European Union Act 2011 (Amendment) Bill: New Clause 1 - Complaints about exercise of public health functions by local authorities

Sarah Wollaston (Totnes Conservative) Click here to see Sarah Live

Rushanara Ali spoke of health inequalities in her constituency. Perhaps she should look at the King's Fund's annual review of NHS performance between 1997 and 2010, which "identified the lack of progress in reducing health inequalities as the most significant health policy failure of the last decade."

Opposition Members should bear that in mind when they talk of a two-tier health service, because they fail to focus on outcomes and they fail to focus on inequalities.

I welcome the duty of the Secretary of State, the NHS commissioning board and clinical commissioning groups to have regard to reducing health inequalities. Let us see something done about that scandal. I also welcome the work of the NHS Future Forum in setting out the central dilemma surrounding the role of the Secretary of State. The NHS should be freed from day-to-day political interference, but it must also be clear that the Secretary of State retains ultimate responsibility.

Debbie Abrahams (Oldham East and Saddleworth, Labour)

Will the hon. Lady give way?

Sarah Wollaston (Totnes, Conservative)

I will not, because so many Members are waiting to speak.

There has been real scaremongering about, in particular, the difference between the duty to provide and the duty to secure provision, but I believe that the wording simply reflects the reality. The key issue is the line between the ability to step in if things go wrong, and the very real need for politicians to step back and let clinicians and patients take control.

I shall cut my speech short because I have been asked to be brief, but let me end by saying that, for three clear reasons, I would not be supporting the Bill if I thought that it would lead to the privatisation of the NHS. [Hon. Members: "Have you read it?"] I assure Members that I have read it in great detail.

Let me give those three clear reasons. First, clinicians will be in charge of commissioning. Secondly, the public will be able to see what clinicians are doing. Thirdly, neither clinicians nor the public will allow privatisation to happen. They do not want it to happen, and neither do Members of this House.

PCTs and foundation trusts did not meet in public, but they will do so in future, and it is the public and patients who will ensure that the NHS is safe in the hands of the Conservatives and the Liberal Democrats.
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