough. But I suspect that that is because the pressure on the service as a whole means that in a five-minute appointment, you cannot explain.

The noble Baroness, Lady Pitkeathley, was absolutely right to focus on carers, whether paid or familial. Yet again, communication to patients is vital. I agree too that social care is not fixed: it may be that the money coming in is now being paid from a different source, but where is it going to go? How are we going to improve the workforce in social care and the support? Familial carers are currently having to pick up extra burdens, such as the increase in virtual wards at home that we were discussing in an Oral Question just a day or two ago. In all the discussions, there has been no mention either of the extra support for familial carers of virtual wards or of primary care support, which

must inevitably grow. So I ask the Minister: will there be support for primary care with the increase in virtual wards?

The noble Lord, Lord Farmer, spoke of family hubs and the inverse care law: I think that was very powerful. I hope—as the noble Baroness, Lady Pitkeathley, said—the “not invented here” syndrome and not learning from excellent practice elsewhere will change within the NHS.

The problems in dentistry absolutely speak to the issues that GPs are beginning to face. Net government spend on dentistry in England was cut by over a quarter between 2010 and 2020. Over 40 million NHS dental appointments have been lost since the start of the pandemic, and 91% of NHS dental practices were not able to accept new adult patients, mainly because of the problems with the contract. That is a real issue because—as with primary care, particularly rural primary care—when there are inequalities, it is much harder to access those services.

The noble Baroness, Lady Hodgson, spoke of the effective triage systems that are needed, and also how it can happen very poorly. She spoke powerfully about the need for patients to know their GPs. I absolutely agree with that, which is why I am concerned. The noble Lord, Lord Bethell, said it: we do not need a certain number of GPs; what we need if we are reframing services is the right number of GPs to be able to support the population. It is all about the needs of patients and what we are expecting GPs to do, while accepting that technology is going to play a part and that support staff and other healthcare professionals will have an increasing role. If we start the discussion about reforms by saying we can manage with fewer GPs, we are deluding ourselves.

I do not think I have heard anyone mention the role of expert patients. I am lucky to be such an expert patient. I have a long-term condition; I have done the course—tick. I have to say that that has transformed my relationship with my GP and other staff. Hospitals often do not understand it: I was told once by a consultant when I had a temperature and had gone in that I knew too much about my disease. My specialist soon put him right, I have to say. But my GP surgery completely understood.

So we do need reform. We need to start afresh. Let us accept new technology and other roles, but the key issue must be that primary care remains free at the point of access, available as needed, with signposting and education for the public. The post-pandemic period is a good time for this, because the public have accepted changes. But we must have real investment in doctor training, campaigns to encourage GPs to come forward and, above all, we must get to grips with the current crisis so that we do not lose more of our really valuable primary care staff.

2.08 pm

**Baroness Merron (Lab):** My Lords, I also congratulate the noble Lord, Lord Patel, and thank him for bringing this debate before your Lordships’ House, which he did with his customary attention to detail, but also searing analysis of what is before us today. This has indeed been a very sobering debate, and I hope it will be of use to the Minister and also to the new Secretary of State, who of course we wish well in her endeavours.

The noble Lord, Lord Patel, spoke of primary and community care as the bedrock of the health and social care services, and indeed it is the door through which most of us enter when we are seeking to access health and community care. However, our access to it and its suitability are deeply affected by the lack of co-ordination, resources, staffing and planning, as we have heard during the debate.

Dissatisfaction is running at an all-time high. This is not only a bad thing in itself but it affects confidence in the system. It is of increasing concern that those who should be making contact with their local GP are simply put off from doing so because they cannot access the service they require, not least because getting an appointment is beyond them, or so delayed, or difficult. This is not how it should be.

My noble friend Lady Pitkeathley hit the nail on the head when she reminded your Lordships’ House that people do not know or care who provides services; they just want the right service, at the right time, in the right way. People need to be seen as whole people and not only according to the bit of the system that is seeking to treat them. I think there is a very strong message for the Minister about the organisation of health and care services being around individuals and all that comes with them, rather than the other way round.

There are critical backlogs in both the sectors we are considering. There are some 1 million people waiting for care services within the community. The backlogs are a key factor in the dire ambulance delays that we are seeing, and they are added to by the number of patients who are in hospital beds when they should be in their own beds, either in their own homes or in a care setting—something about which the noble Baroness, Lady Masham, spoke so clearly.

The Community Network, which is comprised of organisations including NHS Providers and the NHS Confederation, has called for the Government to treat waits in the community sector on an equal footing to backlogs in the acute hospital sector, including through the development of a plan to address these delays as well as accelerating work to improve the quality of national data collections in community care. Could the Minister confirm whether the department has explored this option, because it would be a helpful way forward?

The noble Lord, Lord Kakkar, was right to put down a challenge to how systems are organised and about whether hospitals are the right place—the best place—for dealing with chronic conditions when there is so much opportunity to deal so much better with a number of these closer to home. I hope the Minister will reflect on this.

It is the case, as we have discussed so many times, that the issue of the workforce comes up time and again. We know that there is an increasing volume and complexity of demand, a rapidly aging population and, with that, huge workforce shortages. I must repeat the call for a long-term workforce plan to address what is a stark situation. Failure to address this will only exacerbate the backlogs and health inequalities still further.

The response so far has been disappointing, as we saw in the passage of the Health and Care Bill. This is not just about numbers, important though they are.

[BARONESS MERRON]

It is also about what staff do, and whether we have the assessment available to make a judgment as to whether we have the right range of staff, as the noble Baroness, Lady Watkins, referred to, to make sure that they can be available to meet peoples' needs.

Although it is welcome that there are, as we have heard, additional roles to be developed and additional staff to be made available to work in primary care networks—including pharmacists, physiotherapists and link workers—and it is welcome that there is to be recruitment, there is a gap: how will general practices implement a multidisciplinary model of care, either within or across practices, which will embrace these roles? This is lacking, as we have seen from the King's Fund investigation into this issue, and it is leaving staff isolated and demoralised. How will this be dealt with beyond recruitment? How will these additional and new roles come into play?

How will the fact that appointments are getting ever more difficult for people to get be dealt with? A GP Patient Survey found that only 56% have reported having a good experience of making an appointment, and there are early signs that the pressure on GPs is affecting patients' experience of their appointment even when they actually do get one. Similarly, the British Social Attitudes survey showed that satisfaction with GP services fell to 38% last year, which is the lowest level ever recorded. What will be done to address this problem?

On GP numbers, my noble friend Lord Hunt again raised the important question about the reduction in GP training places. What is the thinking on this reduction? How does this square with the expectation that we need, and are told that there will be, greater numbers of GPs?

Improving access will require actions from across the health and care system, and it is critical that integrated care systems and their partners consider how they will provide support to general practice to improve access in the short term. How will this manifest itself within the new integrated care boards?

As we know, and as the noble Lord, Lord Bethell, referred to, the pandemic accelerated new ways of working, including a rapid uptake of existing digital tools to deliver patient care. While this has benefits for patients and staff, there is a proportion of the country who are digitally excluded or who have needs that make digital access less appropriate for them. How will this be addressed so that nobody is left behind?

Finally, I refer to the proposal from the noble Lord, Lord Patel, for a special Select Committee to take forward how we can address the lack of co-ordination in the primary care sector. I hope that the new Secretary of State will consider this worthy of consideration, because there is no doubt that the debate today has shone a very clear light on the fact that we need to step back, make the change and build the system around the needs of the patient, and not the other way around.

2.19 pm

**The Parliamentary Under-Secretary of State, Department of Health and Social Care (Lord Kamall) (Con):** My Lords, before I begin the response to the noble Lord, Lord Patel, and other noble Lords, I am sure that all

noble Lords will be concerned by the news from Buckingham Palace about concerns over the health of Her Majesty. I am sure that the thoughts of all noble Lords are with Her Majesty and her family at this time.

I begin by thanking once again the noble Lord, Lord Patel, not only for introducing this debate but for our many conversations and his advice. In fact, he has given me so much advice, I sometimes think about calling him "uncle". It has all been part of my learning—understanding the processes and the whole range of our health service, as well as some of the challenges. That was very well demonstrated in the noble Lord's opening remarks and in some of the issues he has raised with me over time.

What has been interesting in this debate is that lots of people have different views on answers. We agree that there are problems and that they have to be fixed, and we want to see better integration. Some say that we need a revolution; others say that it should not be a revolution but evolution; and others would criticise evolution as piecemeal. We have to be very careful about that. Some say GPs are central to primary care; others say that it should be not only GPs but a range of workers. In fact, a number of GPs complain that they spend far too much time on things that could be done by other professionals in their practice.

The noble Baroness, Lady Watkins, rightly said that we should be careful about a one-size-fits-all approach and trying to suggest or impose one model that would work everywhere. It has to be community led, in many ways. In answering, it is really important to address these issues. I suppose the final debate we had was of some saying that we need a clear distinction between primary and secondary care, and others saying that we do not, as the lines are blurry and what is important is that patients are able to access the health and care services they need. All of that is part of this whole debate, which I found fascinating.

The noble Baroness, Lady Pitkeathley, reminded us that we are now talking about an integrated health and social care system. It is absolutely right that we look to make sure that its social care aspect has parity with the rest of health. I pay tribute to the noble Baroness for consistently reminding me and the Government about that.

We all agree that primary and community care are essential services. As a Government, we recognise that they are under significant pressure, as do noble Lords. My noble friend Lord Eccles asked why this is. There are a number of reasons. At the moment, we have more doctors and nurses than ever before but, as many noble Lords reminded me, demand is outstripping supply. Think about our awareness. During the passage of the Health and Care Bill, we spoke about the importance of mental health and about it having parity. Think about how seriously we took mental health only 30 years ago: many syndromes—post-traumatic stress disorder, for example, and others—were not even recognised until the 1980s. Before then, people were just told to pull themselves together or have a stiff upper lip. Now we recognise how important it is to tackle people's mental well-being.

Some noble Lords will remember a debate I took part in recently on neurological disorders. When I asked my team for a briefing, I asked them to list all

the neurological disorders so that I could understand this. They said, “Minister, do you realise that there are 600 of them?” Imagine that awareness of 600 disorders and how many people are needed right across the country. That shows the challenge we face in demand outstripping supply. It also highlights one of the points behind the question from the noble Lord, Lord Patel: given that all this demand is outstripping supply, is it really appropriate to continue with a model from 70-odd years ago, as the noble Lord, Lord Kakkar, rightly said? The debate we are having is on whether it should be revolution or evolution, and how we ensure it is patient centred.

Another important point mentioned by a number of noble Lords was prevention. It should not be about waiting for people to get ill and then, hopefully, curing them; it should be about prevention in the first place. Individuals, bodies and organisations can all play a key role in that. As the noble Baroness, Lady Brinton, said, it is right that the voice of patients is heard. No one should ever say again to the noble Baroness—I would not dare to—that patients know too much. We want patients to have a partnership with their health and care professionals, so that they understand the issues and so the patient feels valued and understood—a number of noble Lords mentioned this when it comes to named GPs, for example.

It is critical that we look at prevention. That shows that it does not always have to be the GP. I am sure that if the noble Lord, Lord Mawson, had been here, he would have talked about the Bromley by Bow Centre and how there are a range of skills and individuals there. It is not about only the GP but about making sure people have healthier lifestyles. I think the website of the Bromley by Bow Centre and others is about creating health. In his book, *Turning the World Upside Down*, the noble Lord, Lord Crisp, says that we have to shift away from cures to prevention, not just curing people but creating health. We have seen a lot of progress in the thinking about how we get that into the system.

I will respond to some of the general points that a number of noble Lords made. To draw again on the noble Lord, Lord Crisp, he said that we should also look to other countries. We have this view—not just the United Kingdom but the whole western world—that the rest of the world can learn from us. However, as he said, if you go to some of these countries which have challenges such as resource challenges, they have some very innovative solutions. Some of them have defined completely new roles which would not be recognised here. These people are trained for shorter times and are more specialised, and although the doctors’ lobbies in those countries have railed against them, he said that it gives you effective outcomes. Perhaps we have to look at some of the traditional roles, such as doctors and nurses—we are seeing physicians’ assistants, for example, and specialists. I hope that the rest of the medical profession will be open to completely new hybrid roles, which are not the same as those of 70 years ago.

My noble friends Lady Hodgson and Lord Eccles talked about the right to see a named GP. We understand that, but not every patient will want a named GP. We have to get the balance, because the technology gives us a better service but it is not just about that; it is about people’s first interface. They want to speak to

someone who understands their condition. Clearly, however, in other cases it will be important to see a named GP. At the moment, all practices are required to assign their registered patients to an accountable GP but, as my noble friend Lady Hodgson reminded us when we debated the Health and Care Act, that does not mean that the individual always responds. In theory, they should be responding, so one thing we want to look at in more detail is why that is not happening in many places.

A number of noble Lords, including the noble Baroness, Lady Finlay, talked about how we are growing the GP workforce. There are concerns. One of the things I promised in previous debates—I have not had the answer yet; I hope I get it before I leave office, whether that is this week or whenever—is on this cap on training numbers. Yes, we are training more GPs, but at the same time we are losing an awful number of them. Programmes on retention are in place, and the issue of pensions is clearly important. Sadly, I am not able to update the noble Baroness, Lady Meacher, on this; I have asked the question but, let us put it this way: discussions are taking place with another government department. When I worked in other areas of commerce and elsewhere, quite often people reminded me that the price of acquisition is often more expensive than the cost of retention, so we should be investing in the retention of people who still want to work. However, we do not want any of these artificial retirement dates; people are all living healthier lives. We are increasing the number of trainees but we also have to look at morale and retention. A number of proposals are there, but how do we make sure that they get out?

The GP business model is changing—it should not be one size fits all. I talked about the Bromley by Bow Centre; I speak to some GPs who are concerned that their practice is seen as too small. They say, “I am under pressure to go into a practice, but I give a personalised service and I worry about the service we are getting.” At the other end, you get these large health centres that are taking on some functions which were previously secondary care. I understand that challenge, therefore we agree that the primary care entry point should be about multidisciplinary teams. It should be making use of the best capacity we have and looking at alternative sources of expertise, such as dieticians, a physiotherapist or social prescribing, which a number of noble Lords mentioned during the passage of the Health and Care Act.

We made an announcement in July about reforms to dentistry. These are not the complete reforms; there are still conversations around the UDA, for example, and what is felt to be fair remuneration, but we have at least made some progress in those conversations and now have a collaborative discussion. For some people, that is not enough and we have to speed up; I completely understand that, but at least we are making some progress. Up to now they have just been at loggerheads, and we have had others saying, “You’ve got to look at the UDA, which is the source of all these problems.” We are now looking at that, and I pay tribute to the BDA and others for those collaborative conversations.

My noble friend Lady McIntosh of Pickering always raises the issue of rural practices—and rightly so; it is critical that we are reminded of it. We recognise that

[LORD KAMALL]

there are issues with retention in certain areas, and one thing we have been doing with the new medical schools is understanding that people are more likely to stay where, or close to where, they are trained. That is why we have been looking to open some schools in those areas. That will not solve everything. My noble friend also talked about rural connectivity. That issue is widely recognised at the top of the NHS, which is looking at connectivity to be managed locally and the availability of networks. I had a meeting earlier this week with a number of different suppliers on telecare. The meeting was about the switch from analogue to digital, but an issue that came up was the poor provision in many rural communities. One conversation we must have is with the broadband suppliers. Fortunately, technology will fill in a lot of this—we are seeing the cost of satellite coverage dropping and more support for fill-in systems—so I hope we will be able to improve on that. We want to recruit more people in rural areas.

Let me just make sure that I have tackled all the points raised. The noble Baroness, Lady Masham, talked about the steps to discharge patients. It is the Government's priority to make sure that people are safely discharged. The moment the previous Secretary of State came into office just before the summer, he got together the heads of the various parts of the NHS and spoke to particular trusts and said, "What can we do to clear the pipeline to make sure that people can leave quickly to the community, and what challenges are there?" I know that my new boss, my right honourable friend the Secretary of State for Health, will look at that.

A number of noble Lords raised the issue of seeing a GP in person, and technology. One challenge we have had is that sometimes there is too much technology. We want the NHS app to be the gateway. The noble Lord, Lord Patel, referred to the recent report by Policy Exchange, and I thank Policy Exchange and the other experts who sent us all notes to help us with this debate. When you go on the NHS app, you can, in theory, book an appointment—but you cannot. Then I go to my GP's website, which says, "You can book an appointment", but when I go to book one, it says, "You can't book that appointment; you have to phone us up." Then we get back to the problem of 8 o'clock in the morning—and not just Monday, but all the way through the week.

One very sensible question is why you have to phone that day for the appointment. Can we look at a way to ensure that you can book today for up to, say, seven days in advance? We have gone backwards. When I was ill as a child, my mother could pick up the phone, phone the local GP and if they could not see you that day, if it was not that urgent, they would say, "How about next Tuesday?" How do we get back to that situation? We are still trying to understand those challenges and why that cannot be done. It says on the website that you can book an appointment, but when you press it, you cannot do so.

We are trying to make the NHS app the gateway. If I get an appointment at my local hospital, I think, "Oh great, I will just look at the appointment on my NHS app." It does not appear there. I then get a text from that hospital that says, "Please go on to our portal."

So I have the NHS app, my GP website and my hospital website. This is the challenge. They have all said, "Yes, we want technology", but it is about the processes behind that. On top of that, we all have to know how to make sure it works and to plug the gaps. I was asked to go to have an ECG at a primary care centre. I thought, "That's very clever. Good, that works much better", and was told that the consultant would phone me a week later for a conversation. I am quite relaxed about having a phone consultation, but when the consultant phoned me a week later and started talking, I asked, "Sorry, did you see my ECG from last week?" He said, "What ECG?" Then I said, "I tell you what, I can tell you the exact time and date, you can get it and then we can have the conversation." He said, "Oh, don't worry about that, I will make a new appointment for you." We can have all the technology in place, but how do we ensure that the people processes are in place too?

This shows that we all have a role to play in this. The noble Baroness, Lady Merron, often brings up, rightly, the amendment on workforce planning. We talked about this during the debate. There is local-level workforce planning in the ICS. Individual practices and centres have their workforce planning. Many noble Lords will know that regarding the long-term, the department commissioned Health Education England to look at and report on those drivers. We have also commissioned NHS England to develop the long-term workforce plan for the next 15 years, including long-term supply projections. Also, under the Health and Care Act 2022, the Secretary of State has a duty to report every five years at minimum describing the NHS workforce planning and supply system. A lot is being done on workforce planning. One reason we did not accept the amendment at the time was the timeframes, and whether they would change between one report and another. We wanted to look at it in the long term, and for it to come from the NHS and to be from the bottom up.

I have gone on for far too long, but I really hope that this debate has shown everyone not only that all political parties are committed to reform but that at the same time, we must ask ourselves some very big questions. In some ways, it is a valid criticism that we are tinkering with a system that was designed 70 years ago. We must evolve a system rather than tinker with a system. We must tackle the supply of workforce, and we must look at the roles as defined today and whether there are newer roles. Can we learn from overseas, from some of the new roles that are defined elsewhere? Is everyone ready for change? Sometimes, I am not entirely convinced that every player in this system is ready for change. I have had GPs say, "I can take on more patients in my area, but the problem is that the system does not incentivise me to take on a patient elsewhere. They must deregister then re-register with me." I hope that some of the primary care network initiatives we have will help that, but we all must accept that the current system has just been tinkered with for the last 70 years.

I am not necessarily concerned about the distinction between primary and secondary. It is important that the patient speaks to the right person when they need to, whether in person or remotely, and that they get the right follow-up care. I have had conversations

about the model with the noble Lord, Lord Patel. As it is, if you can see a GP, you get five to 10 minutes. Noble Lords rightly expressed the pressures of that. You then hope for a referral. There must be a better way. Some patients are voting with their feet and getting direct referrals to consultants, and others are not. We do not want that two-tier service. We want everyone to have the same access.

The Government must do more. We clearly understand that. Maybe we are not doing it quickly enough, but we must look at the whole system and the roles as defined, while ensuring that it is not “one size fits all”. What is appropriate for one area and one population is not the same as what is appropriate for others. One of the really interesting things that the noble Lord, Lord Crisp, said, when talking about community workers, was that these are people who know about 120 people in their location. They know the families, they are trusted, they go out and knock on the doors of families to ensure that they are all right and help them with their diets and lifestyle. That is being tried in a couple of wards in London. We look forward to the results, but it might be revolutionary in terms of prevention.

I thank the noble Lord, Lord Patel, and all noble Lords. There were more specific questions that I did not answer. I will read the *Official Report* and write to noble Lords in response to those questions that I have been unable to answer today.

2.39 pm

**Lord Patel (CB):** My Lords, at the outset, I respectfully associate myself with the Minister’s comments and wish Her Majesty the Queen well.

I thank all noble Lords who spoke, and the Minister in particular for taking the debate and answering at length. Your Lordships spoke not just with passion but with real research behind it in finding out what the problems are with primary and community care. I hope the Minister got the information he needed, as was highlighted by everybody.

It was striking that in this debate, unlike others, no speaker tried to get at the government policies. There were no combative speeches; they all tried to help resolve the problem we now face in primary and community care, which must urgently be fixed. There is one message I suggest the Minister takes back to his ministerial colleagues—by the way, it is a good idea that they and their advisers all get a copy of today’s debate. In his meetings with his colleagues, the Minister should highlight the important issues that were raised today. I still say that primary and community care are in intensive care; if we do not rescue them soon, they will die. The problem will not be worse any more, because it will not be there.

I could summarise every speech, but I will not do that. They all made very important points. I say to the noble Viscount, Lord Eccles, please keep coming back; as the noble Baroness, Lady Hodgson, said, you are not past your sell-by date.

I ask the Minister to take this matter seriously. We hope the new Secretary of State recognises that primary and community care need fixing. I appreciate all the support I had for my proposal for a special Select

Committee and hope the Liaison Committee listened very carefully. I thank noble Lords for today’s debate and for contributing; I appreciate it very much.

*Motion agreed.*

## GCSE and A-level Results: Attainment Gap

### *Question for Short Debate*

2.43 pm

*Asked by Baroness Armstrong of Hill Top*

To ask Her Majesty’s Government what assessment they have made of the GCSE and A-Level results on the widening gap in attainment for children and young people in the North East of England compared to those in the South of England.

**Baroness Armstrong of Hill Top (Lab):** My Lords, I too associate myself with the wishes and prayers that people have for the Royal Family.

I submitted this topic for consideration, albeit in a short debate, because of my serious concern about the increasing number of vulnerable children in the north-east of England. The widening gap in attainment seen in the recent secondary school results exemplifies this.

Many organisations have done work on this and much research has been done on regional disparities. I do not have time to go through those statistics and all the different views, but I thank those who briefed me and are so concerned about this. It is clear from all of it that disparities arise not because children themselves are less bright. As I have said all my political life, I have not seen that children from the north-east are thicker than those in the rest of the country. Therefore, we have a responsibility to address why they end up the way they do, with much poorer attainment and more vulnerability than is appropriate or necessary.

What, then, explains this? The gap in A-level achievement between the south-east and the north-east has widened from 5.3% to 8.7% between 2019 and 2022. The north-east had the lowest number of students achieving A\* and A grades at A-level—only 30.8%, compared with 39.5% in the south-east. We have to ask: what is going on? What leads to this?

The Northern Powerhouse Partnership says that we need to look at three things. The first is long-term deprivation and child poverty. Shockingly, the proportion of children living in relative poverty has risen more in the north-east than anywhere else. We had got it on a downward curve, and it was at least stable for a couple of years with the new Government post 2010, but since 2014 it has risen from 26% to 38% of children in the region living in relative poverty. I find that shocking in today’s world. This reflects not just unemployment but a low-wage economy, where families with only one earner are living below the poverty line. That affects the children.

Research shows that the intersection between long-term deprivation and certain ethnic groups, including white working-class children, is the strongest predictor of low attainment. The north-east has double the national

[BARONESS ARMSTRONG OF HILL TOP]

average of pupils in these high-impact groups. That is why the allocation of funding for public services, in particular education, should reflect levels of deprivation, not political preference.

The second problem that has been identified is Covid and the pandemic. Pupils in the north-east missed 15.3% of lessons in the academic year 2020-21 and the autumn term of 2021-22, compared with 11.6% in London and 11.9% in the south-east. Significantly higher numbers of pupils were simply not in school, and we know that significantly high numbers did not have access to the equipment necessary for home learning.

The third thing is therefore the failure of the education recovery initiative, including the poor delivery of the National Tutoring Programme, to deliver effective catch-up. In the north-east, only 58.8% of target schools were reached by the National Tutoring Programme. It was 100% in the south-west and 96.1% in the south-east. What a pity that the Government did not accept the advice of their adviser at the time about what was necessary for effective catch-up.

I could talk about this for a very long time, but I know this is a short debate. But there we are: policies have been pursued over the recent decade and beyond which, far from levelling up, have increased disadvantage and the lack of opportunities in my region. As far as I am concerned, they are the salt of the earth. As the right reverend Prelate the Bishop of Durham knows, it is God's own country. However, we are letting children down massively.

I hope that the incoming Cabinet begins to understand this and produces activity to address it. We have the greatest inequality in our country of any western nation. Are we really proud of that? Are we really proud that we have less opportunity for young people here than in the rest of Europe? I think not. Child poverty was reducing in the north-east when I was in government. There was still a lot to do—I am not saying everything was wonderful—but we had begun to address those issues.

I cannot tell noble Lords the distress when I meet family members and colleagues who are running food banks and other programmes or working in schools at the moment. They are seeing day in, day out, families not just struggling but falling off the edge. The number of children not in school—we do not know where they are—has increased, as has the number of people who simply cannot get through the week without going to neighbours or friends for support and the number of schools which have lost teachers over the summer because their funding went down. We heard from the outgoing Chancellor that he changed the method of allocating money so that it did not go first and foremost to areas of deprivation and people living in poverty. That has to be changed. Members here have heard me go on before about the index of multiple deprivation. The Government not using it in their levelling-up fund is nonsensical.

We have to recognise the depth of this problem. It should not be a surprise to noble Lords or to the Government that deprivation and attainment are linked. I hope that in the promised announcements—I gather one announcement is due next week—the Government

will tackle the fundamental problems faced by children. The Government will not achieve their ambition for growth if they ignore or neglect these issues because, in my view, the supply side is as important as the demand side, and we have heard very little about it. If the Government want productivity to improve and for employment to be at a higher level, addressing these issues in areas such as the north-east, which still depends on manufacturing, is critical. I hope the Government begin to understand this and address it.

2.53 pm

**Baroness Bottomley of Nettlestone (Con):** My Lords, I congratulate the noble Baroness, Lady Armstrong, on securing this debate because it is a subject that is very close to my heart, as she well knows, as I have been chancellor of the University of Hull for the past 18 years. The reason I so wanted to take on that role was because it was not in the sunny, easy south, where educational and health opportunities are so much greater. I wanted to participate and really understand some of the issues in the north-east, in those areas where there are more intractable problems.

We know that inequalities are associated with socioeconomic, cultural and demographic factors, but the analysis is complex because there are young people from disadvantaged regions in London who achieve well. No one has a simple solution, but inequalities limit the potential of students' life chances and impact on the productivity of regional economies. Ensuring equity of educational opportunities is a moral and ethical priority and, as I have said, an economic necessity. It underpins a robust competitive skills economy. Many good comments were made in the levelling-up White Paper about education and I very much hope that Simon Clarke, the new Secretary of State, will follow up on them, as will the fourth Secretary of State for Education in four months, Kit Malthouse—but how delighted we are to see our enduring, persistent and splendid Minister, my noble friend Lady Barran, still with us.

There is no doubt about the vital work that schools do to educate future generations. The Covid pandemic created unprecedented pressures and challenges for the education system. Much work has been done by the Sutton Trust, the Education Policy Institute and, as the noble Baroness, Lady Armstrong, said, the Northern Powerhouse Partnership. Long-standing, intractable structural inequalities and economic disparities have been exposed and exacerbated. Those without space to study, without IT access or who have parents without IT skills have suffered most. Disadvantaged communities are less likely to have IT equipment to access online learning. They are less likely to have a learning space or access to broadband and data. Additionally, absenteeism—a persistent problem in the north-east—has substantially increased. The habit of regular school attendance, once broken, takes time to rebuild.

I welcome the many interventions that the Government announced, but we need to refine them and ensure that the north-east benefits from them. I hope the Minister can inform us of early signs of influence that the National Tutoring Programme has had. How can we enhance take-up in the areas most in need and with lower take-up?



Staffing problems are always serious. We need quality teachers. Schools are struggling to attract dedicated teaching staff, and areas of limited social mobility often struggle the most. Could the Minister comment on what benefits she envisages the levelling-up teacher salary premiums will have on schools in the north-east? I have strongly commended the Department for Education's *Opportunity for All* White Paper. I wonder, though, what we are learning about EIAs, and whether there are any plans to modify them.

I believe the Government have a great responsibility, as do education authorities. However, the responsibility is much wider than that. I will mention one beacon: the Ron Dearing UTC in Hull, which had dramatic success and celebrated outstanding GCSE and level 2 technical results, surpassing expectations, even though its year 11 cohort of 150 spent much of their time studying online. It is an impressive demonstration of partnership. Reckitt, Siemens and Smith+Nephew work in partnership with schools and education institutes.

I particularly commend the work of the University of Hull, which has gone far beyond the call of duty to provide courses, programmes, letterbox delivery of online learning, "step up, move on" programmes for children in care and student mentors. It has delivered all manner of activities and IT skills from within its own budget and has long taken an enlightened and responsible view on the evident economic and social deprivation in the area. I particularly commend Professor Becky Huxley-Binns, the pro-vice-chancellor for education, the Fair Access Office and Humber Outreach Programme; they have really made a difference. We need a concerted approach. We must do more, and I believe we can.

2.58 pm

**Baroness Blower (Lab):** My Lords, I commend my noble friend for securing this debate about regional inequality. It also raises the question of the value of GCSEs and A-levels. On the regional point, perhaps the most significant issue that I will raise is that of child poverty, which is up in the north-east by seven percentage points since 2010-11, against a background of it having begun to improve at one stage. Teachers never advance poverty as an excuse for lower attainment, but it can be a significant contributing factor. Attempts to narrow the attainment gap in the past decade or more have resulted in an ever-increasing narrowing of the curriculum and an ever-sharper focus on exam results, which has tended to leave many children, but poorer children in particular, with a less exciting and inspiring school experience.

In a recently published *Times* commission report, Michael Barber makes a proposal that I believe he picked up from the National Union of Teachers during his employment there: all primary schoolchildren should have what he calls a "bucket list"—I prefer an "entitlement"—of theatre trips, museum trips and sporting activities, and for secondary pupils he has an even longer list. Every child could and should access opportunities out of school that parents with the will and the means offer their own children.

Commentators have observed that there is potential everywhere but opportunity is far more restricted. The *Times* commission report, entitled *Bringing out the Best: How to Transform Education and Unleash the*

*Potential of Every Child*, provides a trenchant critique of many aspects of our education system as it is at present, but it also offers much by way of practical policy suggestions and an optimistic vision of what education could and should be like.

So to the issue of GCSEs and A-levels: the first chapter of the commission's report opens with the old saying that education is about the kindling of a flame, not the filling of a vessel, yet in recent years the excessive focus on knowledge and exam results has not helped young people fulfil their potential. Education is of course not just about getting a job; much of what is missing from our curriculum is useful not just for employment but for life. Lucy Kellaway, the former *Financial Times* columnist, is now a teacher and made a profound contribution to the commission in these terms:

"I can feel that the exam system is disadvantaging my students. I think knowledge is really important but we've gone too far down that road now and our worship of exams is almost sinister."

Many other views of that type are expressed in the commission's report, but it also turns its attention to early years, noting that successful education systems—in Estonia and Finland, for example—do not see formal education begin until the age of seven but have highly regarded, respected and well-qualified systems of early-years provision from six months or possibly even younger. In England, many working with such young children have few qualifications and are paid the minimum wage—none the less working very hard and, I am sure, doing a good job. Even then, many parents say their childcare costs are higher than their rent or their mortgage, and the DfE's own data shows that one-quarter of families find it difficult to meet their childcare costs. So poorer children often start at a disadvantage and fall ever further behind.

To return to GCSEs and A-levels, the commission has found that there is no other developed country whose teenagers sit as many high-stakes tests and that the focus on academic attainment has unbalanced the system. The report notes, too, the high financial cost of the system—as much as £6 million a year, cited in Parliament in 2008.

A further critique of the exam system comes from Dame Alison Peacock, chief executive of the Chartered College of Teaching, and Dame Mary Beard, who describes GCSEs as past their sell-by date. I might say that even the noble Lord, Lord Baker of Dorking—who I do not think is in his seat—who introduced GCSEs, has called for them to be scrapped. Sarah Fletcher, the high mistress of St Paul's Girls' School, whom I have had the pleasure to meet, reported that 94% of teachers surveyed by the Headmasters' and Headmistresses' Conference thought that much reform was needed. As for A-levels, the commission concluded that a baccalaureate-style exam is more relevant now than ever. That was of course the view expressed many years ago by Mike Tomlinson in advice to Tony Blair, a view that Mike Tomlinson still holds, but alas it was not then taken up by the then Prime Minister.

The new Government now have an opportunity to address the cost of living crisis in the north-east and all regions where people are struggling, but they also have the opportunity to reflect on the *Times* commission

[BARONESS BLOWER]

and to discuss a transformative and radical change to our education system and our curriculum to ensure that we really can unleash the potential of every child.

**Baroness Penn (Con):** My Lords, I am afraid we are out of time.

3.04 pm

**Lord Shipley (LD):** I thank the noble Baroness, Lady Armstrong of Hill Top, for the opportunity to debate this vital issue. As she said, we are letting children down. Regional gaps are growing: in the north-east this year, 22.4% of pupils achieved the top GCSE grades of seven or above, compared to 32.6% in London. At A-level, 30.8% of pupils in the north-east achieved top grades of A or A\*, compared to 39.5% in London.

This is partly about incomes. The Institute for Fiscal Studies has said that a 16 year-old's family income is more than four times as strong a predictor of GCSE attainment as their local authority of residence. This will only get worse in the face of the current crisis impacting so severely on the household budgets of low-income families, which is why the Government simply must take action to support those on low incomes. This is not just about the regional divide in attainment; it relates to the levels of poverty and household income across the country.

Three days ago, on Monday, the Department for Education released its analysis of the gap in achievement between poor primary school pupils in England and their peers taking key stage 2 SATs. This showed that the gap in achievement has reached a 10-year high, and there is evidence that the impact of Covid on poorer pupils was much greater than on others, one key reason being that lessons moved online in March 2020. The pandemic has made a widening gap even wider. This year, only 59% of pupils met the standard in all SATs subjects, compared with 65% in 2019. But the number of poorer pupils—those qualifying for free school meals—was only 43%, compared to 65% for other pupils.

The Government have made a major commitment to levelling up. In their levelling-up plan, they said that they will give

“everyone access to good schools and the opportunity to receive excellent education and training.”

Does that commitment still stand? I ask because Schools North East said on 25 August that the north/south gap showed that the measures taken to combat the impact of the pandemic were insufficient. Its director said that the pandemic had exacerbated

“serious perennial issues, especially that of long-term deprivation”.

Schools North East has called for a support plan, so will there be one? Will the Government beware economic and geographical factors being mistakenly presented as educational ones, as Schools North East has asked?

We should remember that north-east primary schools perform well in national terms. That performance reduces at secondary level, and one key reason is a lowering of aspiration. Better careers guidance in primary schools, plus curriculum reform to increase the teaching of design, technology, digital skills and

creative subjects in secondary schools, would help deliver the aspiration that the Prime Minister called for yesterday.

This debate is about comparing London and the north-east, but that can be done successfully only if the Government review why London performs so well when, not many years ago, it did not. Major investment was made in the London school system to very positive effect. Will similar investment be made in schools across the north-east and all the more deprived regions? Will educational investment areas already announced be extended to many more schools and places? There is an existing levelling-up commitment to create 55 new educational investment areas where attainment is currently weakest. I submit that this is not enough. In 2019, the Government announced Opportunity North East initiatives, with up to 30 schools benefiting from expert guidance from other schools. Might this be expanded?

Money is at the heart of all this. Will there be more catch-up funding? Will the planned national funding formula address the imbalances identified? Will there be better pay for good teachers? Crucially, and finally, what will happen to school budgets now? The rising costs of pay, supplies and energy will put serious pressure on them. If levelling-up means anything, it must surely mean protecting schools' ability to support disadvantaged pupils properly; are the Government committed to that?

3.09 pm

**The Lord Bishop of Durham:** My Lords, I begin by expressing, on behalf of these Benches, our concern for Her Majesty, and the assurance of our thoughts and prayers for her and the Royal Family.

I am grateful to the noble Baroness for securing this debate and pay tribute to the way she has stood up for the young people of the north-east throughout her distinguished career. I declare my interests as chair of the National Society and the Durham Diocesan Board of Finance.

I begin by celebrating the success of our young people and their teachers, particularly those of the north-east, in the recent A-level and GCSE examination results in both schools and further education colleges. However, we cannot hide away from the gap between the north and the south of England—the stats have already been quoted, so I will not repeat them. The most recent figures continue to show that disadvantaged communities in the north continue to be hit hardest by the Covid pandemic and its impact on learning. Poverty is in every north-east postcode and is set to worsen. Headlines include, for example:

“In 2020/21, the North East overtook London to have the highest rate of child poverty in the UK, at 38%”.

Too many of our communities are named in the top 20. Although the latest UK-wide figures show that overall child poverty rates dropped slightly in the first year of the pandemic due to the temporary £20 uplift to universal credit, detailed breakdown shows that child poverty continued to rise in areas such as Sunderland, Newcastle and Middlesbrough.

While there have been efforts by the Government such as the National Tutoring Programme, in March 2021 this had reached only just over 58% of the target schools in the north-east, compared with the 100% and

96.1% quoted earlier by the noble Baroness. As the Northern Powerhouse Partnership and Schools North East have pointed out, the lack of pre-existing infrastructure and the challenges around recruitment have exacerbated this problem. It is important to acknowledge that this has improved since the inclusion of school-led tutoring—which, if I remember rightly, was barred in the first instance. This suggests that the schools themselves are not at fault. How might this be further rolled out and secured?

The Government's welcome package of spending is being invested in all our schools. However, this will not have the desired impact while schools are left to fund a deserved pay award and the increased costs of simply heating a school. This money will, in some cases, allow schools to stand still, but others will fall further behind. Strong multi-academy trusts will be unable to have the desired impact they are expected to achieve in the education investment areas if all the funding is required to keep open the doors of their existing schools. I had a conversation this week that predicted that, although it is not legally allowed, there will not be a single multi-academy trust in the north-east that will be able to set anything other than a deficit budget in the coming year.

The question of adequate funding in further education also arises here. Further education often helps people who have not done well at school to do better in their GCSEs, A-levels and other studies. What might be learned from that to help schools? The Government's levelling-up White Paper set a target of increasing the percentage of children from the worst-performing areas meeting the expected standard in reading, writing and maths by over a third by 2030. This will be achieved only if there is a focus not only on education but on children's health, the adequacy of the housing in which they live and their capacity to access online support through good broadband and so forth. We need a fully thought-through and resourced recovery plan that is bespoke for the north to tackle the real issues of disadvantage, lack of resource and teacher recruitment and retention.

I ask the Minister: how will Her Majesty's Government look again at the issues facing the north-east region and work collaboratively with local leaders to find long-lasting solutions that are fully funded and grounded in research-led initiatives that work? The schools and colleges themselves have demonstrated they are not the problem, but they certainly must be part of the solution.

3.15 pm

**Lord Addington (LD):** My Lords, when I looked at this debate, I looked at the statistics and said, "Yes, there's a problem". I then looked at it again and said, "It ain't the only place there's a problem". Then you look at it again and discover there are pockets of deprivation—let us face it, how many of us have read reports or sat through discussions in this place about deprivation in, for instance, rural towns and seaside towns? Wherever you have areas with lower economic expectation and financial support, you get worse educational results.

When you decide to invest in education as a parent or a child, you are putting huge effort in for something in the future. If there is nothing in the future that you

feel that you can realistically attain, you are not going to do it. Also, with the best will in the world, you do not have the opportunity to support that person. The pandemic has proved this clearly. If you happened to be at home with your own computer in your own quiet room or space, you did fairly well; if you had one mobile phone between a family of four—we have all heard the horror stories—you did not do very well. Then you go back to an environment where you are behind and not achieving very well. So why would anybody sensible, who does not have any examples around them, invest time, effort and sacrifice to achieve? That child will not and, if their parents have had a bad experience, they probably will not push them either. We are in a cycle here and the Government have to intervene to change it, either through the school or by getting hold of parents—this is not easy; it takes time and is not just the responsibility of the Department for Education—to make sure that they value what they are going through and the sacrifice.

I remind the House of my interests in special educational needs and technical support. My pet subject is a classic example of this. If you have, say, a moderate dyslexic—that is the area I know most about—who is going through and is failing but is from a middle-class family, they find out why. The exam-passing classes make sure that they find out how you succeed, because they know you can. They know that it is not a big deal. They make sure that you can get through and get the support. They have the few hundred pounds, maybe few thousand pounds, to take on the system and push through.

If you come from an environment where nobody has passed any exams or maybe has passed just one, "What are you worrying about? You don't need that for the jobs you're going to do; you'll do a job like me". You can break that cultural link by making sure that teachers and the careers service start earlier and by making sure that people appreciate what is available to them by simply passing a few exams—you clearly do not have to be a genius to do that, because lots of people do it. All of us who have been to university know that, wherever it was, it was not manned by thousands of geniuses—there were some who had passed their exams who had trouble breathing without help, in my opinion.

If we go through this, it is the idea of reaching further in and making sure that people invest in it. That will make your job infinitely easier. We need support to get children through; many things have been talked about here that we could do, so I will not waste time by repeating them. Unless you get the intervention right to enable people to feel that the investment is not only beneficial but possible for the person doing it, they will not take it on. Your environment is a magnifying glass to your own personal cocktail of opportunity.

Unless we can make sure people understand that there is a possibility and a benefit from taking on these difficult choices, we will not do it. The levelling-up agenda should be something that addresses this. When the Minister replies—and I am, once again, reassured that she is still here; at least we have somebody who understands what is going on at the moment—will she give us some idea of how it ties in with the education agenda and how the departments are working together

[LORD ADDINGTON]

to achieve this? If there is a silver bullet, I very much doubt it is in the gun that the Department for Education by itself has at the moment.

3.20 pm

**Baroness Wilcox of Newport (Lab):** My Lords, I thank my noble friend for bringing this important debate to the House and the many speakers who have spoken of the need to highlight the failings in the system in order to restore the horrendous inequalities we suffer as a nation because of the gaps we have in educating our children. I taught for almost 35 years, mainly in south Wales, which has a similar demographic to the north-east of England: low economic levels after years of deindustrialisation, low wages and low skill levels.

Bridget Phillipson MP, our shadow Education Secretary and a representative from the north-east, when responding to new research showing that half of pupils who get low grades at GCSE are already judged to be behind at age five, said: “The Conservatives are failing our children. Higher quality early years education is essential to boosting outcomes for children, but under the Conservatives, early years support is increasingly unavailable and unaffordable, putting this essential education out of reach of more families. Labour would be tackling this now, investing in children’s early learning through our children’s recovery plan and ending tax breaks for private schools to invest in driving up standards across all schools, for every child.”

I looked at the three-year research project by Professor Major of the University of Exeter to seek to understand why successive Governments have failed to address an issue that has continued to plague England’s education system for several decades. Failure to get a grade 4 in both English language and maths GCSE—notwithstanding my noble friend’s issues with GCSEs—is a strong indicator that teenagers lack the basic levels of literacy and numeracy needed to function and prosper in life after school.

In all my experience as a front-line classroom practitioner, one of my favourite phrases was, “Try to head off trouble at the pass.” I saw time and again that problems that were not picked up and resolved at an early stage of a child’s education persisted and deepened as they went through the secondary sector. Crucial to those issues was lack of literacy, especially reading and writing, but numeracy as well. Without these basic foundations, the rest of the curriculum becomes unreachable and progress is slow and poor.

The report *Child of the North*, from December 2021, highlighted that rising inequality costs the economy in lost potential. The research showed that children in the north have a 27% chance of living in poverty, compared to 20% in the rest of England. The report came up with a series of recommendations on how to narrow the gap and improve the lives and futures of millions of children in the north-east. Regional inequality was down to a lack of investment and it called for a £10 per child per week uplift in child benefit, bringing in free school meals, as we have done in Wales this week, and permanently feeding children during holidays. Investment in children creates high returns and benefits for society as a whole.

I have excellent examples of what Governments can do to deal with child poverty, because tackling child poverty has been, and continues to be, a priority for every Minister in the Welsh Government, who have to deal with one of the highest rates of deprivation in the UK. This includes continuing to strengthen families and communities through early intervention; prevention programmes, such as Flying Start and Families First, that you in England used to have but no longer; further developing an early childhood care and education system; improving employability; and creating secure, fair work and a living wage.

The current crises we face in these unprecedented times are difficult for those who have to make decisions, but burdens are never shared equally and children will suffer unequally. After two years struggling to cope with job losses, the pandemic, pay cuts and rising costs, families with children have been hit the hardest once again by the worst inflation seen in four decades.

I will leave the final thought to Imran Hussain, who is director of policy at Action for Children:

“Poverty destroys life chances. You cannot level up the country with millions of children in poverty so it’s vital the Government brings forward a credible plan to reduce poverty.”

3.25 pm

**The Parliamentary Under-Secretary of State, Department for Education (Baroness Barran) (Con):** My Lords, I start by echoing the sentiments expressed by the noble Baroness, Lady Armstrong of Hill Top. I send my thoughts and prayers to Her Majesty the Queen and the Royal Family.

I thank all noble Lords for their thoughtful contributions today and the noble Baroness, Lady Armstrong, in particular for her deep experience and understanding of the multiplicity of factors that impact on outcomes, especially in the north-east.

Like the right reverend Prelate, I congratulate students up and down the country, who should be incredibly proud of what they have achieved this year. Our plans were to ensure students could sit their formal summer exams safely and fairly for the first time since 2019. My thanks go to students, teachers and, as the noble Lord, Lord Addington, pointed out, parents for the picture we are now seeing. Results this year are higher overall than in 2019 and lower than in 2021, when there was a different method of assessment.

The noble Lord, Lord Shipley, referred to the attainment gap in England between disadvantaged pupils and their peers. As your Lordships know, this had narrowed at primary and secondary levels between 2011 and 2019 before the disruption to our nation’s children and young people caused by the pandemic led to a widening of the gap. He asked for confirmation that the Government are still committed to the levelling-up programme and the different missions set out in the levelling-up White Paper. That is indeed the case. I hope that also addresses the point raised by the right reverend Prelate about the importance of addressing the kinds of issues that children in the north-east covered by today’s debate face by thinking about health, housing and wider infrastructure. In response to the question of the noble Lord, Lord Addington, departments are working together to make that happen.

The noble Baroness, Lady Blower, asked about wider questions and challenges on wider change that, if I may, goes a little beyond the scope of this debate. However, I encourage her perhaps to try to secure a debate on those issues, as they warrant genuine discussion and understanding.

The Government are taking action to address the issues your Lordships have raised, both with specific support in place and broader interventions focused on disadvantage to give every child the education that allows them to achieve their potential. That aspiration is shared by all noble Lords in every part of this House.

When we look at schools in the north-east, it is clear that the quality of primary education is excellent, with 93% of schools rated as good or outstanding by Ofsted. This is reflected in the recent key stage 2 grades, which put the north-east as the second-placed region after London. I hope the noble Baroness, Lady Wilcox, will note this and share it with the shadow Secretary of State for Education; the Government absolutely agree on the importance of early years and a solid primary education. We have very much focused on starting with primary schools in the north-east, and I hope she will recognise the achievement of those schools in the region.

The picture at secondary is different. There have been significant improvements since 2018, in large part thanks to the work of the Opportunity North East programme, but in some local authorities too many schools are still rated by Ofsted as “Requiring improvement” or “Inadequate”. That is why we have plans to address this through the education investment areas programme and why we took powers to be able to intervene in schools which have been judged by Ofsted to be below “Good”—so “Inadequate” or “Requires improvement”—on multiple occasions. It is also why we are supporting the stronger multi-academy trusts to grow in the area.

The Government are investing in 55 education investment areas where we will implement a package of measures to drive school improvement and improve pupil outcomes. We are also investing to support our strongest trusts to expand, committing up to £86 million in trust capacity funding over the next three years, with a particular focus on these areas. Six of the 12 local authorities in the north-east are in education improvement areas: Darlington, Durham, South Tyneside and Sunderland, and Middlesbrough and Hartlepool are also priority education investment areas. The priority areas will receive a share of around £40 million of additional funding for bespoke interventions to address local needs. Although I am not sure that Hull yet qualifies as being part of the north-east—it might be edging north as we speak—I would like to acknowledge my noble friend’s comments about the partnership between the University of Hull and local schools, and commend universities and businesses in the north-east for doing similar work.

My noble friend asked about our plans in relation to attendance. In the levelling-up White Paper, we announced that the department is planning a new attendance pilot in a group of education improvement areas. In the north-east, in the first year this will support pupils in Middlesbrough in particular. We are also incentivising new teachers to work in

disadvantaged areas through our levelling-up premium and establishing an institute for teaching which will deliver cutting-edge training and will target disadvantaged areas.

I turn now to broader support. We are committed to helping pupils recover and close the attainment gap. We have already announced nearly £5 billion for education recovery, with many programmes, including the 16 to 19 tuition fund and the recovery premium especially focused on helping the most disadvantaged. Schools will continue to receive recovery funding and the additional funding received by secondary schools will nearly double from September, reflecting evidence that shows greater learning loss for older pupils who have less time left in education. In broad terms, this means a typical secondary school receives over £60,000 this year, up from £30,000.

A number of your Lordships referred to the National Tutoring Programme and, if I may, I did not recognise the numbers, but it may be a timing issue that the noble Baroness and the right reverend Prelate cited. Since 2020, 2 million starts have already been made by pupils on the National Tutoring Programme courses, with the latest data suggesting that over 80% of schools in the north-east—I think the noble Baroness, Lady Armstrong, referred to 56% but the most recent data shows 80%—participated in the programme, which was higher than in London and the south-east and the south-west. In response to the right reverend Prelate’s question, from academic year 2022-23, all funding for the National Tutoring Programme will go through the school-led approach.

We will also be targeting a greater proportion of the schools national funding formula towards deprived pupils. In 2022-23, 9.8% of the schools NFF will be allocated through deprivation factors.

This Government remain committed to improving outcomes for disadvantaged pupils of all abilities and across all regions. In partnership with schools in the region we have created a strong platform in primary to move the dial in secondary schools. Along with our focus on education investment areas, this will help to address the number of schools in the region which have been rated as requiring improvement more than once and will drive up outcomes. We know that there is more to do to build on our collective successes so far, and we will continue to ensure that our programmes and funding are delivering the help that is needed, now and in the future, including learning from what is working best and where we need to do more to support children to fulfil their potential and have the lives they aspire to.

## **Climate Change and Biodiversity: Food Security**

*Motion to Take Note*

3.35 pm

*Moved by Baroness Boycott*

To move that this House takes note of the impact of climate change and biodiversity loss on food security.

**Baroness Boycott (CB):** My Lords, I am very pleased to introduce this debate today. It was topical when I first tabled it, and it is even more so now. I thank all noble Lords who have signed up to speak, and I especially welcome the noble Baroness, Lady Willis of Summertown, who will be making her maiden speech today. I am sure I join everyone in the House in welcoming her and being extremely grateful for her expertise, which is much needed now. I am also sure, like everyone else, we send our best wishes to the Royal Family.

The war in Ukraine has weaponised global food supply. In blockading ports and destroying infrastructure, Russia has severed the ties between acutely food insecure populations and the Ukrainian wheat and cooking oil on which they depend. The war is not the sole cause, but it has thrown fire on an already unstable situation which is being undermined across the world by climate change. The record-breaking 40-degree heatwave and prolonged drought in the UK—July 2022 was the driest July since 1911, and it has been the driest nine months since 1975—are stark reminders to us all, not least for the farmers and food producers in the UK. Retailers are rejecting vegetables because they are stunted due to a lack of water. Some 50% of the potato crop is not going to be up to much. They are being ploughed back into the soil—a quite horrific prospect as we face the most severe cost of living crisis in my lifetime. Livestock farmers are already using their winter silage or haylage due to a severe lack of grass. What is this going to mean for the winter months ahead? No one knows, because there is no plan.

This is not a problem for us alone. The shocks from climate change, such as drought and other extreme weather, and the associated biodiversity loss are not going anywhere. They are everywhere. Like us, China and Kenya are experiencing their worst droughts in living memory. Alarming, research by the London School of Hygiene & Tropical Medicine highlights that we import 32% of our fresh produce—the key to healthy diets—from countries that are most vulnerable to climate change.

But I now turn to the other part of the debate: biodiversity. All too often it is overlooked as part of the fight against climate change. But make no mistake: you will not get one without the other. Some 40 years ago, the world scoffed at James Lovelock's understanding of the interconnectivity of life on earth—now, when it is almost too late, we are starting to understand just what a miracle it is.

A 2021 report gave a damning verdict on biodiversity in the UK: we are one of the most nature-depleted countries in the world. Institutionally, we are not just failing nature; we are actually hastening its demise. The Dasgupta review, published brilliantly by our Treasury in 2021, highlighted this in one shocking statistic: globally, we subsidise the destruction of nature to the tune of between \$4 trillion and \$6 trillion annually. In the UK, it is a minimum of \$70 million. COP 15, taking place in Montreal later this year, will be a critical test of the world's resolve and a chance to change that trajectory.

Back to the UK specifically, since the 1970s our food system, from farm to fork, has been the key driver in the decline of nature. A study by the Natural

History Museum found that we have lost half of our biodiversity since the industrial revolution. At present, we know that over 40% of UK species are in decline and that one in 10 are threatened with extinction, and that 85% of our soils have been severely degraded. Changes in the way we farm—overusing chemicals, planting monocultures and removing habitat features, partly driven by our own implementation of subsidies—have been a leading contributor to this loss.

Biodiversity plays a central role in both tackling climate change and establishing a farming system that naturally provides pollination and pest predation, as well as soil fertility and carbon storage. We cannot tackle these two issues in isolation; we must see them as one challenge.

Solutions start with the food system. It can be tempting to see something as sprawling as the global food system as completely beyond the reach of Governments. Yet global food insecurity and our food insecurity are the product of policy decisions—they did not just happen. The virtual exclusion of agriculture from climate change policy has spared the sector from the pressure to transition to more sustainable practices. Just as Governments have favoured fossil fuels over renewables, so they have favoured large corporations that say they will deliver cheap food and economic growth. We need to reimagine this system, from what happens in the field to what we eat.

Research is helping us understand that embedding biodiversity into farming systems and increasing the carbon content of soil will improve yields. But how do we manage that soil and the land to feed people and nurture the planet? That is critical. As the national food strategy set out, 22% of land that produces food in the UK is used to produce crops to feed animals. This is massively inefficient.

On land use, I want to debunk something that has been doing the rounds. It has been said that solar farms are a threat to food production. This is emphatically not the case. Solar farms currently take up 0.1% of land in the UK. Even if that is rapidly scaled up, as the previous Government said they would, that would still rise to only 0.3%. In context, that is only 0.5% of all our farming land and about half the size of the land used for golf courses. In addition, solar farms can be biodiversity hotspots if they are not grazed. On this, as on many aspects, we can hit multiple birds with a single stone.

The ecosystems that we degrade through overuse should be helping to absorb carbon, regulating surface temperature and protecting against the destruction wrought by weather and extremes. Instead, we have relentlessly weakened nature's resilience and limited the capacity of soil to deliver healthy harvests. Agro-ecological approaches have very encouraging outcomes. For instance, Hillesden Farm, a 1,000 acre farm in Buckinghamshire, has since 2005 increased biodiversity while never losing crop yields. As farmers manage 70% of the UK's land area, and the need to tackle the climate and nature crisis is great, the Government must consider increasing the budget for farming from its current £3.2 billion a year. A land-use framework for not just farmland but all land is crucial, and the Government must not miss the opportunity they now have to act.

Let us turn to another part of the food system. We know that the agri-food supply chain on both an international and national level is concentrated within a handful of companies which hide behind opaqueness. The just-in-time model and the oligopolistic nature of our food system make it vulnerable and fragile to geopolitical and climate shocks. We must have shorter supply chains and local food systems that are built on diversity. The Sustain alliance carried out a significant piece of market research in 2021 which found that most farmers in England and Wales want to supply much more locally and regionally. However, there are very big barriers, from a lack of affordable finance to any investment in infrastructure such as abattoirs.

There is a massive opportunity for our Government to marry up the levelling-up agenda and the net-zero strategy to deliver more climate-friendly and resilient supply chains that create decent jobs and put some pride in place around farming and food. Can the Minister confirm whether he will push for this to happen?

On procurement, the public purse spends over £2 billion a year on catering. It is therefore one of the Government's most direct tools to change what people eat, reduce the amount of cheap industrial meat and introduce more fruit, veg and pulses, but the standard of public sector food across the UK is really patchy. It is the Government's job to set standards that all caterers are legally obliged to follow, so that they will serve nutritious meals that demonstrate and normalise healthy diets, rather than cheap junk food.

The Food for Life programme, run by the Soil Association, is proof that good food can be served on public sector budgets. I have seen this for myself over many years. It serves 2 million meals a day and is produced to higher environmental and welfare standards. The Government are currently consulting on introducing a target for 50% of local food, of which at least 20% should come from high production standards, as I have proposed in an amendment to the Procurement Bill.

On what we actually eat, changing how we farm will not be enough to break the vicious cycle of poor diets and environmental harm; only by radically lowering the demand for meat in high-income countries can we do that. Animal products are an important part of high-quality protein but they are a huge drain on global resources. Our overconsumption is costing us our planet as well as our health. One-third of all the grain grown in the world is destined for animal feeds, and if population and the demand for meat keep rising as is forecast, agricultural production will have to increase by 50% in the next 30 years. Clearly, that is quite impossible. As an aside, right now there are 80 billion animals living in cages or feed-lots to feed us—that is four for every single person. It is quite disgusting.

The Committee on Climate Change has repeatedly called for the UK to reduce meat and dairy by a fifth, while the Dimbleby-led national food strategy called for a 30% increase in fruit and veg. How do we get there? The time for being reticent on making policy interventions to shape how we eat must be over. We are not just facing a climate and nature emergency but a big public health one. Governments, policymakers and parliamentarians can no longer claim that this is a

simple case of educating children better or asking them to exercise more. In England alone, 28% of adults are obese and 36.2% are overweight; the Covid pandemic has exacerbated that. This is a disgrace.

How have the Government responded to this new challenge? In April, they cut £100 million of funding to local authority weight management services and in May introduced a go-slow on their own obesity policies to restrict “buy one, get one free” on junk food and junk food marketing. I would be interested in hearing from the Minister an explanation of exactly how junk food adverts help citizens afford good food.

The problems of poor diets do not just lie at the feet of individuals, and not all meat and dairy has the same impact. The challenge for all of us—government, policymakers and businesses—is how, in the face of a rocketing cost of living, to guarantee that everyone has access to a healthy diet that does not cost the earth. According to the Food Foundation, there has been a 57% increase in food insecurity since January 2022, and we now have 17.2% of households with kids experiencing lack of food, which affects 2.6 million children. The poorest fifth of UK households would need to spend 47% of their disposable income just to meet the cost of the government-recommended healthy diet. Clearly, they cannot do it.

Here are some things that the Government could do: uprate benefits in line with inflation; increase Healthy Start; and have supermarkets, the top four of which announced pre-tax profits this year of £4 billion, top up the value of vouchers. Government could auto-enrol eligible children in free school meals. The Child Poverty Action Group estimates that currently nearly 900,000 kids are missing out, and they have parents on universal credit. If we are to live in a green and pleasant land, all children going to school must receive a hot and healthy meal, in the same way that they receive a pencil and a ruler.

Can the Government think more creatively about shifting dietary habits? Are there ways that prices could be lowered on healthier foods? Given how resource-intensive and damaging intensive meat farming is, what could Governments, national and local, do to curb their spread? We need to study food insecurity in the round. We should at the very least have a special inquiry into this issue.

It is possible to get a better world, but changes must be fundamental. Farming lobbies are powerful, leaving politicians reluctant to shift from large-scale agriculture, while advising people what to eat is regarded as the nanny state. The result is that our tackling of the environmental harms of industrial agriculture is weak to pathetic. The worst health outcomes have been blamed on the individual, never the system. Food poverty and food insecurity is the result of being unable to cook or being a rotten household manager. We have done everything to prop up a system that is not only killing us—diet-related disease is now the number one cause of preventable death on the planet—but killing our wildlife and soil, and contributing massively to the climate change that is destroying the planet.

Finally, what are the Government for if they fail to look after their people and ensure that they are adequately fed, their children can grow into healthy adults and

[BARONESS BOYCOTT]

the soil, the country and the fields they inherited are not used just as an inexhaustible cupboard? This is no easy task for any Government, but I should really like the Minister to agree that just because something might be really difficult does not mean it is not worth doing.

3.50 pm

**The Earl of Caithness (Con):** My Lords, I thank the noble Baroness, Lady Boycott, for securing this debate and the amazing tour de force of her speech. Food security is a huge area, but she covered most of it and I shall not attempt to try to do the same. I am also glad to see my noble friend on the Front Bench; I hope he has a good deal of Araldite to keep him there a bit longer, because we need his experience and knowledge.

It is also a pleasure to welcome the recently published government food strategy. I should like to mention three aspects in particular: the commitments to maintain the current levels of domestic food production, which is very important; to a separate horticultural strategy; and—such good news to me—to develop a land-use strategy. At long last: we have been banging on about this for many years and have always had the thumbs down from Defra. At long last, the Government will produce a land-use strategy next year, and I look forward to it. However, I feel it is a bit of a cart before the horse, because the Government are half way through the ELMS programme, and we needed a land-use strategy before a policy for the land.

It is good to see the change in Defra's approach, because the past decade has not been its finest. In the first part of the past decade, it flirted with sustainable intensification in agriculture. That followed Professor John Beddington's Foresight report—many of your Lordships will remember it. No sooner had that gone cold and started to collect dust than the pendulum swung and Defra moved off in totally the opposite direction, on a rather nebulous path to sustainable agriculture. At long last, the pendulum is a little more central.

I fear that in the past few years, Defra has been too influenced by some NGOs and well-meaning environmentalists who have rather a picture postcard view of the country and what farming was about. Ideals were based on emotion rather than science and fact. I now want to concentrate on the importance of Defra making all its decisions on hard, provable science. Without that, we will not get the resilience and sustainability in our farming system that we so badly need, as just highlighted by the noble Baroness, Lady Boycott.

Let me start with production levels. I go back to the 1960s, when I was working on farms before I went to agricultural college. If we had kept the same yields as we achieved then, we would have to farm 85% of global land surface, rather than the 35% we do at the moment. That is a huge credit to our farmers, not just in this country but throughout the world, who have increased their production to keep us fed as they have. We owe them a huge debt of gratitude, and we rely on them to keep us fed in future. Can my noble friend confirm that the strategy set out by Henry Dimbleby in his *National Food Strategy* will be followed by the

Government: that is, to have high-yield farming, low-intensity farming and natural habitat? It is important that there are these three different parts.

Conservation scientist Andrew Balmford said:

“Most species fare much better if habitats are left intact, which means reducing the space needed for farming. So areas that are farmed need to be as productive as we can possibly make them.”

That will be anathema to some people, but it is absolutely vital because we must improve the biodiversity. Is it possible to farm in the way that Henry Dimbleby suggested? It is; we have been doing so for 30 years at least. The Game & Wildlife Conservation Trust, in its Allerton project, have been doing exactly this. It has increased the number of farmland birds, productivity and the areas of land subject to wildlife and to low-intensity farming. It can be done, and I hope the Government will use that as a template for the future of farming in this country. That was a question I posed to my noble friend Lord Gardiner of Kimble when he was a Minister; I am glad to see him in the House. He did not give me an answer then, but I hope that my noble friend the Minister will give me an answer today.

It was the late Harold Macmillan who allegedly said, “Events, dear boy, events”. The question of Ukraine and what it has done to farming was mentioned by the noble Baroness, Lady Boycott, but it shows how resilient and adaptable we must be in the future, to adapt to all the new circumstances thrown at us.

My penultimate point is to ask my noble friend about the soil health action plan for England. Many of us were delighted when we got a commitment from my noble friend Lord Goldsmith of Richmond Park that there would be a soil health action plan. Alas, Defra seems to have gone to sleep on it. It was promised to me in a Written Answer in the spring. Well, spring is a long time away. I have followed that up with Written Questions but there has been obfuscation. I wonder whether we were accidentally misled by my noble friend, or whether there is a new policy in Defra. Can my noble friend tell me what the up-to-date situation is?

In conclusion—this is all related to science—I pay a particular welcome to the noble Baroness, Lady Willis of Summertown. Being a scientist, she is exactly the sort of person we need in this House, to help us and guide us through our deliberations. Some of our hard—perhaps crusty is the wrong word—farming and environmentalist noble Lords are in the Chamber at the moment, and the noble Baroness will get to know us all pretty well in a short time.

3.57 pm

**Baroness Jones of Whitchurch (Lab):** My Lords, I thank the noble Baroness, Lady Boycott, for this timely debate, at a time of growing concern about rising food prices and increasing food shortages. I add my welcome to the noble Baroness, Lady Willis, who comes with a significant reputation already. We know that she will make a major contribution to the environmental debates that we will be involved with. This debate is also timely because we have a new Prime Minister, a new BEIS Secretary of State, and a new Defra Secretary of State. We are all anxious to know what their plans are for the environment. I have to say that, so far, it is not looking good.



Of course, Liz Truss has been the Defra Secretary of State before, so I was keen to see what she made of it last time. I googled her record. In the two years that she held the post she never made one keynote speech and gave the impression that she could not wait to leave. What we do know is that in that period she cut the Environment Agency's budget so much that it became unable to act against water polluters, a legacy that we are still living with today.

Today, she announced the opening of new oil and gas licence applications, and the lifting of the ban on fracking. She is also cutting the green levy, which was introduced to help energy companies fast-track to renewable energy growth. As a result, our progress towards delivering net zero by 2050 is in danger of going into reverse. Can the Minister please tell us whether the PM is still committed to the net-zero target? If so, what steps is she proposing to take to achieve it, given that we are already behind on the current targets and her emphasis on gas and fracking will make matters worse? Given that she has made great play of her plans to rip up remaining EU legislation, where does that leave the retained environmental legislation, such as the habitats and birds directives, which underpin our current biodiversity strategy?

One of the reasons there is so much uncertainty about the future is that Defra lacks a coherent plan to deliver its climate change and biodiversity strategies. The Committee on Climate Change and the Commons EFRA Committee have consistently criticised the department's approach to this. As they have said, a long-term strategy is required to prepare the agriculture sector for the risks and opportunities that arise from climate change, including higher temperatures, drought and increases in the spread of pests and diseases.

We have seen the huge impacts that arise from extreme weather globally, in the devastating droughts and fires in Australia and the loss of life and homes in the recent Pakistani floods. Clearly, the droughts that we faced this summer are a portent of things to come. The result is lower yields of crops, livestock being fed winter feed as the dried-out grass cannot sustain them, and poor horticulture outputs. This is impacting the bottom line of farmers and growers at a time when fertiliser and energy costs are already making their businesses increasingly unviable. So I ask the Minister: where is the Defra plan to help farmers adapt to the challenges of climate change, so that they can play their full part in delivering net zero?

We already know that the water companies are failing to play their part. We clearly need a strategy to preserve the increasingly scarce and precious water supplies that exist. This means building more reservoirs for storage and fixing the leaks in existing pipework. Farmers and growers need to know what is expected of them from future water use.

A couple of years ago, I spent the day with Norfolk farmers, who are growing many of the fruit and vegetables that feed the nation. They had been told by the Environment Agency that their access to the local aquifer was about to be restricted, as it was running low. Their argument, which was well made, was that if they had been given longer notice of this change, they could have invested in their own water supply units.

They simply did not have time to adapt, given the short notice they were given. These are the sorts of challenges that producers across the country are facing.

We know that much bigger changes in agricultural practices will be needed to meet our climate change obligations, including a switch away from livestock farming. This has the twin advantage of also improving the nation's health. But where is the Defra plan to reduce our share of carbon emissions from agriculture? We are falling badly behind the necessary targets.

Meanwhile, as Minette Batters has said, proposals to help farmers increase food production have been stripped to the bone. We know that costs are rising dramatically for farmers and food producers, putting further pressure on food price inflation. The closure of the UK's biggest fertiliser plant will add to costs, as will its impact on the supply of CO<sub>2</sub>. At the same time, tonnes of food are being left rotting in the field and over 40,000 pigs have been culled, simply because of labour shortages—a problem of the Government's own making. Our farmers are increasingly being undercut by low-quality imports from abroad.

Where is the plan to support British farmers to increase local food production and ensure that British food is affordable? The Committee on Climate Change flagged up the possibility of a major switch to produce food more suitable to hot, dry climates, such as peaches, apricots, tea, sunflowers, sweet potatoes, watermelons, walnuts and, of course, wine. Is this the future the Government see for horticulture? There is huge popular support for the notion that we should become more self-sufficient in food production in the UK. The increasing food scarcities from war and drought will exacerbate that need, so why do the Government not aim to increase our home-grown production of vegetables beyond the current 54%? Why do we not incentivise planting more fruit trees as part of our tree planting strategy? At a local level, why do we not encourage communities and individuals to grow more of their own food in gardens and public spaces?

Last week, volunteers on my allotment picked six crates of apples and pears to give to FareShare. This is, in effect, free food, and we should replicate that model in communities wherever we can.

Of course, we did have a comprehensive food strategy that began to address these issues. The Dimbleby report set out a comprehensive road map that would have allowed us to fix the broken food system and provide more nutritious and accessible food for the nation. Sadly, as we have debated before, the Government's response was late and totally inadequate.

The truth is that the Government have failed to deliver a food strategy, are failing on our climate change commitments and are failing farmers. I suspect that they will be punished—rightly—by rural communities at the next election. I look forward to hearing what the Minister has to say, but I doubt there is much he can do to stop that inevitability.

4.05 pm

**Baroness Willis of Summertown (CB) (Maiden Speech):** My Lords, it is a great honour to address this House for the first time. I start by thanking all the staff in the

[BARONESS WILLIS OF SUMMERTOWN]

Chamber of your Lordships' House, as well as my fellow Peers, for the very warm and helpful welcome that I have received. I also commend the noble Baroness, Lady Boycott, for securing this debate.

I started my academic life as a palaeoecologist, which is one of those terms that makes people look very puzzled when I mention it. For the benefit of the Convenor and others who might not know, this is the study of fossil pollen, plant macrofossils and leaves contained in lake sediments over thousands of years, which you can then use to reconstruct vegetational responses to external perturbations such as climate change. This is particularly important for larger organisms, including one of our most important, our trees. If you think about it, the average generation time of most trees is 50 years. You need these longer-term records to understand how trees will respond.

This research was looking predominantly at dead plant parts, but this all changed when I went on secondment to the Royal Botanic Gardens, Kew for five years as its first director of science. Suddenly I was surrounded by this incredible biodiversity of plants. In fact, in a single lunchtime I could see the world in plants. When at Kew, I was responsible for around 360 scientists. Many people do not realise how many scientists there are at Kew. I was also responsible for the incredible collections in the Millennium Seed Bank, the Herbarium and the Fungarium. Since returning to Oxford from Kew, I have held a professorship in biodiversity in the department of biology, and I am also head of one of the oldest colleges in Oxford, St Edmund Hall.

Today's debate—

“that this House takes note of the impact of climate change and bio-diversity loss on food security”—

therefore links very closely to my current and past roles. In terms of understanding the scale of biodiversity loss, some of the most startling evidence I have ever come across as an academic was when I co-led a team of scientists from all over the world to assess biodiversity trends in the last 50 years. This was as part of the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services. We examined thousands of records. It was incredibly depressing, because plants, animals, fungi, species, communities and genetic diversity have all declined significantly in the last 50 years. Two main drivers emerged from this biodiversity loss: land-use change and climate change.

But why should we be concerned about the impact of global biodiversity loss on food security? Often when we look at global biodiversity, we think about David Attenborough programmes and beautiful landscapes, but there is actually something much more critical here, which is its impact overall on food security. This is why: of the nearly 420,000 vascular plant species that we know about on the earth to date, just nine supply over 75% of our plant-derived calories in human diets, with wheat, rice and corn alone providing almost half of the world's calorie intake.

These crops have been selected for decades, if not hundreds of years, for the high yields that we heard about earlier. This has resulted in high yields and the very good-tasting food that we want to eat, to buy and to feed ourselves and livestock, but as a result we have less and less genetic diversity and smaller and smaller

species numbers. The loss of that genetic diversity means that in these crops we have lost our resilience to climate change.

A lot of modelling is going on, and it indicates alarmingly that with global warming of even 2 degrees Celsius, there will be a 20% to 40% reduction in cereal grain production, particularly in Asia and Africa but also in the UK. So we urgently need to restore the genetic diversity of our crops or find alternative, more climate-resilient crops, and this is where there is a critical link back to biodiversity.

Work by scientists at Kew and other institutions, notably the Crop Trust, have identified around 320 species of wild relatives of crops and more than 7,000 wild and semi-domesticated plants used by societies all over the world that are not in major production. The vast majority of these crop wild relatives and underutilised plants grow in much more extreme climates than their highly domesticated versions and, crucially, have genes that allow them to do so. They are effectively climate-resilient. We need to breed that kind of resilience back into our crops. This work is already going on. Some notable institutions, including the John Innes Centre in East Anglia, are breeding climate-resilient crops from the crop wild relatives. The species being looked at are rice, durum wheat, legumes and potatoes.

In line with United Nations sustainable development goal 2, we need to be conserving these crop wild relatives and underutilised crops, yet this is where the problem comes in. These wild relatives of crops and underutilised plants grow in the same biodiverse landscapes where we are seeing the most dramatic declines. Biodiversity loss, including of these crop wild relatives and underutilised crops, is removing in many ways our get-out-of-jail card when it comes to creating climate-resilient crops, and we should be deeply concerned by that.

However, it is not just the impact of climate change and biodiversity above ground that we need to worry about—we have already heard some of this—it is also about the impact below ground and, in particular, the mycorrhizal fungi that are attached to 80% of terrestrial plants across the world. It is a symbiotic relationship, which means that the fungi get food from the plant and in exchange there is a network across the soil that greatly enhances the uptake of nutrients and minerals and water retention by those plants. Many plants, and many of our economic crops, have very specific mycorrhizal assemblages associated with them.

Application of mycorrhizal fungi to crops has already shown that it can increase grain yields by 16% in crops such as corn, rice, sorghum and wheat. There is now clear scientific evidence to show that this is one of the ways forward to get climate-resilient crops. However, increasing atmospheric carbon dioxide, temperature and pH significantly alter the composition of fungi in the soil and affect their ability to function, so I would go as far as to say that the hidden impact below the ground of climate change and biodiversity loss might be even more significant than the impact above ground. Without the right fungi in the soils, some crops will simply not grow.

To conclude, the combination of climate change and biodiversity loss poses an extremely serious risk to global food security and, in particular, to our ability to

grow high-yielding, climate-smart crops. I therefore strongly commend this Motion and thank the noble Baroness, Lady Boycott, for bringing this critically important topic to the attention of your Lordships' House.

4.13 pm

**Viscount Stansgate (Lab):** My Lords, what a pleasure to rise to congratulate the noble Baroness on her maiden speech, which I do on behalf of everyone present here today. She put a powerful and persuasive argument utilising all the expertise she could bring to bear. You would never know that the noble Baroness has been a Member of this House for such a short time. The House will recall that she took her seat on the last day before the Summer Recess, and here she is making her maiden speech four sitting days later. I do not know what the record is for the gap between being introduced and making a maiden speech—I dare say some Minister holds the record—but nevertheless for a Cross-Bencher it is a very distinguished way to start.

The research to which the noble Baroness modestly alluded, whether conducted at the Universities of Oxford, Cambridge or Bergen, or at the Royal Botanic Gardens, Kew, is an example of how important it is that the House of Lords Appointments Commission can produce for this House people of the noble Baroness's calibre. We are due tomorrow—though I understand a statement is to be made at 6 pm tonight—to discuss the Appointments Commission, but we will see. In the meantime, I congratulate the Cross Benches on the arrival of their latest Member. I hope she will not mind if I say this, but I have found since my relatively recent arrival that it is the almost intolerable good will of this House that is sometimes difficult to bear. I hope that I have conveyed just a hint of it in welcoming her speech today. The trouble is that I now have to make some remarks of my own.

I begin, like others, by saying that we all owe a debt of gratitude to the noble Baroness, Lady Boycott, for introducing the debate in the way in which she did. You cannot imagine a more important debate than one on the future of the planet earth and our ability to feed ourselves. It is very timely, and I compliment the noble Baroness on the way she introduced it.

In my short contribution, I want to mention some of the risks of biodiversity loss, because biodiversity loss and climate change are two sides of the same coin. Biodiversity is a term we use to describe the variety and variability of life on the planet, from the biggest mammals to microscopic single-cell organisms. The diversity of life and the interactions between organisms are what create the natural ecosystems that in turn regulate the environment and make the earth habitable.

As the House will know, the Royal Institute of International Affairs, Chatham House, among many others, has drawn attention to the fact that biodiversity loss is accelerating by stating:

“Despite increasing recognition of the crucial role of biodiversity in maintaining human and planetary health, biodiversity is declining faster than at any time in human history, and perhaps as fast as during any mass extinction”.

That is a serious warning we need to take seriously.

I heard the other day that it is thought that by 2035 the National Health Service will be spending more money on the complications arising from type 2 diabetes

than on cancer. That is a result, in part, of what might be called the “junk food culture” of the western world, because we are not necessarily eating the best or most healthy food. When it comes to mind-blowing statistics, I understand that the world is going to need to produce in the next 40 years more food than it has produced in its entire human history—which shows the scale of the challenge we face.

As the noble Baroness correctly pointed out, I think about two-thirds of the world's plant-based food comes from just nine species of crop. The House really needs to know how vulnerable we are when we read a statistic like that, and the noble Baroness speaks with much greater authority than I do. The noble Baroness also referred to the resilience of plants, which is going to be crucial to our survival. Converting land to agriculture does not just destroy natural ecosystems such as prairies, grasslands and forests. It also deprives wildlife of the food sources and shelter that it depends upon to survive.

Beyond the destruction of ecosystems, the intensification of farming is also driving biodiversity loss. I think it is estimated that about 100,000 species of insects, as well as birds and mammals, pollinate more than two-thirds of the food plants that are responsible for about one-third of the world's crop production. I am only in many ways repeating in a pale form some of the points made by the noble Baroness. The variability and availability of living organisms are essential to agriculture as they ensure that the natural processes can take place, contributing to important functions such as soil fertility.

There are one or two things that are going wrong, and I will briefly draw attention to them. Land use, which has been mentioned, is a major driver of biodiversity loss and many agricultural practices are unsustainable in the long term. I suppose the deforestation of the Amazon is the most obvious example.

Then there is corn. We have been growing corn for 9,000 years but, as demand for it has soared, one of the most worrying aspects is the loss of diversity within the crop itself. Studies have pointed to a troubling erosion of genetic diversity within corn crops that could impact the crop's ability to be sustained and grown in future.

In the last 40 years there has been a reduction of about one-third in all insect pollinator species where they have been measured, while biodiversity loss in marine fisheries is likely to continue and global heating can threaten that recovery completely as the oceans warm and become increasingly acidified. That matters because about 3 billion people on the planet rely on fish for a whole host of their food intake. In light of the time, I shall close by saying that biodiversity loss is as great a threat to the world as the phasing out of fossil fuels.

Perhaps I could conclude with a word of hope. I think I am right in saying, although I am sure I will be corrected if not, that there has been some fascinating scientific research that hints at breakthroughs in the productivity of plants and the possibility of significant increases in, for example, the yields of soya plants that could make a big difference in a world with a growing population and significantly amounts of farmland lost to climate change.

[VISCOUNT STANSGATE]

I hope the Minister might say a word about the current COP 15 process in relation to biodiversity and when we might expect a White Paper from the Government in response to the recommendations of the national food strategy, as referred to by my noble friend among others. I look forward to hearing from the Minister in his reply, and I end by congratulating once again the new expert Member of the Cross Benches on biodiversity, the noble Baroness, Lady Willis of Summertown.

4.21 pm

**The Lord Bishop of Manchester:** My Lords, I begin by adding my own compliments to the noble Baroness, Lady Willis, on what was a most excellent maiden speech. I am very much looking forward now to her deep scientific learning informing many future contributions. We need good science in this House. I also echo the sentiments of my right reverend friend the Bishop of Durham in the previous debate, assuring your Lordships that Her Majesty is very much in the prayers of the Lords Spiritual at this time.

I am deeply grateful to the noble Baroness, Lady Boycott, for securing time for us to discuss the important matters in this debate. I draw attention to my interest as set out in the register as a Church Commissioner; we are one of the largest owners of agricultural land in England.

This year we have seen unprecedented consequences of climate change, both at home in the UK and abroad: record temperatures, shifting weather patterns, rising sea levels and biodiversity loss. Climate change is alive and kicking, and we need to work together at all levels, locally, nationally and internationally, to address the crisis.

I am glad to be able to commend actions taken by the Government to address food security here in the UK. The Government's food strategy that was published in June was a clear step in the right direction. However, much more still needs to be done to address food security across the country. Like others, I urge the Government to pay attention to the Dimpleby review, particularly its recommendations to pass new legislation to protect our food security and the environment.

As the cost of living crisis and energy bill increases bite—I do not know what the Prime Minister planned to announce today—we must ensure that we are doing all we can to guarantee food security for all. Almost all the churches in my diocese have a food bank that they are supporting. But there other things that we can do: we can invest in the transition to sustainable farming and fisheries, and we must strengthen local food systems and reduce both UK meat consumption, as the noble Baroness, Lady Boycott, urged, and food waste.

I want to speak mostly beyond the UK. We need to look over the horizon to the need for global food security. The United Nations has estimated that 50 million people in 45 countries are living "each day on the edge of famine".

Indeed, speaking at the Global Food Security Call to Action ministerial in May this year, UN Secretary-General António Guterres spoke of climate change's impacts on global hunger, saying:

"Over the past decade, 1.7 billion people have been affected by extreme weather and climate-related disasters."

As noble Lords have discussed, the impacts of climate change on food security are only going to worsen. The IPCC has said that an increase in global warming of 1.5 to 2 degrees centigrade would increase pressure on food production and access. Beyond 2 degrees, it would lead to severe food insecurity across certain regions, particularly in Africa, Asia and the Americas. Global warming beyond 3 degrees would significantly expand the areas impacted by severe food insecurity. As we have heard, these changes compound biodiversity loss, which in turn compounds food insecurity—this is a vicious spiral.

Two days ago, I returned from a trip to Namibia. I have been visiting churches and communities in that diocese because we in the diocese of Manchester have the pleasure of being twinned with it. The majority of Namibia's population depend, directly or indirectly, on the agricultural sector. It is estimated that the mean annual temperature will go up by 2.7 degrees in the next few years and that annual precipitation will decrease by 7%. This is likely to cause longer droughts, increased heatwaves and greater flooding, and implications for the agriculture sector in the country are obvious—food production is already being destabilised.

Namibia is a semi-arid country; the soil in many places is almost like the sand on a beach. It is highly dependent on grazing animals that can survive through the long dry season on its marginal grasslands. Namibia is probably one of the few countries where I would struggle to maintain my meat-free diet. Sadly, poor rains in the last few years have increased the numbers of people who have lost their cattle. Many have been forced to migrate, particularly from the rural north to the capital, Windhoek. This has created huge pressure on services in the city, led to increased numbers of people living in wholly unacceptable conditions—these have to be seen, heard and smelled—and raised the number of people, especially young men, who lack meaningful employment. Elsewhere, as noble Lords are well aware, such factors have been observed to put social harmony and cohesion at risk.

My diocese is also twinned with the diocese of Lahore in Pakistan, and it has been heart-wrenching to see and hear of the devastating impacts of climate change there. Noble Lords will have seen that more than 33 million people have been displaced from their homes by the recent floods, which cover more than one-third of the country. Huge swathes of farmland, crops and stockpiles have been destroyed, while supplies of rice, vegetables and wheat have been severely disrupted.

These are just two countries—two I happen to know well—among many whose food security is already being negatively impacted by a climate crisis for which they are not primarily responsible. I hope that, in this debate, the Minister will be able to assure us that Her Majesty's Government will use all their influence and powers, not least to uphold the pledges made at the COP 26 summit to address the challenges of adaptation, loss and damage. It is essential that we all take responsibility, not just individually but collectively, for our part in climate change and biodiversity loss, and that we act to stop them now to ensure a more food-secure future for us all. Let this debate be a significant step in that direction.

4.27 pm

**Baroness Mobarik (Con):** My Lords, I thank the noble Baroness, Lady Boycott, for securing this important debate. I add my welcome to the noble Baroness, Lady Willis of Summertown, and congratulate her on her excellent and highly informative maiden speech.

There is no greater illustration of the impact of climate change on lives, livelihoods and, inevitably, biodiversity and food security than the calamitous events that have unfolded in Pakistan in recent days. I will use the time allocated to me to focus my remarks mostly on that country. As the right reverend Prelate pointed out, an area the size of the United Kingdom has been flooded due to torrential monsoon rains even more forceful than the norm, following the soaring temperatures this year, and due to the melting glaciers in the north of the country. The impact of these floods on those directly affected and on the country as a whole cannot be adequately expressed.

Noble Lords will be familiar with the statistics: more than 1,900 people have been killed, more than a million homes have been damaged or demolished, 10,000 schools have been lost, 900 health facilities were wrecked, and more than 3,000 kilometres of road and over 100 bridges were destroyed. There is the additional destruction of huge tracts of farmland, with roughly 2.2 million hectares of crops ruined and 800,000 livestock swept away. The estimated total loss to the economy is \$30 billion. Rice, cotton and sugarcane—both in the fields and in stores—were destroyed, and 1.7 million fruit trees were ravaged. It is an apocalyptic scene, the kind that might be imagined in a disaster movie. Sadly, however, this is reality and a sign of things to come for our planet.

Pakistan is just one of a number of countries on the front line of climate change, while also being one of the countries which contributes least to pollution. The challenges the country faces on food security are beyond measure. Wheat planting in the month of October is now under threat, and the shortage of around 2.6 million tonnes, even before the floods, will be further compounded. Vegetables, such as onions and tomatoes which are a staple in that country, are in some areas completely wiped out. Prices for these foods prior to the floods had soared due to inflation, but they are now unaffordable for many.

The Government of Pakistan have warned that there is a food security crisis looming. The UN Resident Coordinator and Humanitarian Coordinator for Pakistan has described the emergency as a “climate-change driven catastrophe”. With Pakistan the fifth largest exporter of rice—exporting around 4 million tonnes—the loss of crops will have an impact on availability and prices elsewhere.

In 1989, the former Prime Minister Margaret Thatcher warned in a speech to the United Nations General Assembly on global environment that:

“Of all the challenges faced by the world community ... one has grown clearer than any other in both urgency and importance ... the threat to our global environment”.

That was 33 years ago, but we are nowhere near meeting the challenge or putting in place adequate defences to mitigate the impact of climate change. The climate finance target of \$100 billion by 2020 promised

by the wealthier countries, as a recognition of their responsibility for historic carbon emissions, to lower-income countries to deal with the impacts of climate change has never been reached.

With other vulnerable countries on the front line of what has been pointed out by experts as an exponential growth in climate change, it is fair to say that these events will happen more and more frequently and with equally devastating consequences. Bolstering the resilience of countries most immediately vulnerable to climate change should be paramount. I know that this is not the responsibility of Defra, but I hope that my noble friend the Minister can give some assurance that Her Majesty’s Government would offer a commitment in this regard, because, as the noble Baroness, Lady Boycott, pointed out, everything is interconnected.

In Pakistan, the devastation of food crops due to flooding is starkly visible, but the full impact and the loss of biodiversity will become apparent in due course. When vegetables and crops are replanted, once the waters have subsided and the conditions will allow, there is a danger that the pollinators will no longer be there. The Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services has argued that

“biodiversity loss would leave agricultural systems more vulnerable to threats such as pests, pathogens and climate change”,

and that it would lead

“to an increased risk of crop failure”.

The current devastation will be tragically further compounded by disease and malnutrition.

Here in the UK, heavy rainfall and flooding in some areas in England have caused sewage overflows into rivers and around the coast. We have also experienced unusually high temperatures this year, with the Environment Agency declaring droughts in parts of the south-west, southern and central England, and the east of England. As a result, it is estimated that food yields may be lower. If local food supplies continue to decline due to the impact of climate change, then imports of cheaper or lower-quality, highly processed foods that have little nutritional value would have a detrimental impact on health and further exacerbate the stresses on our healthcare system.

What has happened in Pakistan is of proportions that are unimaginable. It can seem that such events are very far away, but the threat is accelerating and will reach us sooner than we imagine. The hope remains that technological advances and human innovation will save the day, but the emergency is real and immediate and requires urgent action and co-operation at every level and among all nations.

4.35 pm

**Baroness Young of Old Scone (Lab):** My Lords, I declare my interests as chair of the Woodland Trust, as a commissioner at the Food, Farming and Countryside Commission, and as vice-president of a range of environmental and conservation charities. I commend and welcome the maiden speech of the noble Baroness, Lady Willis; it is really great to have another biodiversity freak on board. I very much endorse the statements made about the powerful contributions that excellent scientists have made in this Chamber—it is great to have the noble Baroness here.

[BARONESS YOUNG OF OLD SCONE]

Climate change, biodiversity and food security are totally and deeply interdependent, both globally and nationally. The Armageddon in Pakistan described by the noble Baroness, Lady Mobarik, is absolutely an example of that, and we will increasingly see other examples. Climate change, biodiversity decline, and food and survival catastrophes for people across the world will become more and more frequent.

Right now in the UK, apart from any of the international actions that we can take, we need to ensure that policies are in place that focus on the environment and climate change impact not only of our food production but on our food production. Both are equally important. The current international tensions make it even more important that we address issues of food security in this country. The UK will never be self-sufficient in food production until we learn how to grow pineapples in Kent—that may yet come, of course—but there are some commodity groups where we could produce more of our own food. We are currently only 16% self-sufficient in fruit, 54% in fresh veg and 71% in potatoes, so we could do more. I raise this issue of self-sufficiency in these commodities simply to indicate how that in itself raises a challenge. Expanding potato production, for example, would need more land and water, and potatoes are notoriously hard on soils.

That takes me to the key point on which I want to focus. There are many in the Chamber today who will have guessed that I want to bang on about land use. There are many competing demands for land in this country: agriculture and food production; biodiversity; carbon sequestration; generation of energy; timber production; water protection; development; housing; infrastructure; and land that people can access close to where they live and gain the health and spiritual benefits that those services provide. There are more land needs and pressures than, at the moment, it would seem we have land for. The Cambridge Conservation Initiative has calculated that, if we were simply to use land in the way that we do currently, we would need a third more land than we have. The risk is that we consider all these land-use needs as being in competition and that we continue to make decisions about them in silos.

As I said, many noble Lords will have heard me banging on for years about the need for a land use framework for England, which would provide support for decision-makers at all levels in breaking down the silos of decisions about land use. I simply say that Scotland is on its third land-use strategy. I know that our new Prime Minister does not think a lot of the First Minister of Scotland, but she may have got it slightly more right on this occasion in having a third land-use strategy. It brings into one policy framework the land aspects of a whole range of issues: food production, biodiversity, climate, economic development and social justice. We are not making any more land. I thought it was really fascinating that we have lost sight of the theme of the post-war settlement in this country—of the three capitals: of labour, capital and land. We have lost sight of the fact that scarce land is as important a national asset as capital and labour. I commend that thought to the Treasury and the new Chancellor.

As has been said, the Government recently agreed, in their response to the Dimbleby food strategy, that England needs a land-use framework—hurrah—but we appear to have rather a different Government today, so I ask the Minister to reassure the House that the Government are still committed to developing and launching a land-use framework by 2023. I urge him to widen the perspective of the strategy to cover not just the narrow range of Defra issues of carbon biodiversity and food production, but also the whole range of land-use pressures, especially infrastructure, housing, the built environment and energy generation. In particular, the framework needs to be completely seamless with whatever changes to the planning system the Government are working on. I also press him to give us an indication of the Government's current intentions on planning reforms, because at the moment they have kind of gone into a hole.

Some other wider government policy currently seems a bit confused as well. As the noble Baroness, Lady Boycott, said, the solar panels versus food security argument is unreal, although I do not think the new Prime Minister has yet twigged that. If the Government were to tackle, systematically and urgently, a major programme of energy efficiency and retrofitting in all domestic and commercial properties, and if they were to restore their own zero-carbon new homes policy that was cancelled in a rather cavalier fashion by George Osborne in 2015—if these two things were done—we would need less energy and we would not need solar panels on farmland, because solar power would be generated intrinsically on buildings.

The biodiversity versus food security and carbon action versus food security dichotomies are also unreal. Modelling commissioned by the Food, Farming and Countryside Commission shows that multifunctional land use, where the same land delivers for a range of purposes, means that we can have enough land for all our needs and one land use need not be at the expense of another. Many of the decisions about the best multifunctional land use are made, in reality, at local level by myriad land managers. Whatever framework the Government develop needs to be able to inform decision-making processes below national level, at regional and local level, involving land managers and landowners of all kinds.

Let the science speak: when the land is used effectively in a multifunctional way, we can see a wholly revitalised landscape that is rich in both food and nature and combats climate change. This is about being smarter with the finite land we have. At the risk of a pun, we need to be able to have our land and eat it. Perhaps the Minister will be able to tell me whether he is still committed to a land-use framework that will be broader than just the Defra issues and how the planning reforms are going.

Before I finish, at this tense time for the country in a whole variety of ways, I commend the Queen's Green Canopy initiative, which Her Majesty has hugely supported and has very graciously allowed the Woodland Trust to be involved in. Her Majesty knows about these things.

4.44 pm

**Baroness Worthington (CB):** My Lords, it is always a pleasure to follow the noble Baroness, Lady Young. I thank the noble Baroness, Lady Boycott, for securing

this debate, and add my congratulations to the noble Baroness, Lady Willis of Summertown, on her excellent maiden speech. I look forward to hearing more in the future.

As Peers will know, I am something of a climate change obsessive, but I tend to focus mostly on energy. However, I have become much more interested in agriculture, food and land use and how it relates to climate, because it is a fascinating area. It is one of those aspects of life that we tend to take for granted, but the way we manage our land will be severely affected by climate change. It is also a source of that change to our climate and, unlike energy, which—although let us see what happens—is largely a privatised system, with the Government providing guardrails to companies to make decisions on how we produce our energy, there is huge involvement of the public purse in agriculture. We have a very large subsidy that passes from the public purse—the Treasury—to the guardians of our land every year.

It has been really curious watching this evolution of policy, with Brexit coming into force and Michael Gove uttering the immortal words that we will pay only “public money for public goods”

before departing the scene, leaving us slightly unclear as to what he actually meant by that, and what the detail will be in terms of knowing what we will be paying for in the future. I have a question for the Minister: can we press ahead with providing clarity for the guardians of our land and our agricultural stewards so that they can plan for the future?

It strikes me that farmers are a very isolated breed in general. They obviously have ways in which they communicate among themselves but, by and large, they are being guided by people in whose interests it is to keep them purchasing fertilisers, seeds and chemicals. The people who visit the farm regularly have a vested interest in keeping the status quo. I am not saying that this is true of all farming, but there is a need to think about whether this is right—whether we are providing farmers with the right information for them or the right information for those who benefit from this highly industrialised form of agriculture that has become a norm. I wonder whether there is more of a role for government to create an educational service for farmers to help them understand what they are likely to be facing—a destabilised climate in this country—and how they can expect things to change around them. They are witnessing it themselves but they may not be thinking 20 years hence, when we know that this is just the beginning of the impacts we are likely to see.

Coupled to that, can we be clearer about the payments that we will make to the guardians of our land to provide us with public goods? It strikes me that this subsidy is very good value for money, because we get a whole host of services from our land that are not accounted for or paid for directly. We could say to farmers that this is the minimum level of public money they can expect because of the stewardship role that they provide, and that we would increase it further if they could get to a point where they were helping not only to mitigate their own impact on climate change but acting as an active carbon sink. This would allow other sectors to continue to emit because farming and land use, and our land-use strategies, would deliver

over and above, and we would become much more carbon-rich and store more carbon in our land than we currently do.

That is not easy, but it is not impossible. I looked at the greenhouse gas inventory: at the moment agriculture contributes around 5.5 million tonnes of CO<sub>2</sub> to the atmosphere, from agricultural tractors, transport uses and direct use of energy. Overall, however, our land-use area is a natural sink of around 3 million tonnes at the moment. We are not far from parity in terms of CO<sub>2</sub> emissions. Of course, that picture changes completely when we factor in other greenhouse gases, for which agriculture is largely responsible. Around 25 million tonnes of methane are emitted from the land-use sector into the atmosphere every year, and around 15 million tonnes of nitrous oxide. We have a long way to go to get this sector into a carbon-neutral position so that we can be ready for our net-zero targets.

We have a rather large amount of money available to us that we have been paying out for years and years in agricultural subsidies. It could be repurposed to deliver this increased carbon sink and will, I am sure, deliver increased biodiversity. To get there, we will have to embrace science and I endorse the words of the noble Earl, Lord Caithness: we have to allow modern technology and approaches into our agricultural system to allow us to spare the land, and let nature take a greater role in other parts of the land. We can do that only if we have a land-use strategy and framework that enables us to see where the use of science will be appropriate to increase yields, and where we can afford to allow land to return to a less productive state and deliver more social and environmental benefits.

I have come back from a summer holiday in the Brecon Beacons; it is a beautiful part of the world and I highly recommend it. There are about a million sheep there, however, and I was talking to local ecologists who said the carrying capacity of the area is probably about 100,000—nowhere near a million. We are by a factor of 10 overgrazing this part of the world, which is an incredibly important eco-system with all sorts of benefits. We have to find a way to help farmers move to a position where they are, yes, still farming the land and providing us with the things that society requires, but not encouraging them to keep with livestock that creates methane and is damaging our biodiversity, while probably exacerbating flooding and changing the way the landscape appears aesthetically.

There must be a way of doing this. We have the money and the intention, but we do not seem to have the plan. We need to open up a way of getting farmers to think creatively about how they can contribute. It could be done by setting aside a portion of the money into an auction, so that we pay people to deliver the outcomes we seek. I know some trials have taken place under the ELMS reforms, but that is an established way of helping people to find the best and least-cost solutions to reducing greenhouse gases. I am sure we have the capacity to do that; our carbon markets and carbon financing expertise in the UK are second to none. If we can harness them and help to unleash the creativity that I know is out there in our country, then we stand a chance of having agriculture neutralise its own emissions but then contribute to the reaching of net zero across the economy.

[BARONESS WORTHINGTON]

Although I am, in general terms, quite depressed and rather scared about where we are on climate, I think the UK is uniquely positioned. There is huge potential to lead the world in showing that this sector can not only reach a sustainable future for itself but assist us in solving climate change more generally. I look forward to hearing from the Minister and I thank my colleague and noble friend Lady Boycott, who I know will continue to champion these causes in this House. Thank you.

4.52 pm

**Lord Oates (LD):** My Lords, I join other noble Lords in sending our best wishes and prayers to Her Majesty the Queen and the Royal Family.

I congratulate the noble Baroness, Lady Boycott, on securing this debate and on her very powerful introduction. I pay tribute to the noble Baroness, Lady Willis, for her maiden speech, and what an excellent maiden speech it was. I am not sure it was only the Lord Convener who needed her previous title to be explained, but thank you for that. The noble Baroness's expertise will be hugely appreciated in this House.

I want to focus on the impact on developing countries, and I declare my interest as co-chair of APPGs on Africa, South Africa and Zimbabwe. Some 38 years ago, aged 14, I sat down and watched the famous broadcast by Michael Buerk from northern Ethiopia which brought the world's attention to the catastrophe that was going on in that region. As many noble Lords know, that inspired many people; it created Band Aid and Live Aid, and a whole movement to try to change things.

As a precocious 14 year-old, at the time of EU intervention in stocks and the grain mountains, butter mountains and wine lakes, I felt, along with many others, the outrage that people were starving in parts of Africa when we were awash with plenty. Perhaps unlike most other 14 year-olds, I decided that I was the only person who could solve this, and for complicated reasons—I will not go into them now; I do not have the time—I ran away from home to Ethiopia. I arrived in Addis Ababa, and I quickly discovered, as your Lordships may not be surprised to hear, that the demand for totally unskilled 14-year-old English kids was zero, and that Ethiopia at that time, under a Marxist military dictatorship, was a pretty scary place to be.

Thankfully, I was rescued from that situation by an Anglican clergyman. He gave me some very good advice: first, to go home, although he was kind enough to let me stay there for a little while. He also told me, "Do not lose interest in these issues, because they will be ongoing, but go and get yourself some skills". I took his advice and subsequently worked as a teacher in Zimbabwe, and in the first democratic Parliament in South Africa.

One of the tragedies is that, today, we are again facing a perilous situation in Ethiopia and the Horn, which is driven by climate factors but exacerbated by conflict. Large parts of the world are facing acute food insecurity. The World Food Programme tells us that it is delivering more food aid at present than it has in the whole of its 60-year history. A study published

earlier this year in the *Annals of Nutrition and Metabolism* on tackling protein-calorie malnutrition during world crises highlights the fact that 54% of children are malnourished, while 1.9 billion people are overweight or obese. The statistics around malnutrition show that 462 million people are underweight. In the most vulnerable population, that of children under five, 45 million are wasted and 149 million stunted. We know that that point in life, between ages one and five in particular, is crucial to the future life chances of those children and the all impacts this has on future economic development in those societies.

The acute crisis in food security, driven by climate and biodiversity loss but exacerbated by the Covid pandemic and Russian aggression against Ukraine, is creating a terrifying situation in the world. I was in Sudan a couple of months ago, and the fear of what is coming is palpable. I spoke to the new South African high commissioner in London yesterday, and the impact that the situation is having on household budgets here is of course terrifying, but in places with much more vulnerable populations and economies, it is absolutely terrifying. We have sadly chosen this time to cut our aid budget massively, slashing the nutrition budget by 80%. That is a tragedy to me, because one thing I learned when I was in Ethiopia is that however precocious or determined you are, you cannot change the world on your own. But you can change it if you stand with other people and campaign with them.

One of the things I did when I came back from Ethiopia was to get involved with many other people—across all parties and none, from the faith communities, et cetera—in arguing for us to play our part in sharing some of our wealth with other parts of the world. I was delighted that, during the coalition Government, we reached that 0.7% target. We did much good, not just with the money but with the expertise that DfID developed in issues such as nutrition and food security. Sadly, we are losing that, and that is a tragedy.

It sometimes seems like we have just noticed climate change, because we had temperatures of 43 degrees and there were wildfires in California, and realised that something is happening to the climate. Something has been happening to the climate for a long time. Talk to people in the climate-vulnerable countries—Zimbabwe is one of the most climate-vulnerable countries on earth—which have suffered over many years some devastating impacts, such as waters drying up. Rivers in the rural area where I used to teach were no longer functioning. There was also a terrible cyclone in east of the country driven by climate change. This is not something new; it is something that has been happening for a while and we have to get a grip on it.

We have had much focus on climate, rightly, but it is very important that we also focus on biodiversity. As the noble Baroness, Lady Boycott, and others have said, they are intrinsically linked and we cannot tackle one without the other. Indeed, all three issues are intrinsically linked.

The noble Baroness, Lady Willis, made an important point, which I hope I have got right: nine out of 400 vascular plants are responsible for the majority of the staple foods that we rely on and, in the face of climate change and the need to build resilience, we have to develop the genetic diversity of crops. It is critical.



The noble Baroness, Lady Mobarik, made a very powerful point about the situation in Pakistan, where flooding has been going on since August, if not before, and noted its impacts on people and food security.

We face many challenges. What can we do? The noble Earl, Lord Caithness, gave us some hope about approaches to farming which can help deliver food security and restore biodiversity. There are many initiatives. The Food and Land Use Coalition has put out a 10-point transition plan about how we need to deal with these things holistically. The most important thing we have to do is act on the things we know how to do. The Climate Change Committee has told us many of the things we need to do in the UK and we know many of the things we have to do in the world.

We also all know that story about the frog which, if put in a pan of cold water that is heated up to boiling point, allegedly will not jump out. We probably also know that frogs are not that stupid and they will jump out. However, that story still appears to be true; it is just that it is about humans. We have been watching what has been going on with the climate and biodiversity and we have just sat in the pan and let it get hotter and hotter. We have to jump out now and start to act seriously, in line with the crisis that we face.

5.04 pm

**Baroness Hayman of Ullock (Lab):** My Lords, Her Majesty the Queen and her family are very much in our thoughts at the moment. I am sure that across the House we are all deeply concerned.

This is an important debate. I congratulate the noble Baroness, Lady Boycott, on bringing it to the House and on her comprehensive introduction, which was often quite sobering. I also congratulate the noble Baroness, Lady Willis of Summertown, on her maiden speech, which was excellent. There are few maiden speeches that I have learned quite so much from. It was very interesting and I look forward to her future contributions in the House.

On the debate, the United Nations Food and Agriculture Organization has warned that global loss of biodiversity is threatening the security of the world's food supplies and the livelihoods of millions of people. Land use changes, pollution, overexploitation of resources and climate change were listed as the biggest drivers of this biodiversity loss. My noble friend Lord Stansgate said that biodiversity loss and climate change were two sides of the same coin, and I absolutely agree with him.

Agriculture and its related industries depend hugely on the climate. Crop production and livestock are the largest global food industries and are highly sensitive to climate change. Increases in temperature, changes in precipitation patterns and changes in storm frequency and severity all can significantly affect food production, and we have also heard about the added impact of the war in Ukraine. So it is clear that, in response to these huge challenges, agricultural production and how we manage our food security have to change.

Over the past 20 years, most countries have industrialised their animal agriculture practices, and there is an increasing amount of trade in animal products globally. The noble Baroness, Lady Worthington, talked about the impact of industrialisation. Yet,

insufficient steps are being taken to address this issue and curb practices which drive greenhouse gas emissions, deforestation and biodiversity loss. Farm animal waste and other aspects of the animal agriculture sector generate greenhouse gas emissions, as we have heard during this debate. The national food strategy considered the impact of animal agriculture, so I ask the Minister whether the Government have looked at how to address this further.

The IPCC has stated that climate change is already directly affecting food security and nutrition, which it defines as

“when all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their dietary needs and food preferences for an active and healthy life.”

We need to look at how we can make sure that we provide this, not just for people in our country but right across the globe.

The RSPB says that the role that agriculture, land use change, pollution, unsustainable fishing practices, climate change and development have played in the significant loss of biodiversity in the UK is now widely accepted.

The NFU rightly recognises that climate change is arguably the greatest challenge facing the world and that British farmers are in the front line of increasingly frequent weather extremes. July this year was the driest in England since 1911, and before that were the driest nine months since 1975-76. The right reverend Prelate the Bishop of Manchester talked about the clear signs of climate change right across the world this year, and the noble Baroness, Lady Mobarik, talked movingly about the impact on Pakistan.

Farmers are clearly concerned about the future and need support in protecting, maintaining and enhancing the environment. The NFU also agrees that optimal environmental outcomes should seek to improve nature, enhance air and water quality and build soil health, and has set itself the challenge of agriculture reaching net zero by 2040 in the UK. But the Government have a crucial role to play in this. Food security must be placed at the heart of wider government policies, with a reporting system and clear oversight to ensure that we do not allow our domestic food production to diminish.

CAFOD provided a helpful briefing in which it reminded us that the UK Government made welcome commitments at COP 26 on food and agriculture under the Glasgow Leaders' Declaration on Forests and Land Use. Can the Minister give an update on progress towards delivering on these commitments? We need clear indicators for reporting on new policies and laws, as well as on reduced rates of deforestation, increased land titles for indigenous peoples and local communities, finance for agroecology and actions to repurpose agricultural subsidies.

In their 2021 *Food Security Report*, the Government described food security as a “complex and multi-faceted issue”. At the same time, it identified risks to the UK's long-term food security. It said that climate change, climate variability and biodiversity loss all threatened the long-term security of global food production, and concluded that climate change and biodiversity loss were among the biggest medium to long-term risks to

[BARONESS HAYMAN OF ULLOCK]

UK domestic food production, alongside other factors such as soil degradation and water quality. The noble Earl, Lord Caithness, mentioned the soil health action plan, and I look forward to the Minister's update on where it is.

As we have heard, the Government also commissioned the Dasgupta review, which looked at the risk to the world economy of the loss of biodiversity, particularly to food security. It also said that biodiversity loss was damaging the health of the soil needed to grow the food. The noble Baroness mentioned this in her maiden speech, and it is absolutely critical.

Defra's outcome delivery plan for 2021-22 reaffirmed the Government's "vision and mission" for the environment. It said:

"We are here to make our air purer, our water cleaner, our land greener and our food more sustainable. Our mission is to restore and enhance the environment for the next generation, leaving it in a better state than we found it."

Further, the government's agriculture transition plan said:

"By 2028, we want to see ... a renewed agricultural sector, producing healthy food for consumption at home and abroad, where farms can be profitable and economically sustainable without subsidy"

and with

"farming and the countryside contributing significantly to environmental goals including addressing climate change."

All the work I have just mentioned is excellent—there are lots of fine words here—but we need an integrated approach and real action. The NAO, the Environment Audit Committee and the Treasury have all highlighted the need for Defra to take a lead role in demonstrating the value of more integrated approaches to environmental policy-making, and there are opportunities to develop these approaches. In particular, the *National Food Strategy*, about which we have heard, and the enabling provisions in the Agriculture Act provide the chance to consider food use, land use and environmental systems all together, so that we deliver for the environment as well as for the economy and society.

The noble Earl, Lord Caithness, mentioned the land use strategy, and my noble friend Lady Young of Old Scone spoke with her usual passion about the importance of land use. Why are all these opportunities not being fully grasped and acted on? There is plenty of strategy and policy coming out of government, but to be successful, we need effective delivery. Little is achieved by strategy and policy alone. The resilience and sustainability of our farming system are absolutely critical. The noble Baroness, Lady Worthington, mentioned that the UK has huge potential to lead the world on this, so let us get on with it, act on that potential and deliver what we need.

We know that any farming system we set up, and any new arrangements that come out of the ELMS agreement, must not be at the expense of tackling climate change and mitigating biodiversity loss. Farmers will need proper government support to achieve this while maintaining food production. My noble friend Lady Jones of Whitchurch mentioned the lack of a coherent plan in Defra. The noble Lord, Lord Oates, said that we know what we need to do. My question to

the Minister, who I am sure has listened very carefully to the debate, as he always does, is: what plans do the new Government have to deliver on all their fine words?

5.14 pm

**The Parliamentary Under-Secretary of State, Department for Environment, Food and Rural Affairs (Lord Benyon) (Con):** My Lords, I refer noble Lords to my entry in the register. I start by congratulating the noble Baroness, Lady Boycott, on securing this debate, and welcome this opportunity to respond on the matter of climate change and biodiversity loss impacts on food security. I thought she made an outstanding speech. I agreed with so much of it, and I shall try to address as many points as I can in the course of my speech. I recognise her extensive experience in the area of food insecurity, particularly as chair of the London Food Board and as a trustee of the Food Foundation.

The Food Foundation is a fantastic organisation doing extensive work on the rise in UK households experiencing food insecurity and providing key research in this area, helping the Government to shape policy.

I thank the noble Baroness, Lady Young, for drawing to our attention, on this poignant day, the Queen's Green Canopy. I echo all the sentiments offered to the Royal Family in today's debate.

I join everyone in welcoming the noble Baroness, Lady Willis, to this place, and congratulate her on an absolutely outstanding maiden speech. One of the best duties that I have as a Minister is being responsible for the Royal Botanic Gardens, Kew, and before being a professor of biodiversity at the University of Oxford, the noble Baroness was director of science at Kew, an extraordinary institution of global repute. It delivers so much for this country, not just in terms of what it provides to us as policymakers and to people who learn from it, but also soft power abroad, giving enormous heft to the attempts to tackle the very subject which we are debating today. The role of the noble Baroness there, and the roles of those people who are still at Kew, are extraordinary. Her addition to this House will be of enormous value. We need people who understand science and who can inform debates. I welcome her wholeheartedly and congratulate her on her maiden speech.

In the UK, we are privileged to have a highly resilient food supply chain, as demonstrated in the Covid-19 response. It is well equipped to deal with situations with the potential to cause disruption. Our high degree of food security is built on supply from diverse sources: strong domestic production as well as imports through stable trade routes. We produce 61% of all the food we need, and 74% of the food we can grow or rear in the UK for all or part of the year. These figures have changed little in the last 20 years.

It is vitally important that we continue to meet our food production needs, while protecting our food supply and resilience from the adverse effects of climate change and biodiversity loss. As the noble Baroness on the Front Bench opposite said, the FAO, in its report *The State of Food and Agriculture 2021*, asserted:

"To feed a world population forecast to reach 9.7 billion in 2050, agriculture may need to produce 40-54% more food, feed and biofuel feedstock than in 2012. Improving water security,

restoring species abundance—particularly in pollinators—and protecting soil health so that it functions effectively, is crucial to food security, and closely linked to the significant action that we are taking to tackle climate change and biodiversity loss.”

It is very welcome to have the Climate Change Committee’s chair here today. Its *Independent Assessment of UK Climate Risk* was published in 2021. It offers a detailed and up-to-date insight into the growing risks and opportunities that the UK faces from climate change, including the risks to food supply chains. In this report, the committee notes that the risks to future domestic food productivity and food supply chains are high. Water scarcity is likely to be an early factor affecting the viability and quality of agricultural land in many parts of the world, impairing the ability to grow crops in the conventional way. Many noble Lords have made powerful statements about both the domestic experience that we have had here of recent weather extremes, and experiences abroad.

This means that international food security could become more dependent on the ability of the temperate regions of the world, such as the UK, to produce food sustainably. Here in the UK, climate impacts could include reduced soil function due to erosion and through extreme weather events, causing flooding and leading to increasingly compacted soils, and droughts, thereby causing low soil-moisture levels. There is also a greater risk of pests, pathogens and invasive species, as well as disruption to supply chains from climate change overseas.

Every month, we have a biosecurity meeting. I confess, at times, the picture of some of the pests and diseases that are either here or coming here, and with which we are trying to deal, is very bleak. This is a very sobering immediate impact from climate change to which we need to react.

The noble Baroness, Lady Jones, asked about net zero. The simple answer is that, yes, there is an absolute commitment. It really would not matter if there was not, because it is in law. No Government could possibly get a reversal of our intentions to achieve net zero through both Houses. It was announced today that my colleague in the other place Chris Skidmore is to lead a review on net zero to find the most efficient and fastest way to reach our climate targets. That will report to the new Prime Minister by the end of the year.

Recognising the importance of food security, under the Agriculture Act 2020 the Government made a commitment to produce an assessment of our food security at least once every three years. The first UK food security report was published last December and covers food security in the widest sense, from global food availability and sustainability to domestic supply chain resilience, household food security and food safety. We published the government food strategy this summer, setting out a plan to transform our food system to ensure it is fit for the future.

The point of the noble Baroness, Lady Boycott, about the ability to produce food from less land was well made. Martin Lines, who runs the Nature Friendly Farming Network, said to me—I think this is right—that he is producing the same amount of food from 11% less land. That 11% is turned over to nature. I will come on to talk about how we can be positive because, as we have seen, nature can recover very quickly. There are plenty of examples of that now. We can produce food

and be secure in our supply chains, but we can also do it sustainably and protect future generations, as the Dasgupta review requires of us, if we follow that excellent report.

We announced in the food strategy that we will publish a land-use framework for England in 2023, which will set out land-use change principles to balance climate, food and environmental outcomes. We are seeking to deliver as much as we can from our limited supply of land and to deliver the full range of government commitments through multifunctional landscapes. I hope this addresses the good point that the noble Baroness, Lady Young, made. A decade ago, people such as Sir Graham Wynne were talking to me about this need and, I confess, I did not really understand what was meant. I do now and it is vital. The House of Lords report that presaged this government commitment is worth reading; it is the most powerful reason for backing what we seek to do. I hope to keep the House informed of progress, if I am still here—I have yet to be told, in answer to that question.

I was greatly moved by what my noble friend Lady Mobarik said about Pakistan. The UK has committed to spend £11.6 billion of climate change finance, of which £3 billion will be on nature. We are one of the biggest contributors to the International Climate Fund and this will help economies such as Pakistan to cope with these sorts of terrible moments. We are very focused on food vulnerability across the world. We committed an extra £130 million to the World Food Programme and we are a major investor in research and development, especially in areas where agriculture is destabilised by the climate and method of farming there. We need to support those countries to move to more sustainable systems.

The Government are committed to taking action to mitigate climate change and to adapt to its impact. To support farming, we are introducing three schemes, which have been referred to: the sustainable farming incentive, local nature recovery and landscape recovery. Together, these schemes are intended to provide a powerful vehicle for achieving the goals of the 25-year environment plan and our commitment to net zero by 2050, while supporting the rural economy. Through these schemes, farmers and other land managers may enter into agreements to be paid for delivering public goods, including adaptation to and mitigation of climate change.

In her excellent speech, the noble Baroness, Lady Worthington, talked about what more could be done in addition to ELMS and whether this was all. There are many other schemes that farmers can access, but I emphasise the importance of the private sector here and the ability of private sector green finance to enhance farmers’ income by doing public goods. Getting some of the trillions of dollars of ESG money sloshing around into dealing with climate change and reversing declines in biodiversity is a very important part of what we are trying to do in promoting green finance spending that is honest and is not greenwash. That is a very important priority that we have in the department.

We included a requirement in the Environment Act to set a new, historic, legally binding target to halt the decline in species abundance by 2030. That is seven years away. To be pessimistic, there are many reasons

[LORD BENYON]

why any Government could fail to hit that target, but we are utterly determined to hit it. But if I want to be optimistic, I point out that the ability of nature to recover very quickly has been proved, on land and at sea, if we protect and enhance those environments in the right way, with highly protected and properly managed marine protected areas. The ability of soils to function properly and the ability of nature to restore and regenerate can be remarkably quick. Nature can be kind to us in that respect if we get on with it. That is what we are doing.

Several measures are being developed to help improve and protect soil in England, making it more resilient to the impacts of climate change. This includes new future farming schemes, which will pay farmers for sustainable approaches to farm husbandry that deliver for the environment, improve and protect soil health and support farm productivity. I say to my noble friend Lord Caithness that the soil action health plan will be incorporated into the environmental improvement plan, which is to be presented to Parliament, as is legally required, by January. It might be before then, but it will be by January.

On the important point made by the noble Viscount, Lord Stansgate, about biodiversity, we in the UK have to do that in seven years, as I said. In nature terms that is a heartbeat, but we are setting out very clear plans as to how we are to achieve that.

The UK is co-chair of the High Ambition Coalition for Nature and People, a group of more than 100 countries that are championing a global deal for nature and have signed up to protect at least 30% of the world's land and oceans by 2030, to halt the accelerating loss of species and to protect vital ecosystems that underpin our economic security. Also, COP 26 showcased ambition and action on repurposing public policies and support to deliver sustainable agriculture and food systems. The UK presidency placed nature at the heart of the UNFCCC. Some 45 nations pledged urgent action and investment to protect nature and to shift to more sustainable ways of farming. A ground-breaking package was agreed to halt and reverse forest loss and to transition towards sustainable land use. It includes 142 countries, representing over 90% of the world's forests, pledging to halt and reverse forest loss and land degradation by 2030.

The UK has also announced a £65 million Just Rural Transition support programme to help communities move towards more sustainable methods of agriculture and food production. The UK is driving up global ambition on biodiversity, and hopes to create a Paris moment for nature at the Convention on Biological Diversity in Montreal this December.

In the few minutes I have left, I will try to address some of the other points that were raised. The noble Baroness, Lady Boycott, made a very important point about our position in the global battle to tackle these problems. We are stepping up to respond. We are calling for all countries to keep food trade flowing. At the World Bank and the IMF spring meetings in April, the UK and our partners secured the largest ever financial commitment from the World Bank, of £170 billion before the end of June to support countries that are facing economic hardship resulting from the

Russian invasion of Ukraine. With G7 allies, we are discussing Germany's proposal for a G7 global alliance on food security to scale up a rapid needs-based co-ordinated response, building on current peace and security architecture and avoiding a fragmented global response.

Obviously, tackling domestic food poverty is a key priority for the Government. In the Spring Statement the Chancellor announced that we are continuing to provide targeted cost of living support for households in most need. From April, the Government are providing an additional £500 million to help households with the cost of essentials, bringing the total funding for this support to £1 billion. We take food insecurity seriously, which is why the Government added internationally recognised food security questions to the Family Resources Survey. The latest national statistics from the survey show that 93% of households are food secure, but we are working hard and accept that large numbers of households are facing wider cost of living issues.

I think I have already addressed the points made by a number of noble Lords on the food strategy.

The noble Baroness, Lady Jones, asked how resilient the UK food supply is. Thanks to our farmers, we are almost 100% self-sufficient in fresh poultry and certain vegetables and close to 90% self-sufficient in eggs. A lot of points were made about fruit and horticulture. Our horticultural plan is soon to be announced, as well as incentives to support that sector and make sure that we are producing as much as we can nationally and locally. We want to disrupt the rather clunky supply chains through new technologies such as vertical farming, and we will see this happening in coming years.

There are a number of other points which I will seek to write to noble Lords about, given the pressing time.

I finish by saying that my noble friend Lord Goldsmith has been leading work to ensure that the success of COP 26 is embedded in the COP 15 conference, which was due to be held in Kunming, China, as half of the food we eat is totally dependent on biodiversity. This is a key point. This COP could not come at a more important time, and we have to make sure that we have success at the end of it. What we do nationally and domestically is important—it is important to our citizens; people really mind about the state of our countryside, nature and how we produce food—but we cannot do it in isolation from the global challenges that we face at this important time. Frankly, with the at times terrifying statistics on biodiversity decline, we need to be part of international focus on trying to tackle that as well as making sure that domestically we are farming and producing food sustainably and reversing the tragic decline in species that we have seen in recent decades.

5.33 pm

**Baroness Boycott (CB):** My Lords, I thank the Minister for his reply. As I think he knows, I have a great deal of time and respect for his points of view. I am afraid I do not completely share his optimism that we are getting it all right and looking at green and pleasant lands or sunlit uplands—whatever you want to call them. I have been told that I only have two minutes, so I cannot refer to everyone's fantastic

contributions, but I would obviously like to single out the noble Baroness, Lady Willis, and say how thrilled I am that she is here.

I also point out that people have talked about what is happening in Pakistan and across the world. In this country we have always been shielded from this stuff; we do not think it affects us. In fact, it is affecting us hugely. The noble Baroness, Lady Mobarik, talked about the rice production of Pakistan being severely curtailed. That will affect not only our supply but our prices. I chair Feeding Britain and see this every day.

Food security is to do with everyone. Food is at the bottom—or top, wherever you want to put it—of practically everything we do. We can live without

energy, but we cannot live without food. This has been shown by the fantastic contributions from everyone in this House. It is in everything, whether we are talking about water, soil or big companies that run the world. It needs an extreme shake-up. At the moment, we fiddle at the margins. Politically it looks impossible, but that is no reason to say that we should not try.

I thank noble Lords very much for being here tonight. I would be grateful if the Minister could write to as many people as possible as some really important points were made.

*Motion agreed.*

*House adjourned at 5.35 pm.*





