

Oral Answers to Questions: Health and Social Care

Volume 773: debated on Tuesday 21 October 2025

See the full transcript [here](#)

The session of *Oral Answers to Questions on Health and Social Care*, held on 21 October 2025, opened with discussion concerning the **Vaccine Damage Payment Scheme**. Mr Peter Bedford MP (Mid Leicestershire, Con) raised concerns regarding the adequacy of the current payment system, referencing the case of his constituent, Ms Kelly Hatfield, whose father died following a COVID-19 vaccination. He noted that the payment amount, which has remained unchanged since 2007, fails to reflect inflation or the long-term impact on affected families. The Parliamentary Under-Secretary of State, Ms Ashley Dalton, expressed her sympathies but reiterated that the scheme constitutes a one-off payment rather than compensation. She confirmed that the Government is reviewing the scheme, informed by campaigners' input, while maintaining that all UK vaccines are authorised by the Medicines and Healthcare Products Regulatory Agency, which operates to internationally recognised safety standards. Ms Dalton criticised Reform Party representatives for promoting anti-vaccine misinformation and stressed that the current Government's policies are grounded in scientific evidence.

Attention then turned to the **performance of NHS Trusts**, with the Secretary of State for Health and Social Care, the Rt Hon Wes Streeting MP, outlining the Government's record investment of £26 billion in the NHS and the delivery of five million additional appointments in its first year, alongside a reduction of over 200,000 on waiting lists. Mr Streeting announced the introduction of new NHS league tables designed to expose poor performers and facilitate targeted intervention. He stated that high-performing leaders were being assigned to the most challenged trusts, that failing managers would have their pay docked, and that persistent failure would lead to restrictions on boards. In response to questions from Mr Shaun Davies MP (Telford, Lab), he reaffirmed his commitment to supporting underperforming trusts and cited notable improvements in Shropshire and Telford, including 94,000 extra appointments and a reduction of 14,000 in local waiting lists. When challenged by opposition members over the costs of NHS England's reorganisation, Mr Streeting defended the move as a necessary measure to reduce bureaucracy and redirect resources to frontline care.

Subsequent questions focused on **maternity and neonatal care**. Mr Streeting expressed grave concern about the state of maternity care inherited by the Government, announcing the establishment of an independent investigation chaired by Baroness Amos to examine failings in NHS maternity and neonatal services. He also confirmed an inquiry into serious incidents at Leeds Teaching Hospitals. Responding to Ms Samantha Niblett MP (South Derbyshire, Lab), who recounted the death of her constituent's baby following a misdiagnosis, Mr Streeting emphasised the importance of continuity in GP care and reported record levels of access to perinatal mental health and bereavement services. He noted that £36.5 million had been allocated to bespoke perinatal and parent-infant relationship support through the *Family Hubs and Start for Life* programme. When questioned by Mr Joshua Reynolds MP (Maidenhead, LD) and Ms Helen Morgan MP (North Shropshire, LD), the Secretary of State recognised that staffing levels remain a challenge but insisted that quality of care, not just quantity of staff, must be the focus. He

rejected assertions that national maternity funding had been cut, clarifying that resources had been devolved to local systems to deliver more responsive care.

The Minister for Care, Mr Stephen Kinnock MP, then addressed the matter of **funding for children's hospices**, confirming a three-year funding settlement of £80 million designed to provide stability and predictability after years of annual "cliff-edge" allocations. He further announced that £12 million of the £100 million national capital allocation had been designated for children's hospices. In response to questions from Mr Neil Duncan-Jordan MP (Poole, Ind) and Mr Paul Holmes MP (Hamble Valley, Con), Mr Kinnock emphasised that the new approach ensures longer-term planning and underlined the Government's commitment to financial stability within the sector.

The debate then considered the **New Hospital Programme**, with Ms Karin Smyth MP (Minister for Secondary Care) confirming that the former Conservative Government's pledge to build 40 hospitals by 2030 was unfunded and unrealistic. She stated that the current Government had introduced a credible plan, ensuring appropriate design, construction, and business case funding. Responding to Mr Steve Darling MP (Torbay, LD), who described Torbay Hospital's deteriorating condition, Ms Smyth noted that £7.3 million had already been allocated for essential works and pledged to meet with local representatives to explore further investment.

Turning to **NHS reorganisation**, Ms Smyth confirmed that the Government was abolishing NHS England and over 200 related bodies as part of the effort to reverse the structural fragmentation created by the 2012 Lansley reforms. She stressed that the objective was to deliver a more streamlined, accountable health service integrated within the Department of Health and Social Care. Responding to concerns from Ms Rebecca Smith MP (South West Devon, Con) and Ms Rachael Maskell MP (York Central, Ind), she affirmed the Government's ongoing efforts to improve children's mental health provision and the importance of local authority collaboration.

The Minister for Public Health, Dr Zubir Ahmed MP, then addressed the potential of **NHS Online**, a new virtual hospital intended to deliver 8.5 million digital appointments over three years, quadrupling the average capacity of an NHS trust. He explained that the service would initially focus on hospital care but could later expand to cover children's mental health services. Ms Natasha Irons MP (Croydon East, Lab) highlighted the crisis in young people's mental health, and Dr Ahmed confirmed that £688 million had been allocated to expand school-based teams and establish new *Young Futures* hubs. When challenged by Mr Seamus Logan MP (SNP) regarding Scotland's shorter waiting lists, Dr Ahmed replied that England's investment in digital infrastructure far exceeded that of the Scottish Government.

On **cancer diagnosis**, Ms Ashley Dalton MP outlined the Government's delivery of 135,000 more diagnoses within the 28-day standard compared to the previous year. She detailed the introduction of *Jess's Rule*, which requires GPs to re-evaluate patient cases after three consultations with worsening or undiagnosed symptoms. In reply to Ms Lauren Sullivan MP (Gravesham, Lab), Ms Dalton reaffirmed her department's focus on early detection. When Mr Louie French MP (Old Bexley and Sidcup, Con) accused the Government of cutting community diagnostic centre (CDC) funding, Ms Dalton refuted the claim, stating that CDC expansion remained ongoing nationwide.

Regarding **general practice funding**, Mr Kinnock stated that an additional £1.1 billion—the largest investment in a decade—had been secured for primary care, enabling the recruitment of 2,000 new GPs and the introduction of online appointment systems. In response to Ms Katie Lam MP (Weald of Kent, Con), he acknowledged pressures on GP practices but noted improvements in patient satisfaction and access.

Ms Dalton also discussed support for patients with **acute myeloid leukaemia**, announcing a national cancer plan to be published in early 2026. Sir Gavin Williamson MP (Stone, Con) presented the case of a constituent unable to receive a second stem-cell transplant under current rules, and Ms Dalton confirmed that his concerns would receive a written response. Mr Peter Prinsley MP (Bury St Edmunds and Stowmarket, Lab) referred to the promising results of the Galleri blood test trial for early cancer detection, which Ms Dalton commended as an important step in medical research.

Further questions addressed **access to GP appointments**. Mr Streeting reiterated that £1.2 billion had been invested in general practice, alongside the recruitment of 2,000 new GPs and the introduction of digital booking systems. Responding to concerns from Mr Olly Glover MP (Didcot and Wantage, LD) and Ms Michelle Welsh MP (Sherwood Forest, Lab), he agreed to investigate delays in constructing new surgeries and shortcomings in local commissioning arrangements.

Discussion on **public–private partnerships** followed, during which Ms Smyth confirmed that the NHS would remain free at the point of use, while the Government explored partnerships to deliver community-based care. Responding to Mr Ian Lavery MP (Blyth and Ashington, Lab), she assured Members that the errors of the former *Private Finance Initiative* would not be repeated and that all proposals would undergo rigorous value-for-money assessments.

In addressing **health service spending**, Ms Smyth reported that NHS expenditure on agency staff had been reduced by one-third, with resultant savings reinvested into staff pay and patient care. When pressed by Mr Richard Burgon MP (Leeds East, Lab) to rule out private financing for new NHS clinics, she reaffirmed that lessons from the PFI era had been learned. Mr Tim Farron MP (Westmorland and Lonsdale, LD) raised rural access issues, and Ms Smyth indicated that reforms to financial flows aimed to eliminate “perverse incentives” that disadvantaged rural communities.

On **women’s health**, Dr Ahmed confirmed significant progress in implementing the Women’s Health Strategy, including 5.2 million additional appointments and improved supply of hormone replacement therapy (HRT) products. Responding to Mr Josh Newbury MP (Cannock Chase, Lab), he detailed Government measures to mitigate temporary shortages and improve GP training on menopause management. Ms Alison Bennett MP (Mid Sussex, LD) expressed concern about misinformation online, to which Dr Ahmed replied that NHS Digital platforms were being strengthened to ensure patients had access to accurate medical guidance.

The issue of **virtual wards** was subsequently addressed by Mr Kinnock, who praised their success in enabling hospital-level care at home, freeing hospital capacity and accelerating recovery. He reported that the number of virtual ward beds had risen to 12,522. Ms Layla Moran MP (Oxford West and Abingdon, LD) warned of local funding difficulties threatening Oxfordshire’s

service, and Mr Kinnock acknowledged the challenge but reaffirmed the Government's commitment to expanding the model.

Questions on **community care integration** followed. Mr Kinnock confirmed that the Government's 10-year plan would reorient NHS resources towards local and preventative services, expanding dental and pharmacy provision. Mr Jas Athwal MP (Ilford South, Lab) raised inequalities in access to Parkinson's nurses, and the Minister confirmed that this would be addressed in the forthcoming *10-year workforce plan*.

During the **Topical Questions**, Mr Streeting summarised the Government's recent achievements, including £500 million for a fair pay agreement for care workers, £80 million for children's hospices, the creation of *NHS Online*, and the introduction of *Jess's Rule*. He reported reductions in waiting lists and improvements in GP satisfaction, asserting that these outcomes demonstrated the difference made by a Labour Government. Responding to the newly appointed Shadow Secretary of State, Mr Stuart Andrew MP (Con), who pressed for details of redundancy costs associated with the NHS reorganisation, Mr Streeting stated that voluntary redundancy processes were underway and reiterated that Labour's reforms would reverse years of Conservative inefficiency and mismanagement.

Further questions addressed a broad range of subjects, including emergency preparedness, hospice and dental funding, digital hospital systems, autism diagnosis delays, rare and terminal cancer awareness, and devolved coordination on cancer screening. Members also raised concerns about care home closures, dyslexia and mental health support, and the need for improved medical isotope supply. In closing, Mr Gregory Campbell MP (DUP) sought assurance that medical advances, such as improvements in prostate cancer diagnosis, would be shared swiftly with the devolved nations. The Secretary of State confirmed that such cooperation remained a key Government commitment.