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[The Health and Social Care Committee](#)

25/11/2015

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Cynulliad
Cenedlaethol
Cymru

National
Assembly for
Wales

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Cofnodir y trafodion yn yr iaith y llefarwyd hwy ynddi yn y pwyllgor. Yn ogystal, cynhwysir trawsgrifiad o'r cyfieithu ar y pryd.

The proceedings are reported in the language in which they were spoken in the committee. In addition, a transcription of the simultaneous interpretation is included.

Aelodau'r pwyllgor yn bresennol
Committee members in attendance

Peter Black	Democratiaid Rhyddfrydol Cymru (yn dirprwyo ar ran Kirsty Williams) Welsh Liberal Democrats (substitute for Kirsty Williams)
Alun Davies	Llafur Labour
John Griffiths	Llafur Labour
Altaf Hussain	Ceidwadwyr Cymreig Welsh Conservatives
Elin Jones	Plaid Cymru The Party of Wales
Darren Millar	Ceidwadwyr Cymreig Welsh Conservatives
Lynne Neagle	Llafur Labour
Gwyn R. Price	Llafur Labour
David Rees	Llafur (Cadeirydd y Pwyllgor) Labour (Committee Chair)
Lindsay Whittle	Plaid Cymru The Party of Wales

Eraill yn bresennol
Others in attendance

Mark Drakeford	Aelod Cynulliad, Llafur (y Gweinidog Iechyd a Gwasanaethau Cymdeithasol) Assembly Member, Labour (the Minister for Health and Social Services)
Helen Whyley	Swyddog Nyrsio, Llywodraeth Cymru Nursing Officer, Welsh Government
Kirsty Williams	Aelod Cynulliad, Democratiaid Rhyddfrydol Cymru (yr Aelod sy'n Gyfrifol am y Bil Lefelau Diogel Staff Nyrsio (Cymru)) Assembly Member, Welsh Liberal Democrats (Member in charge of the Safe Nurse Staffing Levels)

(Wales) Bill)

Rhian Williams Cyfreithiwr, Llywodraeth Cymru
Lawyer, Welsh Government

Swyddogion Cynulliad Cenedlaethol Cymru yn bresennol
National Assembly for Wales officials in attendance

Sian Giddins	Dirprwy Clerc Deputy Clerk
Gwyn Griffiths	Uwch-gynghorydd Cyfreithiol Senior Legal Adviser
Llinos Madeley	Clerc Clerk
Lisa Salkeld	Cynghorydd Cyfreithiol Legal Adviser
Philippa Watkins	Y Gwasanaeth Ymchwil Research Service

Dechreuodd y cyfarfod am 08:59.
The meeting began at 08:59.

Cyflwyniadau, Ymddiheuriadau a Dirprwyon
Introductions, Apologies and Substitutions

[1] **David Rees:** Good morning, and can I welcome Members of the committee and the public to this today's session of the Health and Social Care Committee? Before we start our proceedings today, can I just do a few of the housekeeping rules? Can I please remind Members that it is bilingual, and if you require translation from Welsh to English, the headphones are available for the simultaneous translation on channel 1? If you require amplification, amplification is available on channel 2. There is no scheduled fire alarm this morning. So, if one does occur, please follow the directions of the ushers to leave the building safely. Can I remind all Members and witnesses to switch off your mobile phones or put them on silent—thinking about that; I better do it myself—to ensure that they don't interfere with our broadcasting equipment? Can I also welcome Peter Black to this morning's committee, who's substituting for Kirsty Williams, who's actually the Member in charge of this particular Bill?

09:00

**Bil Lefelau Diogel Staff Nyrsio (Cymru): Cyfnod 2—Trafod Gwelliannau
Safe Nurse Staffing Levels (Wales) Bill: Stage 2—Consideration of
Amendments**

Mae gwelliannau a nodir ag [R] yn dynodi bod yr Aelod wedi datgan buddiant cofrestradwy o dan Reol Sefydlog 2 neu fuddiant perthnasol o dan Reolau Sefydlog 13 neu 17 wrth gyflwyno'r gwelliant.

Amendments marked [R] mean that the Member has declared either a registrable interest under Standing Order 2 or relevant interest under Standing Orders 13 or 17 when tabling the amendment.

[2] **David Rees:** Okay. Then we go into item 2 of today's business, which is Stage 2 consideration of amendments to the Safe Nurse Staffing Levels (Wales) Bill. Can I welcome the Member in charge, Kirsty Williams, and her team, Philippa Watkins and Lisa Salkeld? Can I also welcome the Minister, Mark Drakeford, and his team, Helen Whyley and Rhian Williams?

[3] Can I just go through a few of the procedural issues? As the committee agreed on 19 November, the order of consideration will be sections 2 to 5 of the Bill, section 1 of the Bill, and then the long title. The amendments have been grouped to facilitate debate, and each group of amendments will be debated in turn, but the order in which amendments will be called and moved for decision will be dictated by the marshalled list, which all Members should have.

[4] Due to the nature of amendment 29, and a number of other amendments tabled to this Bill, group 1 is very large. So, to facilitate debate on group 1, it's the intention to structure the debate thematically, and details of the sub-themes are set out under group 1 on the groupings list. The note outlining the structure of the sub-themed debate is given on pages three and four. We'll provide more details when we go into group 1.

[5] On groups 2 to 4, I will first call the proposer of the lead amendment in the group to move and speak to that amendment, and any other amendments in the group. I will then call on Members who wish to speak. If the Minister does not have a lead amendment, once all committee members have spoken I will call him to speak. Kirsty Williams will then be called as the penultimate speaker, in her capacity as Member in charge of the Bill, and the

proposer of the lead amendment will then be asked to close the debate in that group.

[6] Following each group, I will ask the Member who moved the lead amendments whether they wish to move to a vote on the amendment. If not, the Member may seek the agreement of the committee to withdraw. If the amendment is not withdrawn, I will put the question on the lead amendment and ask whether any Member objects to the amendment being agreed. If there is no objection, the amendment will be deemed to be agreed in accordance with Standing Order 17.34. If any member of the committee objects, I will call for a vote by a show of hands. The vote will be recorded in the minutes, so please keep your hand raised until the clerks have recorded a vote. In accordance with Standing Order 17.37 and 6.20, if there's a tied vote, as Chair, I will exercise my vote against the amendment.

[7] I will call on the proposers of other amendments in each group to move their amendments at the appropriate time, in accordance with the marshalled list. If you do not wish to move the amendment, you should say so clearly when your amendment is called. For the record, only committee members can move amendments. Therefore, in accordance with the convention agreed by the Business Committee, as Chair, I will move the amendments on behalf of the Minister. For expediency, I will assume the Minister wishes me to move all the amendments in his name, unless he actually indicates otherwise. I do not intend to use the words 'formally moved' on each occasion, but Members may take my putting the question as an indication of each amendment being moved formally. Minister, if you do not wish a particular amendment to be moved, please indicate at the relevant time.

[8] As is the usual practice, advisers to the committee, to the Member in charge and to the Minister are not expected to provide advice on the record. If Members need to seek legal advice during proceedings, please do so either by passing a note to the relevant adviser, or by requesting an adjournment to the proceedings to have that advice. Are there any questions? Sorry for the long spiel, but I think it's important we clarify the position, particularly for the public as well. Okay, in that case, let's move on to the business of the day.

Grŵp 1: Dyletswydd i gynnal Lefelau Diogel o Staff Nyrsio (28, 29A, 29B, 29C, 29D, 29E, 29F, 29G, 29H, 29I, 29J, 29Z, 29AA, 29AB, 29AC, 29AD, 29K, 29L, 29M, 29N, 29O, 29P, 29Q, 29R, 29S, 29T, 29U, 29V, 29W, 29X, 29Y, 29AE, 29, 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 30A, 30B, 30, 13, 14, 31A, 31, 15, 16, 36, 37, 32, 17, 18)

Group 1: Duty to maintain Safe Nurse Staffing Levels (28, 29A, 29B, 29C, 29D, 29E, 29F, 29G, 29H, 29I, 29J, 29Z, 29AA, 29AB, 29AC, 29AD, 29K, 29L, 29M, 29N, 29O, 29P, 29Q, 29R, 29S, 29T, 29U, 29V, 29W, 29X, 29Y, 29AE, 29, 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 30A, 30B, 30, 13, 14, 31A, 31, 15, 16, 36, 37, 32, 17, 18)

[9] **David Rees:** The first grouping of amendments to consider is in relation to the duty to maintain safe nurse staffing levels. As noted in the groupings list, in order to facilitate debate on this large group, the structure of the discussion is in sub-themes. In the first instance, I will call the Minister to speak to his amendments 28 and 29. I will then call on committee members, the Member in charge, and the Minister, to discuss each sub-theme in turn. Once all sub-themes have been debated, I will call on the committee members, the Member in charge, and the Minister, to make any final remarks—in that order. We will then vote on the amendments, at the end of the group, in accordance with the order in which they appear on the marshalled list. The lead amendment in this group is amendment 28.

Cynigiwyd gwelliant 28 (Mark Drakeford).

Amendment 28 (Mark Drakeford) moved.

[10] **David Rees:** I formally move amendment 28, in the name of the Minister, and I call on the Minister to speak to the lead amendment in this group—amendment 28—and to make any introductory comments on amendment 29. Minister.

[11] **The Minister for Health and Social Services (Mark Drakeford):** Thank you very much, Chair. What I intend to do, as you said, is to make some introductory remarks in relation to amendments 28 and 29, and then reserve any more detailed contribution as we get to each sub-theme.

[12] So, in introducing this part of the discussion, I just want to remind Members that, when the Member in charge introduced this Bill, in December 2014, I said then that I agreed with the purpose behind the Bill, and wanted to try to support the legislation, by working with the Member in charge to achieve its aims. The amendments tabled by the Government this morning

reflect the discussion that we have had as a result of that decision. I don't expect, Chair, that I will always have persuaded the Member in charge to share my view; I hope, however, that, by the end of the morning, we might have achieved sufficient common ground to find ways that will allow the Bill to proceed and on to the statute book. I say that because the Government amendments are consistent with the objectives set out by the Member in charge on introduction: to ensure that we have the right number of nurses in place to meet the particular circumstances of a particular adult acute medical or surgical in-patient ward in Wales.

[13] The essence of the Government amendments, proposed at Stage 2, are about practicalities. They are about the means by which we decide upon the required level of nurse staffing, and how we account for the operation of the system. The Government amendments focus on the 'how' rather than the 'what' of the Bill, aiming to secure its intended outcomes in ways that avoid the unintended consequences warned of in this committee's Stage 1 proceedings.

[14] At this point, Chair, I hope it would be helpful if I just briefly set out the two principal duties in the Bill, as amended by amendment 29, and what the Bill would then achieve.

[15] Firstly, it's important to know that local health boards are already under a duty, in relation to their areas, to provide nursing services to such an extent as they consider necessary to meet all reasonable requirements. NHS trusts in Wales that provide nursing services must also provide those services to such an extent as they consider necessary to meet all reasonable requirements. Now, the new section 25A, introduced by the Government amendments, would extend the existing duty to require local health boards, and NHS trusts that provide nursing services, to have regard to the importance of providing sufficient nurses to allow nurses time to care for patients sensitively.

[16] Secondly, the new section 25B would place a duty upon local health boards and NHS trusts in Wales to designate a person to calculate the nurse-staffing level for acute adult medical in-patient wards and adult acute surgical in-patient wards. There are linked duties under new section 25B to take all reasonable steps to maintain the nurse-staffing level and to make arrangements to inform patients of the nurse-staffing level. There is a regulation-making power that allows the Welsh Ministers to make regulations that extend the scope of the duty to calculate nurse-staffing

levels to other NHS settings.

[17] The new section 25C prescribes how the designated person must calculate the nurse-staffing level using the triangulated method, to which we will return, I'm sure, in one of the later groups. New section 25D places a duty upon the Welsh Ministers to issue guidance about the duties under sections 25B and 25C. And, finally, new section 25E sets out the reporting arrangements for health boards and NHS trusts, where applicable to trusts. I will be asking Members to vote in favour of Government amendments 28 and 29 because, in that practical way, they give effect to the original intention of the Bill, but do so in a way that is both proportionate and practical.

Is-thema o fewn Grŵp 1: (a) Y Disgrifiad o Lefelau Staff Nyrsio (Gwelliannau 29A, 29B, 29E, 29F, 29G, 29H, 29I, 29K, 29L, 29M, 29N, 29O, 29R, 29S, 29V, 31A (28, 29))

Sub-theme within Group 1: (a) The Description of Nurse Staffing Levels (Amendments 29A, 29B, 29E, 29F, 29G, 29H, 29I, 29K, 29L, 29M, 29N, 29O, 29R, 29S, 29V, 31A (28, 29))

[18] **David Rees:** Thank you, Minister. We will now move to debate the sub-themes within group 1, and, as I indicated earlier, we will not vote on any amendments within group 1 until all sub-themes have been debated and all final comments and debates on group 1 have been provided.

[19] So, sub-theme A is the description of nurse staffing levels and the first sub-theme amendment is led by amendment 29A. I call on Darren Millar to move amendment 29A and to speak to the amendments in this sub-theme.

[20] **Darren Millar:** Thank you, Chair, and can I first of all say, in opening my remarks on this particular sub-theme, how much I welcome the fact that we've been debating this Bill in the Assembly? I think that it is a timely Bill and I want to pay tribute to Kirsty Williams, the lead Member on this issue, and the Royal College of Nursing in Wales for the work that they have done in preparing the ground amongst Assembly Members and, indeed, with the Government, to ensure that this Bill gets on the statute books.

[21] I have to say that, when I saw amendment 29 in particular, I was surprised to see the extent of the amendment. I think that everybody accepts that it's effectively a complete re-write of the original Bill, as drafted, but I do accept that it does seek to secure some very similar aims to the original

intention of the Bill.

[22] I want to speak now, if I can, to amendments 29A, 29B, 29E, 29F, 29G, 29H, 29I, 29K, 29L, 29M, 29N, 29O, 29R, 29S, 29V and amendment 31A in this particular sub-theme. This group of amendments, effectively, places the word 'safe' or 'safely' throughout amendment 29 and into amendment 31 in order to protect what I believe is the integrity of this Bill. The National Assembly for Wales, when it gave permission for this Bill to proceed, supported the principle of a safe nurse staffing Bill, not just a nurse staffing Bill, which would be the effect of the amendments that the Government has tabled. I am disappointed that there's no reference to the word 'safe'. The word 'safe' is not included within the Minister's amendment at all. There's widespread agreement in this committee—there certainly was at Stage 1—on the need to develop safe staffing legislation and I think that amendment 29 undermines this principle.

[23] The health Minister's amendment goes against the recommendation of the Health and Social Care Committee's report on the Bill. In that report, we concluded that there needed to be more evidence of the word 'safe' throughout the legislation and what the health Minister has done is secure its removal, or is seeking to secure its removal. So, all the amendments in this group support the aims of the chief nursing officer's non-statutory guidance to health boards in Wales, which, of course, are the all-Wales nurse staffing principles, which have been in place since, or were published in, April 2012. Her guidance regularly refers to and uses the word 'safe' to describe the sort of staffing levels that she is recommending for the national health service in Wales and I can see no reason, if she is able to use that word 'safe' and it is able to be interpreted by health boards, why this Bill should not include that word and use the same term.

[24] We also know, of course, that third-party organisations have questioned how effectively health boards in Wales are complying with the existing guidance, with the Royal College of Nursing, UNISON and Professor Dame June Clark all pointing to the fact that the guidance to date had failed to make sufficient impact. The Minister referred to existing duties, which are already out there for health boards to comply with, but I'll be dealing with some of the issues later in some of the other sub-themes in terms of how I believe that these new duties need to be policed. So, effectively, all of my amendments in this sub-group will put back on to the face of the Bill the word 'safe' in all of the appropriate places to ensure that the fundamental principle of this Bill is not undermined by the Minister's amendment.

[25] **David Rees:** Are there any other Members who wish to speak? Elin.

[26] **Elin Jones:** Diolch, Gadeirydd. Rwy hefyd eisiau diolch i'r Aelod sydd yn gyfrifol am y Mesur yma am gyflwyno Mesur sydd wedi caniatáu inni gael trafodaeth adeiladol iawn ar yr angen i ddiogelu lefelau staffio nyrsio, a'r ffaith ein bod ni'n gwneud hynny drwy ddeddfwriaeth, yn egwyddor yr wyf yn ei chefnogi.

Elin Jones: Thank you, Chair. I too want to thank the Member in charge of this Bill for introducing a Bill that has allowed us to have a very constructive debate on the need to safeguard nurse staffing levels, and the fact that we're doing that through legislation, is a principle that I support.

09:15

[27] Os caf i wneud un pwynt wrth siarad i'r gwelliannau yma ar y broses, mae'n rhaid dweud fy mod i'n ffeindio'r broses o ddeddfu yn y modd yma yn annigonol iawn. Rwy'n credu bod y ffaith bod un gwelliant o'n blaen ni heddiw sydd i bob pwrpas yn ailysgrifennu 80 y cant o'r Mesur y buom ni fel pwyllgor yn ei sgriwtimeiddio yn drylwyr iawn o dan Gyfnod 1—nid yw hynny'n adlewyrchiad da ar y prosesau sydd yn eu lle. Rwy'n derbyn bod popeth mewn trefn, ond rwy'n gobeithio, efallai, y gwnaiff y pwyllgor, pan ym ni'n edrych ar ein *legacy report* ni, yn adlewyrchu ar y profiad o fod wedi sgriwtimeiddio Mesur sydd wedi cael ei gyflwyno gan Aelod unigol yn y ffordd yma ond sydd, i bob pwrpas, wedi cael ei ailgyflwyno yng Nghyfnod 2 gan y Llywodraeth drwy welliant sy'n ailysgrifennu popeth drwy un gwelliant, neu 80 y cant o'r Mesur, ac wedyn yn ailysgrifennu bron popeth arall, yr 20 y cant sy'n

If I could make one point in speaking to these amendments on the process, I have to say that I find the process of legislating in this way to be very inadequate. I think the fact that we have one amendment before us this morning that to all intents and purposes redrafts 80 per cent of the Bill that we as a committee scrutinised in great detail at Stage 1—that doesn't reflect well on the processes in place. I accept that everything is in order, but I do hope, perhaps, that the committee, when we come to consider our legacy report, can reflect on the experience of having scrutinised a Bill that has been brought forward by an individual Member in this way, but which, to all intents and purposes, has been reintroduced at Stage 2 by the Government through an amendment that virtually redrafts the whole of the Bill in one amendment, or 80 per cent of it at least, and then redrafts almost everything else, the

weddill, drwy welliannau eraill, gan gynnwys teitl y Mesur. Felly, o ran proses—i chi, Gadeirydd—rwy'n gobeithio y cawn ni ddod yn ôl i adlewyrchu ar y broses yma sydd ddim wedi bod yn gwbl effeithiol, yn fy marn i.

[28] Beth bynnag, o ran y gwelliannau yr ym ni'n eu trafod fan hyn, byddaf i'n cefnogi'r gwelliannau yn enw Darren Millar. Yn y drafodaeth a gawsom ni yn ystod Cyfnod 1, fe ddaeth hi'n rhan ganolog o'n trafodaethau ni, a chael ei adlewyrchu yn argymhelliad 3 o'n hadroddiad ni, ein bod ni eisiau eglurder fod yr hyn sydd yn cael ei gyflawni drwy'r Mesur yma yn sicrhau lefelau diogel o staff—*safe nursing staff levels*—ac fe oedd yn glir inni fel pwyllgor, ac yn sicr i mi, fod y defnydd o'r term 'diogel' yna, '*safe*', yn gwbl allweddol i'r hyn yr oedd y Mesur yma'n ceisio ei gyflawni, ac nad oedd unrhyw gyfeiriad at y term 'gofynnol', '*minimum*', yn adlewyrchu'r hyn yr oedd mwyafrif o'r tystion yn ei gyflwyno i ni, na'r hyn yr oedd y Mesur cychwynol yn ceisio ei gyflawni hefyd, i rwy raddau. Felly, rwy'n credu ein bod ni fel pwyllgor wedi sefydlu'r egwyddor yna yn argymhelliad 3 ein bod ni eisiau gweld uchelgais y Mesur yma yn cael ei adlewyrchu drwy ofyniad statudol am lefel ddiogel o staffio, ac felly rwy'n cefnogi'r gwelliannau sy'n ceisio diogelu'r egwyddor bwysig yna.

remaining 20 per cent, through other amendments, including the title of the Bill. So, in terms of process—for you, Chair—I hope that we can return to reflect upon this process, which hasn't been entirely effective, in my view.

Anyway, in terms of the amendments that we're discussing here, I will be supporting the amendments in the name of Darren Millar. In the debate that we had during Stage 1 proceedings, it became a central part of our discussions, and it was reflected in recommendation 3 of our report, that we wanted clarity that what is achieved through this Bill does secure safe nursing staff levels—and it was clear to us as a committee, and certainly to me as an individual, that the use of the word 'safe' was entirely crucial to what this Bill was seeking to achieve, and that any reference to the term 'minimum' didn't reflect what the majority of the witnesses were putting forward to us, or what the initial Bill was trying to achieve, to a certain extent. So, I believe that, as a committee, we've established that principle in recommendation 3 that we want to see the ambition in this Bill reflected through a statutory requirement for a safe nursing staff level, and I therefore support the amendments that seek to safeguard that important principle.

[29] **David Rees:** Thank you, Elin. Do any other Members wish to speak? No? Then I call on the Minister to speak on this sub-theme.

[30] **Mark Drakeford:** Thank you, Chair. Well, as Members have heard, this sub-theme is all about a series of amendments aimed at putting the term 'safe' or 'safely' back into the Government's amendment 29. Amendment 29 is drafted in the way it is because the unambiguous advice I have received from those with expertise to draft the law is that it should be drafted in the way that it is, and that these amendments should be resisted. Of course the term 'safe' is used in other contexts, where its general meaning is intended without needing to define in a legal sense what that term means. Here, we are drafting the law—not guidance, not a press release, but the law—and, in that context, 'safe' or 'safely' would have to be defined as being a reduction in harm, rather than absence of harm, because no clinical setting can ever be completely free from danger. The nature of clinical services and the interventions provided will always carry a certain degree of risk. Trying to establish a legally secure definition of 'safe' or 'safely' in such terms would be impossible, I believe, as the concept would have to be relative to the setting in which it was being used. If, for example, a patient with acute pancreatitis is at serious risk of multi-organ failure, as someone suffering from that condition is very likely to be, then no matter how many nursing staff are on duty in a ward, that patient could not be regarded as being safe from the potential ravages of the illness that afflicts them. If we use the word 'safe' it will be necessary to identify not only who was made safe by the nurse staffing level, but in what sense and from what. Not only would this be difficult to demarcate, but also the extent to which the nursing care a patient receives contributes to the safety of that patient will inevitably vary greatly depending on that person's condition and other circumstances of their care, including the clinical contribution of all others members of the team responsible for that care.

[31] Acute medical and surgical wards are staffed by clinically qualified and competent people trying to make the best and the right decision in the situations that they face in front of them. The significance of this Bill is that, if it is amended by amendment 29, then the use of a triangulated approach to set staffing will be embodied within the law. The method is what makes the difference to the outcome, not the use of an adjective or an adverb. The method we set out allows professionals to exercise their judgment and use validated tools and indicators to support those decisions. The method gives back the power over staffing decisions to those who are there and on the spot and with the ability to make them. It is not a formulaic method for

establishing a number above or below which patients would necessarily be unsafe, or, in other words, in danger.

[32] There are circumstances on a busy ward where, for operational reasons, the nurse staffing level could fall below or exceed the level that has been calculated using the triangulated approach, but where patients might not be at risk of harm and therefore not actually be unsafe. Furthermore, not only would a nurse staffing level that fell below or exceeded the calculated safe level be unsafe within the terms of the Bill, using 'safe' in this way would call into question the safety of a nurse staffing level determined by any other means.

[33] The use of the term in its general and natural meaning, in non-legal contexts, is absolutely unproblematic. Transpose that term into a very specific and legal context and you end up with all the unintended consequences that I have rehearsed this morning. For that reason, I ask Members to reject all the amendments in this sub-group tabled in the names of both Darren Millar and Elin Jones.

[34] **David Rees:** Thank you, Minister.

[35] **David Rees:** I call on the Member in charge, Kirsty Williams, to speak to the sub-theme.

[36] **Kirsty Williams:** Thank you very much, Chair. May I take this opportunity to place on record my thanks to Assembly Commission staff who have helped me through this long and drawn-out process for their professionalism and expertise? Can I thank colleagues of the health committee that have dedicated so much of their time to scrutinising the proposals when I know that we have a very busy schedule, and they have done so with great diligence? Can I also thank the Minister and his officials for the courtesy shown to me during the passage of this Bill? I'm grateful to Mark for the approach he has taken.

[37] But as the Minister indicated in his opening remarks, whilst those discussions have been numerous and lengthy, there still remain areas of disagreement before us. I'm disappointed with the content of amendments 28 and 29, in particular the removal of the term 'safe'. However, I'm also conscious that if amendments 28 and 29 were to pass, I believe that there is still significant merit to this legislation and this legislation should be passed. Critically, for me, it would still achieve the general principles that informed

the development of this private Member's Bill. It will ensure that local health boards have regard to the importance of providing sufficient nurses to allow those nurses to care for their patients. It will also enshrine a duty to use the triangulated approach to calculate and take action to maintain nurse staffing levels. Indeed, this has been a journey of discovery and greater understanding for me.

[38] When I first started this process, it seemed to me that a single number would achieve my goals. It was quite clear from discussions with people who do this job on a regular basis that a simple number itself would not be good enough. And therefore, even with amendments 28 and 29, the use of the triangulated approach will make a significant difference. I don't just believe that; the healthcare professionals I've spoken to—they also believe that, even with these amendments, this Bill will make a real concrete difference to patients and nurses on the front line. Such a duty has never existed before, and it will enable all nurses—not just the designated nurses—working on a ward and patients to challenge a health authority that has failed to have regard to this legislation.

[39] Quite simply, I believe the practical benefits can be realised from this legislation, and I would agree with the Minister that it is not a word in itself that will make the difference to staff and patients. Given the constraints of the process I find myself in, I don't want the perfect to become the enemy of the good.

[40] Nevertheless, I do support the proposed amendment by Darren Millar in this regard that would put the concepts of 'safe' and 'safety' back into the Bill. The term 'safe' is a concept that is used frequently in the context of healthcare legislation. Indeed, the Health and Social Care (Safety and Quality) Act of 2015 describes itself as an Act to make provision about the safety of health and social care services in England. Closer to home, the term 'safe' has also been used in numerous Measures and Acts in the National Assembly for Wales—the Children and Families (Wales) Measure of 2010, the Learner Travel (Wales) Measure of 2008, the Active Travel (Wales) Act of 2013, and the Well-being of Future Generations (Wales) Act 2015. Safety is also a concept that is well understood by health professionals. They're well versed in it and they have to make decisions about safety day in, day out, and that's reflected in the National Institute for Health and Care Excellence's safe staffing guidance. It's also a concept that I believe is readily understood by the public. The concept of 'safe' was emphasised and has been referred to by other Members during the passage of this Bill and the consultation exercise

that was carried out.

[41] The Minister may correct me, but I don't believe that the intention of the Minister's amendment is to result in unsafe staffing levels. In practical terms, I therefore believe that the Bill, subject to the Government amendments, will still result in actions that support the delivery of safe staffing levels, but I think that the removal of the term 'safe' from the face of the Bill is a missed opportunity to symbolically set out clearly what the intention of the Bill is.

[42] **David Rees:** Thank you. I call on Darren Millar to reply to the debate.

[43] **Darren Millar:** Thank you, Chair, and thank you, Members, for your contributions. I have to just put on record also my sympathy with the view expressed by Elin Jones about the processes within the Assembly to manage such an extensive rewrite of a piece of legislation. I do think that some consideration needs to be given to that, but I'm grateful for her support and, indeed, the support of the Member in charge in relation to the amendments that I have tabled in this particular sub-theme. I do believe that the examples that have been cited by Kirsty Williams—and there are other examples as well of course at UK legislation level in health and safety law, for example—clearly demonstrate that the words 'safe', 'safety' and 'safely' are all terms that are used regularly in legislation both here in Wales and in other parts of the UK.

[44] I referred earlier on to the chief nursing officer's existing guidance to local health boards, which uses also the same term, 'safe', throughout it, and I cannot understand why the Minister feels so resistant to ensuring the inclusion of this particular word on the face of the Bill. The Minister's own amendment uses words like 'sufficient', 'sensitively', 'efficiently' and 'effectively', all of which are open to interpretation and will require definitions—particularly the word 'sensitively'; I don't think I've seen that anywhere else in other pieces of legislation, although I may well be mistaken. So, I do want to move later on to a vote on these particular amendments. I think it's really important that, as a committee, we follow through on our commitment at Stage 1 to want to see this word throughout this Bill on the face of the legislation, and I urge Members to support this batch of amendments.

[45] **David Rees:** Thank you, Darren. I just wish to reiterate that we won't be voting on the amendments until the end of group 1.

[46] **Darren Millar:** I appreciate that.

09:30

Is-thema o fewn Grŵp 1: (b) Lleoliadau y Byddai'r Ddyletswydd yn Gymwys Iddynt (Gwelliannau 29C, 29J, 29Z, 29AA, 29AB, 29AC, 29AD, 20, 2, 21, 3, 4, 22, 23, 24, 30, 31, 15, 16, 36, 37 (28, 29))

Sub-theme within Group 1: (b) Settings to Which the Duty Would Apply (Amendments 29C, 29J, 29Z, 29AA, 29AB, 29AC, 29AD, 20, 2, 21, 3, 4, 22, 23, 24, 30, 31, 15, 16, 36, 37 (28, 29))

[47] **David Rees:** Therefore, I move on to the second sub-theme amendments, which we will consider in relation to the settings to which the duty would apply. The first amendment in the sub-theme is amendment 29C. I call on Darren Millar to move amendment 29C and to speak to the amendments in this sub-theme.

[48] **Darren Millar:** I move amendments 29C and 29J, and I want to speak to amendments 2, 3, 4, 15, 16, 36 and 37—all in this sub-theme, Chair.

[49] This group of amendments looks at extending the remit of the Bill to the independent sector as well as increasing its provision to beyond adult acute wards in order to encompass children's and mental health services, for example. Amendment 29C extends the scope of the Bill to include the independent sector in the provision of safe staffing levels. We all know that the independent sector, when it came before this committee, felt very clearly that the scope of the Bill did not go far enough and that the duties included within it should also apply to their activities within the health sector. For example, Care Forum Wales expressed concern that its members may be adversely affected if the Bill's provision did not apply to nursing homes. It argued that the Bill could restrict their ability to recruit and retain nurses, aggravating an already difficult situation across the country because of poor workforce planning in the national health service and wider education sector. This view was supported, of course, by the Welsh Independent Healthcare Association, which said that if the Bill's provisions were extended to include the independent sector, then it should include all care delivered by this sector, not just NHS-funded care. It argued that the inclusion of private care in the Bill would allow the independent sector to reflect its support for safe staffing for all the patients whom it cares for.

[50] Amendment 29J would ensure that the Bill, in terms of safe nursing

staffing levels, extends to all wards in both acute and community hospitals. At present, the Bill applies just to acute medical in-patients and surgical in-patient wards, if amendment 29 is to proceed, but children's wards, maternity wards and mental health wards would all be excluded. I believe that this presents a real risk that staff would be taken from these settings in order for the staffing requirements to be met elsewhere in our hospitals. Indeed, many witnesses alluded to this when they came to give evidence to the committee.

[51] It's for this reason that I also will be supporting amendment 29AC in the name of Elin Jones in this sub-theme, which seeks to extend the scope of the Bill to community nursing as well, which we know is going to become an increasing feature of NHS services as our services move away from secondary and tertiary care, out into the community and into primary care.

[52] My amendment 2 would have a similar effect, but on the Bill as introduced, should amendment 29 not proceed.

[53] There's also a risk that the Bill as it stands and amendment 29 could be subject to challenge, I believe, as discriminatory under the Equality Act 2010, and that Ministers may fall foul of their own obligations in failing to have regard to the UN principles on the rights of the child should my amendments not proceed.

[54] My amendments 3 and 4 would extend the scope of the Bill to include commissioned services, whether from NHS providers beyond Wales or the independent sector. These are commissioned services that are funded by the Welsh NHS, and we know that, given the development of community partnerships in the delivery of healthcare in Wales, including the private sector and third sector partners, this amendment therefore would require independent providers of healthcare services to adhere to the same staffing levels as local health boards and ensure that Welsh patients cared for in settings other than NHS settings in Wales are not disadvantaged as a result.

[55] We also support the independent sector and the role that it plays in delivering commissioned health and social care services.

[56] The Royal College of Nursing, of course, agreed that staffing levels for children, subject to care from independent providers should,

[57] 'equate to those recommended for the equivalent NHS service'.

[58] I believe that these amendments would achieve just that.

[59] I should say also that, should my amendments to amendment 29 not be agreed, we will be supporting amendments 29Z, 29AA, 29AB, 29AC and 29AD, which have all been tabled in the name of Elin Jones, which seek to make similar amendments to amendment 29.

[60] If I can just speak very briefly to the Government's amendment 31, although I feel that this could be improved by my amendment 31A, I will be supporting that particular amendment and speaking to 31A later during the course of the morning.

[61] Amendments 36 and 37 seek to ensure that the Bill's provisions require the registered person in care home settings to have due regard to any guidance that is issued in relation to the Bill. Of course, it is absolutely necessary for those amendments to proceed should the other amendments in this sub-theme that I've tabled proceed and be agreed by the committee. Similarly, my amendment 2 has the same effect, but on the Bill as introduced. I understand that the Government's amendment 30 is a technical amendment in terms of its nature, but perhaps I can hear the debate on that in a few moments. Thank you.

[62] **David Rees:** Thank you, Darren. Elin, do you wish to speak?

[63] **Elin Jones:** Yes. I'll speak to the amendments in my name in this group, which serve to add hospital and NHS settings to the face of the Bill. Amendments 29Z to 29AD, if the Government amendment 29 passes, will add community hospital wards, mental health in-patient wards, children's in-patient wards in acute hospitals, community nursing and maternity services to the settings covered by the Bill at this point. In the committee's work, we took evidence and we formed views that the current settings, as proposed in the Member's Bill, were insufficient to meet some of the concerns that we had as to the unintended consequences of the legislation that could see local health boards meet their statutory requirements under this Bill by relocating nurses. In particular, we focused on mental health in-patient wards where a number of issues have arisen in Wales that have related to staffing on such wards. I have a particular concern that mental health in-patient wards should be included on the face of this Bill, and 29AA seeks to do that.

[64] Also, in terms of non-acute hospital settings—both community hospital wards and community nursing—it would be very unfortunate, if, as a consequence of legislating for acute medical and acute surgical wards only, the unintended consequence is that local health boards move nurses from community settings to meet the statutory requirement, because all of public policy is now towards increasing support in community settings, whether that is in a community hospital setting, or certainly in community nursing. So, my amendments under this theme seek to ensure that none of these unintended consequences materialise as a result of passing this legislation in the form originally intended by the Member, now intended, possibly, by the Minister's amendment 29.

[65] **David Rees:** Thank you, Elin. Lynne.

[66] **Lynne Neagle:** Thanks, Chair. Could I first of all place on record my thanks to Kirsty for bringing forward this piece of legislation? As she knows, I've been supportive of it from the beginning. I think if it gets on to the statute book, it will be a very useful tool to empower not just nurses, but patients and their families, as well, so, I'm pleased that we've reached this point today. My main reservation, when we were scrutinising the Bill, was about the possibility of staff being drawn from wards that weren't covered by this piece of legislation. I still have some concerns about that, so I have some sympathy with these amendments today.

[67] I just wanted to say a few words, particularly about Elin Jones's amendment 29AA, because my concern is foremost as it relates to adult mental health wards. I do want to declare an interest, as I have a close family member who is living on one of those wards at the moment. But I just wanted to say that I am very sympathetic to this amendment. We know that there have been problems with these wards in Wales, as Elin has highlighted, but in my experience also, some of the patients who are on those wards have few or no visitors, so they are, to all intents and purposes, voiceless. So, while I understand that the legislation has to start somewhere, I won't be supporting that amendment today, and I hope that the Minister will use the powers that he will have to regulate quickly to bring these wards within the scope of the legislation. I hope that he will be able to say something to us about that here today.

[68] **David Rees:** Thank you. Does any other Member wish to speak? No. Minister.

[69] **Mark Drakeford:** Thank you, Chair. On the first sub-group of amendments we discussed this morning, the changes, if they were to go through, would be, as the Member in charge has said, essentially symbolic. In this sub-group of amendments, however, the amendments sought are substantive, and the risks that they run should they reach the statute book are real. I'll be asking Members to resist them for reasons I will now outline.

[70] Deciding nurse staffing levels is a complex area and, as the committee has explored it, we have found that other countries that have already begun to introduce such laws struggle to implement them. NHS England has decided to stand down the work that NICE has been doing in this area. The approach that we have developed is to use the triangulated approach, using professional judgment, the acuity tool and nurse-sensitive indicators in conjunction with one another. A considerable amount of work has been done on this approach for adult acute medical and surgical wards, and work is ongoing here in Wales to develop similar approaches in other clinical settings. The thing that distinguishes the wards that are already proposed to be within the ambit of the triangulated method are issues of evidence and issues of timing. The acuity tool, which is a pivotal part of a triangulated approach, needs to be developed specifically for each clinical setting. The acuity tool used for medical and surgical wards cannot simply be applied in the same way, for example, to children's wards or mental health wards. In the Bill, we apply the triangulated approach to adult in-patient acute settings because we know that this is where the evidence exists to support its application. That is why I am confident we are protected from the Equality Act compliance issues that Darren Millar raised. We have a rationale for applying the approach in these settings, and the rationale is that there is an evidence base on which to base clinical practice.

[71] The conclusion that there is robust evidence that the triangulated approach works in adult acute in-patient settings was confirmed by witnesses who gave evidence to this committee in January and February, and I think all the witnesses you heard from agreed on this point, including the RCN and NICE itself. It is simply the case that there is not yet any equally strong evidence about the most effective approach to use in other clinical settings. A great deal of work, however, is going on in Wales to validate evidence-based tools in other clinical settings. A national pilot scheme for an acuity tool for adult mental health in-patients is currently being tested at ward level here in Wales. Staff at Cardiff and Vale health board are currently evaluating an acuity tool for paediatric wards developed by staff at the Great Ormond Street Hospital. So, I am very happy to assure the committee that I

do have an active intention to use the potential to extend the scope of the Bill as amended, should it be amended, under the regulation powers that it provides. But that will have to be done at the point where there is clear evidence of the most effective approaches to be applied in those different clinical settings. Now is not the time to do so because that evidence is not firmly enough established. That's the basis on which I will ask the committee to reject amendments 2, 20, 21, 22, 23, 24 and amendments 29J, 29Z, 29AA, 29AB, 29AC and 29AD, all of which seek to extend the settings on the face of the Bill, for which, as I've indicated, the evidence does not exist at the current time.

09:45

[72] Chair, can I now turn to commissioned or funded care, which is the subject of amendments 3, 4 and 29C? Darren Millar's amendment 3 seeks to add a new duty for health service bodies to have regard to the degree to which providers of commissioned or funded care achieve the duties in 10A(1)(a). His amendment 4 would provide that the duty introduced by amendment 3 applies whether the services are commissioned in Wales, or not. My advice is that amendment 4 is unnecessary, as amendment 3 does not limit the duty to have regard to services that are commissioned or funded in Wales. In any case, I ask the committee to reject the amendments, as they are both unnecessary and unworkable. They are unnecessary because commissioning contracts already contain requirements for quality services, including quality of care and patient outcomes. They are unworkable in practical terms, as they would place duties upon health service bodies to have regard to the extent to which persons for whom they commission or fund care comply with section 10A(1)(b) of the Bill as introduced. Local health boards will be commissioning from providers outside Wales, or the independent sector, where fixed ratios would not apply. They are not within the scope of this Bill.

[73] Turning now to amendment 29C, this amendment amends section 25B as introduced by Government amendment 29. The effect of this amendment would be to place a duty upon local health boards and NHS trusts, whenever they commission or fund services to which section 25B applies, to designate a person to calculate nurse staffing levels to take all reasonable steps to maintain the level and to make arrangements for informing patients of the level. Here, however, more impracticality and undesirability intrudes. It places, for example, requirements on local health boards and trusts in Wales when they commission services from outside Wales, or from an independent

provider, to designate a person within that organisation to calculate the nurse staffing levels in accordance with the guidance to be published by the Welsh Ministers. At least it's theoretically possible that a health board or NHS trust could make compliance with the duty a requirement when it tenders for commissioned care. The risk would be that, in making that a requirement of care provided outside Wales or in the independent sector, the potential bidders would simply decide not to bid for contracts on those terms, thus reducing choice for NHS Wales patients. I think that that risk would be particularly acute along our border, where a great deal of care that is required for Welsh patients does indeed take place outside Wales.

[74] Turning, Chair, to amendments 15, 16, 36 and 37, which aim to extend the duties to have regard to the care home and independent healthcare sector, the effect of these amendments is to require the registrant of an independent care home or an independent healthcare establishment to have regard to the duties in section 10A of the Bill as introduced, or sections 25A to 25D of the Bill as it would be amended by Government amendment 29. I ask the committee to reject these amendments as neither the Bill as introduced, nor as it would be amended by the Government amendments, place duties upon establishments in the independent sector. There are already requirements in place dealing with staffing in the independent healthcare sector through the registration requirements with the Care and Social Services Inspectorate Wales. The cost of extending the duties under the Bill in this way has not been ascertained and could be unsustainable. I ask you to reject those amendments.

[75] I turn now, finally, to the Government amendments. Amendment 30, I think, is slightly more than technical. It would make the exercise of the Welsh Ministers' regulation-making powers, under subsection 25B(3)(c) of the Bill, subject to the affirmative procedure. In that way, it answers a commitment I gave at Stage 1 to consult the National Assembly fully before issuing guidance or making regulations under this Bill's provisions, and putting a requirement to use the affirmative procedure for regulations onto the face of the Bill will enshrine that commitment in law, and ensure scrutiny of them by the National Assembly.

[76] I'm grateful to Darren Millar for his indication of support should amendment 31 be the amendment we finally have in front of us in defining nurse staffing levels. Amendment 31 adds a definition of nurse staffing levels to the National Health Service (Wales) Act 2006. Both this committee and the Constitutional and Legislative Affairs Committee noted the lack of

definitions on the face of the Bill, and this amendment goes some way, I hope, to addressing those concerns.

[77] **David Rees:** Thank you, Minister. I call on the Member in charge, Kirsty Williams, to speak to these sub-themes.

[78] **Kirsty Williams:** Thank you very much, Chair. I think, at the start of this debate about the settings to which the duty would apply, it's really important to note that even if amendment 29 is successful, this Bill still enshrines an overarching duty that local health boards and NHS trusts must have regard to the importance of providing sufficient nurses to allow the nurses time to care in all settings. The overarching duty remains, and boards will have due regard to that in all settings.

[79] It's also important to note that this overarching duty will apply when health service bodies in Wales are deciding whether and how to use hospitals in England, and commissioning services on behalf of Welsh patients. I agree with the Minister and, as such, I do not consider it necessary to include the additional requirement with regard to commissioning as set out in amendments 3 and 4.

[80] Like the Minister, I remain convinced that a specific duty for adult acute medical and surgical wards at this point in time is the most sensible approach, as that is where the evidence currently lies. And I have tried at all points during this process to follow the evidence. As the Minister said, the acuity tools evidence base is there, allowing us to move forward at this point in time.

[81] I therefore do not support amendments 29J, 29Z, 29AA, 29AB, 29AC, 29AD, 2, 20 and 21 to expand this duty to other settings at this current time. But the Bill does include provision to extend specific duties to additional ward settings within Wales as the evidence base in this area develops. The Minister has given very clear examples of how that is currently being undertaken in Wales with regard to paediatrics. I know in my own local health board of Powys that a great deal of work is going on to look at the issue of what is a manageable caseload for a nurse working in the community.

[82] I'm also very grateful to hear from the Minister of his specific intentions to use the powers within the Bill to extend the duty to additional settings as and when that evidence becomes appropriate. And that's why I have some sympathy with Elin's amendments 22, 23 and 24. The examples

that she lists in those amendments are exactly the kinds of settings that I hope in which we can develop the evidence base and use the provisions in this Bill to be able to incorporate those settings at a later date.

[83] Like Lynne Neagle, I do have concerns specifically about those people receiving care on mental health wards, as covered by amendment 29AA. None of us that could have witnessed the events at Tawel Fan in north Wales can be immune to the problems that can arise in acute mental health wards, and we need to be mindful that these are some of our most vulnerable patients. They are often, as Lynne Neagle correctly identified, patients who do not have people to watch out for them or to speak up for them. And I'm very grateful to hear from the Minister that it is his intention to develop work in this area so that we can address those concerns.

[84] Can I just make a point with regard to this fear about nurses being removed from one setting into an adult acute ward or surgical ward to address the issues of the Bill? What is really important to recognise, Chair, is that nursing isn't a blanket profession. Each nurse will have a very specific skill set. Indeed, when people enter the profession, they follow different routes of training. They choose at very early stages within their career whether they're going to train as an adult nurse, as a children's nurse, nursing in the mental health field or nursing in the learning disability field. They are very different skill sets. Just because someone has skills in nursing children does not mean they will have the requisite skills to nurse on an adult ward. Just because somebody is currently employed as a mental health nurse, with those very specific training and skills in mental health, does not mean that those skills would be applicable to an adult ward covered by this Bill.

[85] So, this Bill looks at a triangulated approach—it includes the ability of the nurses to do the job. So, therefore, Members should have some reassurance that it is simply not as easy for our local health boards to transfer nurses from one setting to another, because they've not been trained to nurse on an adult ward. And, therefore, I would argue the LHB would not be fulfilling its obligations under the Act if it was to do that. So, I think a combination of recognising the skill sets of specific nurses, as well as the overarching duty, will mitigate some of these concerns, as well as a very welcome commitment by the Government to look to extend the duties of this legislation to other settings as and when that evidence arises and is developed.

[86] If I could turn to the issue of the private sector, it has never been my intention to include the private sector in this legislation. It has always been my duty to try and provide protection for the majority of nurses and the majority of patients. I don't support amendments 15, 16, 36 and 37 to the Bill, which would amend the regulations that provide the framework for the regulation of care homes and the independent healthcare sector. These amendments provide that the care provider must have regard to the provisions of the new duties and any guidance issued by Welsh Ministers when they're operating within their own regulatory framework. Whilst these amendments do not go so far as to amend the Bill to make these sectors expressly subject to the duty, the existing Bill is presently predicated on the application of public law principles, such as the availability of judicial review. It also relies on the Welsh Ministers' existing powers of intervention under the National Health Service Act 2006. In order for the duty to be imposed on, and enforceable against private healthcare providers, we would need an entirely different mechanism for the imposition and enforcements of duty on a private healthcare provider.

[87] With regard to the issue of care homes, the chief nursing officer has said that the current acuity tool that has been developed is not designated for the care home sector, as, often, the nature of patients' needs within that sector is very different from an acute medical or surgical ward within a district general hospital, and therefore, it simply would not be applicable to apply this tool to that setting. Therefore, I do not support amendments to include that setting under the auspices of this Bill.

[88] **David Rees:** Thank you. Can I call on Darren Millar to reply to the debate?

[89] **Darren Millar:** Thank you, Chair. I've listened very carefully to what has been said, and I welcome the commitment that the Minister has given to consider other settings in the future. But, nevertheless, I do think it is important that some of the concerns that Members identified during the course of Stage 1, particularly regarding mental health wards and, indeed, children's wards—. Children are also voiceless in many respects and need somebody to be able to advocate for them. I take on board the point that Kirsty Williams made about specialisms in nursing. I completely understand and appreciate that, but, of course, this Bill doesn't just cover nurses; it covers the nursing profession more widely, including healthcare support workers, who regularly shift between one ward and another, or one part of a hospital and another, or, indeed, one hospital and another, as part of their

work, in order to cover shifts. And, we all know also that bank staff and agency staff are regularly called in to work in departments that they may be unfamiliar with, too. So, I think it is really important. These are real risks. The Minister referred to risks and said that these amendments posed a risk to the Bill. The reality is that there are risks to those other care settings if this Bill proceeds and simply looks at acute medical wards and surgical wards alone. But, notwithstanding the commitment that the Minister has given, I think it is important that he's minded to consider these other settings in the future. But I will be seeking to push Members to a vote later on on these issues.

[90] Elin Jones quite rightly spoke about the innovation in the healthcare sector, which is pushing more and more work into the community nursing part of the business, as it were, and it is important that that too is absolutely captured somehow through the provisions of this Bill, in order that that can be sure of ensuring that there are sufficient staffing levels.

10:00

[91] But I do want to just touch again on the independent sector and commissioned care. I think it is very, very important that patients are not disadvantaged, if their care is funded by the NHS, simply by being placed in a different care setting other than a hospital, whether that's a private provider, a third sector provider or indeed a provider over the border. I listened very carefully to what was said about commissioned care and some of these wider duties being applicable to even the care that has been commissioned, but I don't accept fully that that will deal with my concerns or the concerns of the independent sector. The number of nursing beds in the independent sector is higher than the number of nursing beds in the NHS these days, and it is continuing to grow apace as a result of changes in the way in which care is commissioned and the ageing demographics of our society. So, it's important somehow to ensure that NHS-commissioned care in the independent sector—not just the private sector, but the third sector as well—is adequate in terms of those staffing levels and that patients cared for in such settings are not disadvantaged.

[92] The Minister is quite right that many people in north Wales and in mid Wales who receive care in hospital settings over the border will want to be reassured that that care is also going to be of the same standard, with the similar or better staffing levels than are going to be achieved as a result of this Bill here in Wales. There are no safeguards for that at all on the face of the Bill at the moment, and that's why I'll be encouraging Members still to

support my amendments.

[93] Can I welcome amendment 30 and the clarification on amendment 30? I'll certainly be supporting that given that it's in relation to affirmative procedures on regulations. Thank you.

**Is-thema o fewn Grŵp 1: (c) Cymwysterau, Hyfforddiant, a Recriwtio Nyrsys
(Gwelliannau 29D, 29AE, 1, 25 (28, 29))**

**Sub-theme within Group 1: (c) Qualifications, Training, and Recruitment of
Nurses (Amendments 29D, 29AE, 1, 25 (28, 29))**

[94] **David Rees:** We now move on to the third sub-theme of amendments in group 1 to consider. They're in relation to qualifications, training and recruitment of nurses. The first amendment in this sub-theme is amendment 29D, and I call on Darren Millar to move amendment 29D and speak to the amendments in the sub-theme.

[95] **Darren Millar:** I move amendment 29D and want to speak to amendment 1, also in my name. Amendment 29D seeks to ensure that NHS providers, in addition to deploying nurses in sufficient numbers, must also ensure that staff have the necessary mix of qualifications and experience to enable the provision of safe nursing care. I believe that this amendment will provide the people of Wales with the confidence that health service bodies were legally bound to ensure that their staffing levels are sufficiently bolstered with nurses that have the necessary skills to provide the very best standards of care that the NHS can fund.

[96] This has long been advocated, of course, by the RCN. It was first implemented at their 2011 congress, where nurses voted to legally enforce deploying nurses in sufficient numbers, motivated by initial findings of the Mid Staffs inquiry, in which low staffing levels and skills were cited as contributory factors in the failings in that trust. Of course, we all know that it's not just about numbers, but also about making sure that people, as Kirsty Williams has said, have the right skills for the wards that they're working on and have the right skills for the acuity of the patients as well. At the moment, the Bill makes no reference on the face of it to this. Amendment 1, of course, would seek to have a similar effect, but to the Bill was introduced.

[97] I also want to speak in support of amendment 29AE and amendment 25 tabled in the name of Elin Jones, which seek to ensure that workforce

planning reflects the provisions in this Bill and the need to look ahead at the skills that the NHS is going to require. There's very little point in having this Bill if there is an insufficient supply of suitably qualified and experienced nursing staff, and that's what these amendments seek to achieve.

[98] **David Rees:** Thank you, Darren. Elin, do you wish to speak?

[99] **Elin Jones:** Ydw, dim ond i siarad i'r gwelliannau yn fy enw i, sef gwelliannau 25 a 29AE. Pwrpas y gwelliant yma yw sicrhau bod y mesur yma a'r ddeddfwriaeth yma'n cael eu cysylltu gyda'r angen hefyd i sicrhau bod cynllunio'r gweithlu nyrsio yn digwydd, mewn ffordd sydd yn ofynnol o dan y ddeddfwriaeth, er mwyn sicrhau cyflenwad digonol o nyrsys i'w recriwtio a hefyd i'w hyfforddi. Mae wedi bod yn thema yn ystod y dystiolaeth rŷm ni wedi ei chasglu fod yr angen i ddiogelu ac i sicrhau y cyflenwad o nyrsys yna i gwrdd â beth fydd uchelgais y ddeddfwriaeth yma yn gweithio law yn llaw â'r egwyddorion o dan y ddeddfwriaeth yma, achos yr hyn nad ydym ni eisiau iddo ddigwydd fel canlyniad i'r ddeddfwriaeth yma yw fod yna ddibyniaeth gynyddol ar nyrsys of fewn y system bancio ac *agency*, sydd yn mynd i roi pwysau ariannol ychwanegol ar y byrddau iechyd. Felly, mae rhoi gofyniad penodol ar y byrddau iechyd, ac ar Weinidogion y Llywodraeth, i sicrhau bod yna broses o gynllunio'r gweithlu yn digwydd, law yn llaw â'r ddeddfwriaeth yma ac ar wyneb y ddeddfwriaeth yma, yn cael ei amlinellu yn y gwelliant rwy'n ei gyflwyno—bod y ddau beth yn

Elin Jones: Yes, just to speak to the amendments in my name, namely amendments 25 and 29AE. The purpose of this amendment is to ensure that this measure and this legislation is linked with the need to ensure that the planning of the nursing workforce, as required under the legislation, secures an adequate supply of nurses for recruitment and for training. It has been a theme during our evidence gathering that the need to safeguard and secure that supply of nurses to meet the ambitions of this legislation goes hand in hand with the principles of this legislation, because what we don't want to see happening as a result of this legislation is an increasing reliance on nurses within the nurse bank and agency system, which will place additional financial pressures on the health boards. It places a specific requirement on the health boards, and on Government Ministers, to ensure that there is a workforce planning process in place, along with this legislation and that that is included on the face of this legislation, and that is what is outlined in my amendment—that both things should go hand in hand in order to achieve the real objectives of this legislation.

rhedeg law yn llaw er mwyn gwireddu
beth yw gwir amcan y ddeddfwriaeth.

[100] **David Rees:** Thank you, Elin. Do any other Members wish to speak? No. Then, I call on the Minister to speak to the sub-theme.

[101] **Mark Drakeford:** Chair, in this sub theme, there's no difference between what the Government would wish to achieve and what the Members who've already spoken have as their aims. Our difference is simply one of how we achieve them rather than wanting to achieve them. We entirely agree about the need to make sure that there's a proper mix of qualifications and experience of registered nursing. I believe that the Government amendment 29 as drafted is preferable to Darren's amendment 29D, because I think amendment 29 goes further. The Government amendment provides that professional judgment should be exercised when calculating nurse staffing levels. Section 25D also provides for guidance to be issued that sets out a number of elements that should be taken into account in the application of that judgment. This will include not only the qualifications and experience, it will go beyond that to take into account the competencies and the skills of the nurses providing care. I think that these things are best covered in guidance, given their complexity, and therefore are already provided for under my amendment 29.

[102] Turning to Elin's amendments 25 and 29AE, I am persuaded by what she has said, and by some of the arguments I anticipate will be made by Darren in relation to his amendment 29P in a subsequent group, that workforce planning arrangements should be reflected on the face of the Bill. For today, I would just need to say to Elin that I think that there are some drafting issues in relation to amendment 29AE, which means that, if it's put to a vote, I'll have to ask Members not to support it today. The duty as drafted, for example, could be interpreted as requiring an approach where, when vacancies exist, they must all be filled with new graduates. Now, we understand that there are other ways of filling nurse vacancies, where retention and retaining people in the workforce who are already qualified can be just as important as new graduates coming into the profession.

[103] If Elin were to decide not to move amendment 29AE today, then I'm very happy to extend an offer to work with her, through my officials and hers, to come up with an amendment at Stage 3 that would achieve her intentions in a way that we think would be more robust. I'll make the same offer to Darren later, in relation to amendment 29P. If the amendment is put

to the vote today, I'll have to ask Members to vote against it. But the same offer of working to a Stage 3 amendment would apply in those circumstances too.

[104] **David Rees:** Thank you, Minister. I call on the Member in charge, Kirsty Williams, to speak to this sub-theme.

[105] **Kirsty Williams:** Thank you. Can I begin by saying that I absolutely recognise that the Minister's amendment 29 will provide that, when calculating a nurse staffing level, a designated person should exercise professional judgment by taking nurses' qualifications and skills et cetera into account? That, I believe, is appropriate, welcome and important. However, I have a slightly different interpretation than the Minister does with regard to Darren's amendments 1 and 29D. I believe that these will strengthen the provision by making it explicit that staffing levels should include an appropriate mix of qualifications and experience, and I would support those amendments going forward.

[106] On the issue of recruitment, I think it's important to note that, by placing safe nurse staffing on a statutory footing, the Bill aims to strengthen accountability for the safety, quality and efficiency of workforce planning and management, and I believe it continues to meet these aims. I believe that those aims would be strengthened by Elin's amendments 25 and 29AE, which would assist in ensuring that Welsh Ministers also have a role to play in ensuring appropriate nurse staffing levels. I'm very pleased to hear the Minister's acknowledgement of the importance of this principle, and I believe it would be a welcome amendment to the Bill, whether that is achieved either by Elin's amendment today or by subsequent amendments that the Minister, myself and the Member would be able to work on, because I think it's a valuable addition to the legislation before us. I'm grateful that the Minister shares that belief.

[107] **David Rees:** Thank you. I call on Darren Millar to reply to the debate on this sub-theme.

[108] **Darren Millar:** While I'm pleased to hear the consensus from everyone who's spoken in this sub-theme debate around the issues that have been identified by the amendments, and I welcome the Minister's commitment to the same aims and, indeed, the Member in charge's commitment to the same aims and certainly her support for my amendments, I think it is important that we test the committee today, if you like, by putting these issues to a

vote. I'll be encouraging people to support those amendments. I think there's always an opportunity, should the drafting, Minister, not quite be as adequate as it could be, for that to be further amended then at Stage 3, but let's show a demonstration of support for these two principles today, I think, in supporting all of the amendments in the group, because I do think they add value to the Bill. I think that, yes, whilst I accept that anybody who's calculating safe nurse staffing levels, if they're using their professional judgment, will take issues such as the skill mix and the experience and qualifications into account, putting it on the face of the Bill just allows a belt-and-braces approach to make sure that those things are adequately considered by whoever is making those professional judgments. I'll touch a little bit more on workforce planning in the next sub-theme as well, but the principle that Elin Jones is making here about the importance of workforce planning is completely understood, and I would urge people to support her amendments also.

[109] **David Rees:** Thank you, Darren.

**Is-thema o fewn Grŵp 1: (d) Canllawiau
(Gwelliannau 29P, 29Q, 5, 6, 7 (28, 29))
Sub-theme within Group 1: (d) Guidance
(Amendments 29P, 29Q, 5, 6, 7 (28, 29))**

[110] **David Rees:** We now move on to the fourth sub-theme of amendments in group 1, and these are in relation to guidance. The first amendment under this sub-theme is amendment 29P, and I call on Darren Millar to move 29P and to speak to the amendments in this sub-theme.

[111] **Darren Millar:** I move amendments 29P and 29Q and amendments 5, 6 and 7, all tabled in my name. This group of amendments is focused on the guidance in relation to workforce planning arrangements. Amendment 29P, which the Minister referred to just a few moments ago, requires Ministers to issue guidance to NHS organisations with duties under the Bill on their workforce planning arrangements. As I said earlier, and as other Members have alluded to, there is very little point in having legislation on staffing levels if there is an insufficient supply of suitably qualified nursing staff. So, this amendment simply seeks to ensure a consistent approach to workforce planning arrangements—*[Inaudible.]*—issued by the Welsh Government to our health boards.

[112] Amendment 6 seeks to have a similar effect but, of course, to the Bill

as introduced. My amendment 29Q broadens the scope of the Bill to include within that guidance the need to consult with the independent healthcare and care home sectors when planning for the workforce in Wales. It was very clear in the evidence that we received that, all too often, they feel overlooked in the workforce planning arrangements. That was one of the reasons that they felt that there is an inadequate supply of nursing staff throughout the UK, not just in Wales, as is the case at present. There was a willingness, a very keen willingness, for the independent sector to become more involved in workforce planning arrangements for the healthcare workforce and the nursing care workforce here in Wales. So, I think it is important to acknowledge these issues. The Minister's already suggested, and the Member in charge has already suggested, that these are important issues, and I believe that my amendments will facilitate improved workforce planning arrangements for the nursing care workforce here in Wales. So, I urge Members to support the amendments.

[113] **David Rees:** Thank you, Darren. Are there any other Members who wish to speak? No. Then I'll call the Minister to speak on this sub-theme.

10:15

[114] **Mark Drakeford:** Thank you, Chair. We are picking up where we left off under the last group and, in this group too, there is no great difference of principle that separates the Government's approach and the one that Darren Millar's just outlined. Guidance is already available to health boards on the matter covered by amendments 6 and 29P, but, having heard the debate, my view is that those amendments could further support existing arrangements and could bring into sharper focus the requirements on health boards and trusts to plan the nursing workforce for the future. What prevents me from accepting them today is simply their reference to 'health service bodies'. One consequence of amendment 29, tabled by the Government, is to replace such references with 'local health boards and trusts'. To accept amendment 29P as it is today would therefore introduce the possibility of having varying definitions on the face of the legislation should amendment 29 be passed, which, of course, I hope it will be.

[115] I'll make the same offer identically to Darren as I did to Elin. If this amendment isn't put to the vote today I'd be very happy to work with him, the Member in charge, and with Elin, to bring back an amendment on workforce planning at Stage 3. Even if it is tested through the vote today, that offer, of course, still stands.

[116] Turning to amendments 7 and 29Q, both of those relate to a requirement for the independent healthcare and care home sectors to be consulted in the development of guidance. We would always seek to consult with a wide range of stakeholders in the development of guidance, but amendment 29Q strengthens that requirement in relation to these key sectors. If it's passed, it would help us to further explore and to move to resolve issues around care homes where they have difficulty in securing and retaining the number of nurses they need. I certainly recognise that the independent and care home sectors are essential to the delivery of integrated health and social care, and to our aim of caring for more people closer to home.

[117] Now, Chair, I'm advised that, if amendment 29Q were to be passed this morning, a further amendment would be needed at Stage 3 to add some additional definitional clarity to the terms used in amendment 29Q. If Darren, in replying, is willing to commit to that this morning, in the way that we worked with Lindsay in a similar sense in the Regulation and Inspection of Social Care (Wales) Bill, where we accepted an amendment at Stage 2 and then brought greater definitional clarity to it at Stage 3—. If Darren is happy with that approach, then I'm also happy to support amendment 29Q this morning.

[118] **David Rees:** Thank you, Minister. I call on the Member in charge, Kirsty Williams, to speak on this sub-theme.

[119] **Kirsty Williams:** Thank you, Chair. I think it's important to note that the Bill, if it were to be amended by the Minister's amendment 29, would still ensure that Welsh Ministers must issue guidance, and health boards and trusts must have regard to such. It sets out a non-exhaustive list of matters that may be included in the guidance, including the extent to which nurses providing care are required to undertake supervisory or administrative functions. The Welsh Ministers would also be required to consult with relevant organisations and persons before issuing guidance, which I consider to be appropriate.

[120] But I do support Darren's amendments 29P and 6 to provide that the guidance must include specific provisions about the workforce planning, and those arguments have just been rehearsed in the previous sub-theme debate. I believe that such amendments would strengthen longer term workforce planning to ensure a sufficient supply of nurses, and it should be

noted that this committee recommended that I do consider including reference to arrangements for comprehensive workforce planning on the face of the Bill to ensure that the numbers of trained nurses are available across both the public and the independent sectors.

[121] I also support amendments 29Q and 7 that would require Welsh Ministers to consult the independent healthcare and care home sectors before issuing guidance. Clearly, there is nothing in the Bill that would prevent a Welsh Minister from consulting such bodies, but, like the Minister has just stated, I believe that including them on the face of the Bill would be of value and allay concerns about this legislation having unintended consequences for such organisations. I hope that we're able to reach a stage where an amendment is supported that has the definitional clarity that the Minister is looking for.

[122] However, I do not support amendment 5, because the text of the Bill already provides that the guidance must specify methods that make provision about the required nursing skill mix, and as such, I do not believe that that amendment is necessary.

[123] **David Rees:** Thank you. I call on Darren to reply to the debate.

[124] **Darren Millar:** Can I thank the Minister and the Member in charge for their comments and the way in which they've approached this set of amendments in the sub-theme? I welcome the Minister's commitment, or offer, to work together in order to secure some definitional clarity to my amendment 29Q, and indeed the offer to work on a cross-party basis in order to secure some appropriate amendments on workforce planning. I think everybody accepts the need to engage with the independent sector and the care home sector when looking at the workforce planning arrangements, and I think that this is a useful way to take things forward.

[125] As the Minister will expect, I'd obviously like to see the Bill amended today and then further amended, if necessary, at Stage 3, to accommodate the definitional clarity that both the Member in charge and the Minister have indicated, but obviously I'll put this to the vote later on, Chair. Thank you.

[126] **David Rees:** Thank you, Darren.

Is-thema o fewn Grŵp 1: (e) Trefniadau Adrodd (Gwelliannau 29T, 29U, 32, 17, 18 (28, 29))

Sub-theme within Group 1: (e) Reporting Arrangements (Amendments 29T, 29U, 32, 17, 18 (28, 29))

[127] **David Rees:** We move on to the fifth sub-theme of amendments to consider in group 1, and they're in relation to reporting arrangements. The first amendment in the sub-theme is amendment 29T and, once again, I call on Darren Millar to move 29T and speak to the amendments in this sub-theme.

[128] **Darren Millar:** Chair, I move amendments 29T and 29U, and amendments 17 and 18 tabled in my name. This group of amendments focuses on the reporting arrangements for nurses and health service bodies. Amendments 17, 18 and 29T allow for any review of the impact of the Act to incorporate the effect of this legislation on inadequate hydration and nutrition in patients. The Royal College of Nursing recognises that hydration and nutrition are key performance indicators in establishing patient welfare, and are a key indicator in determining whether there's high-quality care and safe care being delivered. In fact, these are reflected in the Welsh Government's own fundamentals of care, which have been working in the NHS, now, for some years here in Wales. The current list of indicators of factors that constitute the assessment of safe staffing is non-inclusive of these very important issues and I think that, in measuring the impact of the Bill, should it proceed and become an Act, it's really important that we capture those indicators, which, I believe, will point to the value that this Bill can add to nursing care in Wales.

[129] Of course, we all know that, unfortunately, the 'Trusted to Care' report made clear reference, as have reports by the Commissioner for Older People in Wales in the past, to the importance of hydration and nutrition, and to the shortcomings, unfortunately, in some hospitals in Wales, which they documented. I think it's important that we take this opportunity to include on the face of the Bill reference to hydration and reference to nutrition, as some of the key measures that will inform the public and the NHS of the impact of this Bill on the ground, should it proceed to become an Act.

[130] I'll obviously be urging Members to reject the Welsh Government's amendment 32, which seeks to remove completely any measures of the impact of the Bill on patient care from the face of the Bill, and I think that's very much a backward step. I do hope that my amendments, rather than

taking away from the Bill, will actually strengthen it, going forward. We know that concerns have also been raised, I might add, by both the Public Accounts Committee in the National Assembly and, indeed, the Wales Audit Office, in some of the work that they have done on patient nutrition and hydration in Wales, about these important aspects of care. I think it is important that we reflect on that and that's why I'm urging Members to support these amendments today.

[131] **David Rees:** Thank you, Darren. Are there any other Members who wish to speak? No. Then, I call on the Minister to speak on this sub-theme. Minister.

[132] **Mark Drakeford:** Thank you, Chair. As Darren Millar just said, amendment 32 is relevant to this sub-theme, as well as amendment 29, and I'll be asking Members to support both of those Government amendments.

[133] My amendments move away from reporting requirements that have only a weak relationship to staffing levels, and towards three key evidence based indicators that can properly be reported upon. By contrast, amendments 17 and 18 from Darren add to the list of reporting indicators proposed in the Bill as introduced. This has been a matter that I've been concerned about since the very beginning of the Bill. I said in my evidence paper to this committee at Stage 1 that I was concerned at the lack of evidence of a causal relationship between some of the indicators set out in the original Bill and nurse staffing levels. I tried to explain these concerns at the Stage 1 committee, citing the fact that there are many factors that contribute to patient outcomes, and therefore the indicators used to report on this Bill must have a proper correlation to the nurse staffing level if they are to be meaningful. Those concerns apply equally to the addition of nutrition and hydration as proposed by amendments 17 and 18.

[134] It's important to be clear, Chair, that NICE did not find a direct link between staffing levels and issues of nutrition or hydration. They concluded, as I have in my amendment, that the evidence points to three areas: pressure ulcers, medication errors, and patient falls. None of this is for a moment to take away from the very real issues of nutrition and hydration. Those issues are central to the role of the nurse, and in the post-'Trusted to Care' era we are very seriously focusing on issues of nutrition and hydration. Our current Water Keeps You Well campaign, for example, is evidence of that, but there was nothing in what I heard Darren Millar say, in introducing these amendments, that could produce a causal link between the number of nurses

on a ward and issues of nutrition and hydration. If we're going to measure the impact of a Bill that is about the number of nurses on the ward, then the way we test the success of the Bill must be indicators that have that causal relationship. I'm afraid that those amendments do not.

[135] I agreed with the committee recommendation from Stage 1, that the reporting requirement should be revised so as not to create additional bureaucracy and be aligned to existing reporting requirements. That was recommendation 12 of this committee's report, and my amendments set out to do just that. That's why, in addition to the list of indicators that I believe have that causal relationship, and therefore should be reported upon, I also seek to align the reporting requirements to the current three-year planning cycle, and that's the effect of my amendments 29 and 32, and I ask Members to support them.

[136] **David Rees:** Thank you, Minister. I call on the Member in charge, Kirsty Williams, to speak to this sub-theme.

[137] **Kirsty Williams:** Thank you. Obviously, I note that the Minister's amendment 29, if passed, would reduce the proposed list of indicators to just three. As the Minister has just stated, those include medication errors, falls and pressure ulcers. I am pleased that these indicators remain, and note that they are indicators identified, as the Minister has just stated, by NICE's safe staffing guidance from July 2014 as being sensitive to the numbers of available nurses and to nurses' skill mix. However, I am disappointed that the other indicators have been removed.

[138] The intention of the indicators was not to assess the impact of staffing levels against a single indicator in isolation, but rather to provide a consistent set of data against which to monitor the overall impact of staffing levels. It is this overarching range of outcomes rather than any one individual indicator that would, I believe, have enabled a detailed examination of the impact of the measures within the Bill on outcomes.

[139] However, the amendment does helpfully state that these are only 'for example'. Consequently, health boards could choose to report on any other relevant indicators, although there is a risk that this may result in a variable dataset across Wales, depending on the indicators individual health boards chose, and reporting bodies may choose to report on those indicators that they believe will put them in a more positive light. Consequently, whilst I absolutely understand the importance of hydration and nutrition and the

points made by Darren Millar to include those on the face of the Bill, I believe it would be legally incongruous to include them if the other indicators from the original list are lost as a result of the Government's amendments.

10:30

[140] I also note that the Minister's amendment 32 will remove the requirement for Welsh Ministers to review the operation and effectiveness of the Act. Again, I believe that this is a missed opportunity—notably, in evidence to the Constitutional and Legislative Affairs Committee in its making laws inquiry, the Law Commission commented that it is commonplace for UK Government departments to carry out post-legislative reviews of new Acts. Post-legislative reviews enable a Government to assess the effectiveness of legislation to determine whether it has met its objectives and is delivering its intended benefits to citizens. I believe that's an essential part of good law making. I therefore, with regret, will not be able to support amendment 32, but will not oppose it either, because to do so would endanger the passing of the legislation as a whole.

[141] **David Rees:** Thank you, Kirsty. I call on Darren Millar to reply to the debate on this sub-theme.

[142] **Darren Millar:** Thank you, Chair. I'm pleased that both the Minister and the Member in charge have acknowledged the importance of patient nutrition and hydration. I'm surprised to hear that neither of them feel prepared to be able to support my amendments in this particular sub-theme. Reference has been made to there being no evidence of any causal effect—I think that was the phrase that the Minister used—of staffing levels contributing to poor hydration and nutrition. Well, I beg to differ, Minister. It's very clear from the Betsi Cadwaladr governance work that was done by Healthcare Inspectorate Wales and the Wales Audit Office that some of these issues have a direct correlation, and the 'Trusted to Care' report was very clear, too, that low staffing levels were contributing to some of the challenges there in relation to care, including poor patient hydration on that particular ward.

[143] I'm pleased to note the reference to the three other indicators, which, quite rightly, have been picked up on the back of the NICE piece of work in relation to pressure sores, medication errors and patient falls, but I do think that the addition of these other two further measures of success, or otherwise, would be an important addition to the Bill, which would actually strengthen it. Like Kirsty Williams, I will be encouraging Members to vote

against amendment 32, because I do think it is important that there's a review post legislation, and there should be a requirement to report back on the impact of legislation, and I think that there's a missed opportunity should that amendment be agreed.

[144] **David Rees:** Thank you, Darren.

Is-thema o fewn Grŵp 1: (f) Cydymffurfio a'r Ddyletswydd (Gwelliannau 29W, 29X, 29Y, 8, 9, 10, 11, 12, 30A, 30B, 13, 14 (28, 29))

Sub-theme within Group 1: (f) Compliance with the Duty (Amendments 29W, 29X, 29Y, 8, 9, 10, 11, 12, 30A, 30B, 13, 14 (28, 29))

[145] **David Rees:** The sixth and final sub-theme of amendments in group 1 to consider is in relation to compliance with the duty. The first amendment in the sub-theme is amendment 29W, and I call on Darren Millar to move amendment 29W and speak to the amendments in the sub-theme.

[146] **Darren Millar:** I move amendments 29W, 29X and 29Y, 30A, 30B, and amendments 8 through to 14, which are all tabled in my name. Regrettably, the Bill as it stands has no teeth, and this group of amendments focuses on enforcement and policing arrangements of the staffing levels in the Bill and seeks to give the Bill the bite that it needs to make sure that the NHS actually delivers on the very important staffing levels and the safe staffing levels that we all want to see.

[147] Amendment 29W would require compliance with duties under the Bill to be subject to independent inspection. Members will be aware that almost all health boards, in providing evidence to the committee, suggested that nurse staffing levels were already safe in their hospitals, but we only have their word to rely on, as there was absolutely no independent examination of the assertions that had been made. Whilst I don't want to question the integrity of the NHS, I do feel that any new arrangements should be subject to independent and regular inspection, rather than simply the assertion of a health board nurse director. And I do believe that my amendment would allow for an impartial view by the healthcare inspectorate on whether health service bodies—by the healthcare inspectorate, or perhaps CHCs—have fulfilled their obligations under the Bill.

[148] My amendment 29X provides for financial penalties for those who do not comply with their duties under the Bill. The Royal College of Physicians said that the Bill, and I quote:

[149] 'must be properly enforced to ensure it is effective'.

[150] The Board of Community Health Councils in Wales also suggested that there needed to be clear sanctions on failure to meet the staffing requirements that the Bill would progress. And I think that my amendment, in facilitating the imposition of penalties on health boards, which are not punitive, and simply says that the penalties must not exceed the cost that it would have incurred had it been meeting the nurse staffing Bill requirements, is appropriate. Unison also, of course, have stated that serious consideration needed to be given to the available sanctions for non-compliance within the Bill.

[151] Amendment 29Y inserts a new section into the Bill on whistleblowing. It requires health board employees to blow the whistle if a health board is in breach of its duties and provides protection for those employees to avoid discrimination against them for being brave enough to do so. We all know that there are cases here in Wales of nursing staff doing the right thing in the NHS—reporting incidents, reporting concerns—and then, unfortunately, facing consequences sometimes from managers as a result.

[152] Amendments 30A and 30B are consequential to amendments 29W, 29X and 29Y, and amendments 8 through to 14 would have a similar effect to the amendments I've just been referring to in this sub-group, but on the face of the Bill as introduced. I urge Members to support.

[153] **David Rees:** Thank you, Darren. Are there any other Members who wish to speak? No. Then I call on the Minister to speak to this sub-theme. Minister.

[154] **Mark Drakeford:** Chair, Darren described his amendments 8 and 29W as 'giving bite' to the Bill through the creation of a new inspection regime. My fear is that it would be costly, bureaucratic, untested and unnecessary. The committee rightly warned at Stage 1 that the proper objectives of the Bill could spiral out of control if a huge superstructure of reporting and inspecting were to be constructed on its base, and amendment 8 ignores that advice. Compliance with the duties imposed by the Bill will be pursued, but they will be pursued through existing healthcare standard requirements. One of the challenges of this Bill has always been to achieve proportionality—to secure its aims without the costs turning out to be greater than its rewards. Amendment 8 takes us backwards in that regard, and I ask you to reject it.

[155] Amendments 9 and 10 set up a regime of financial penalties for health service bodies in the Bill as introduced, and 29X has a similar effect if amendment 29 is accepted. The imposition of financial penalties was not supported when the principle was discussed by this committee during Stage 1, and I reject the approach again today. It would turn the Bill into an accountant's charter and introduce another set of unwelcome distractions from its core purpose. If LHBs are in breach of the statutory duties that the Bill places upon them, then Welsh Ministers already have powers of direction through sections 12 and 19, and powers of intervention through section 26 of the National Health Service (Wales) Act 2006. Moreover, nothing in this Bill, as Kirsty Williams pointed out earlier, would prevent an individual from bringing a legal challenge against local health boards and trusts if such an individual were to believe that those bodies were in breach of their statutory duties as created under the Bill.

[156] Amendments 11, 12 and 29Y seek to place an obligation upon employees to disclose to management if they are of the view that the body for which they work is not complying with their duties under this Bill. Darren said that his amendments were designed to bring teeth to this section, but these amendments are completely unenforceable. There is simply no sanction in the amendments proposed by the Member for a person if they did not make a required disclosure. Furthermore, in the context of the Bill, it's worth pointing out that the duty of candour for nurses issued by the Nursing and Midwifery Council already requires practitioners and organisations to report on adverse incidents. And the NMC code also has clauses that require registrants to report to persons of authority environments where care is not satisfactory. And on that basis, I don't support these amendments either.

[157] Amendments 13 and 14 are technical amendments that arise only if amendments 8 and 9 are accepted, but I ask Members to reject those amendments. Amendments 30A and 30B are also technical amendments and relevant only if amendment 29X is agreed, but I ask Members to reject that amendment also.

[158] **David Rees:** Thank you, Minister. I call the Member in charge, Kirsty Williams, to speak to the sub-theme.

[159] **Kirsty Williams:** Thank you. I do not support amendments 29W, 30A, 8 and 13, which, as previously stated, would introduce a requirement for Welsh

Ministers to set out a process for independent inspection of compliance with the new duties by health service bodies. Health Inspectorate Wales has stated that its inspections explicitly consider staffing levels, and my intention in developing the Bill was always to use existing processes and mechanisms wherever possible to avoid creating any new additional bureaucracy in the system.

[160] I do not believe that the Bill should be amended either by amendments 29X, 30B, 9, 10 and 14 to introduce a power for Welsh Ministers to bring forward affirmative regulations that would provide for financial penalties to be levied on health bodies that fail to comply with the new duties. I did consider that option for financial penalties when originally developing the Bill. However, there was insufficient evidence or consensus in responses to my consultation for me to conclude that this would be of benefit. A specific concern was also raised that money could be diverted away from patient care if fines were introduced, and I have come to the conclusion that financial penalties would help no-one.

[161] I am receptive to the rationale behind amendments 29Y, 11 and 12, which would place an expressed requirement on employees of health service bodies, who have reasonable cause to suspect that the body is in breach of the duties, to inform management of the fact. When problems arise in NHS settings, whistleblowers have a vital role to play and should be applauded and supported for coming forward, a fact that was highlighted in this Assembly by the Public Accounts Committee's report on grants management. However, I do not believe it's appropriate to include a provision on this matter on the face of the Bill, because it potentially raises issues of legislative competence around its interaction with employment law and regulation of healthcare professionals, which is an exception to the Assembly's competence. Any sanctions that flowed from a failure to report could be argued to relate to employment law for the purposes of Schedule 7 to the Government of Wales Act 2006 or could be considered to be a listed exception to our competence. Moreover, even without these proposed amendments, nurses would remain under a professional obligation to report any breaches.

[162] **David Rees:** Thank you, Kirsty. I call on Darren Millar to reply to the debate.

[163] **Darren Millar:** Thank you, Chair. The Minister, in his opening remarks to the debate on this sub-theme, said that my amendments would be costly,

bureaucratic, untested and unnecessary. And yet we've already heard from Kirsty Williams that HIW are already inspecting on some of these things. So, I cannot understand why those assertions are being made. I simply want that to be a regular feature of their inspection work, not something that may be done, but something, rather, that must be done and must be reported against. The Minister said that he has existing opportunities, through existing regulation and legislation, to be able to deal with non-compliance, but, of course, we all know that ministerial guidance is often not actually being fulfilled by health boards, and yet things are not currently working. Ministers set targets for health boards, performance targets, on a regular basis that aren't being met, and yet the existing arrangements for policing those targets and performance measures simply don't work.

[164] So, the Minister's bite at present is a rather gummy bite; it doesn't have any teeth to it. I'm simply trying to give you a decent set of gnashers, really, Minister, when it comes to being able to deal with compliance in respect of this Bill, should it proceed to be an Act. He described it as an 'accountant's charter', the suggestion that there should be financial penalties for those health boards. I don't accept that fines will be something that will divert cash from patient care. They could be kept within the NHS as a whole, and invested in further NHS care, and, at the end of the day, these are designed to act as a disincentive for health boards to breach their duties under the Act. So, I will be pushing for those teeth to be given to the Minister to be able to deal with non-compliance.

10:45

[165] If I could just touch on the whistleblowing issue, I fully accept the principle of support for whistleblowers, which has been expressed by the Minister and the Member in charge. There is a duty of candour, but it's not legislated for, if you like, here in Wales, and I want to see it on the face of this Bill so that nursing staff themselves can see the direct relationship between this legislation and the nurse staffing levels that they are working with in the care environments where they are placed, so that they can see a definite relationship between them being able to blow the whistle on compliance matters, where staffing levels aren't being met, and to be able to see clearly in legislation that they have proper protection from people who may want to discriminate against them in the workplace because they've chosen to be able to do that.

[166] We cannot rely on self-reporting and we cannot rely on the existing

arrangements. We know the existing arrangements aren't working because we regularly get members of the nursing profession and of the wider healthcare workforce contacting Assembly Members on a regular basis, saying that they've blown the whistle on some poor practice or on some non-compliance and that they've lost their jobs as a result. We can't allow that to go on and I believe that ensuring that these provisions are on the face of the Bill, in respect of whistleblowing, will give the protections and send a clear message to the nursing profession that we back them in wanting to deliver high standards of quality care.

[167] **David Rees:** Thank you, Darren. We've now completed our debate on all sub-themes within group 1. Finally, before we move to the vote, I will invite Members to make any final additional comments that they wish to make on the amendments in group 1, and then I'll ask the Member in charge to make any final comments and then the Minister to close group 1. Do any Members wish to speak? No. Does the Member in charge wish to make any final comments on group 1?

[168] **Kirsty Williams:** Just briefly. In my opening remarks on this group, I indicated that although I'm disappointed by some of the Minister's amendments, I believe fundamentally that what will result, even if they are passed, is a Bill that makes a meaningful difference to Welsh nurses and Welsh patients. Of course, I would like my Bill to be exactly as I had intended, but this isn't about me, it's about legislation that makes a meaningful difference to the citizens of Wales. The relationship between nurse staffing levels and safe, effective patient care is in no doubt. Only last week the health service journal highlighted in an article that more than nine out of 10 acute hospitals in England are failing to meet their own targets for the number of nurses working on wards. And in May this year the Welsh Government's own research into nurse staffing levels in Wales highlighted that although much advice is circulated regarding nurse-to-patient staffing ratios, such as that circulated by the Chief Nursing Officer for Wales and the National Institute for Health and Care Excellence—NICE—different organisations may well be operating within different understandings of what that advice means.

[169] This Bill, and the guidance to be issued under it, will help bring clarity and transparency around the staffing levels and bring NHS Wales in line with improvements in nurse staffing reporting in other parts of the world. I believe that this legislation, even when amended, is legislation needed to guarantee results and safeguard patient outcomes. As such, whilst I do not

support the Minister's amendments, neither do I urge Members to vote against them.

[170] **David Rees:** Thank you. Minister, do you want to reply to the debate on group 1?

[171] **Mark Drakeford:** Thank you, Chair. I thank all Members and the Member in charge for the very detailed and engaged discussion that I think we've had on these amendments this morning. There have been a number of sub-themes on which we've not been very far apart at all and even when we have disagreed, the concerns raised have all been important ones.

[172] Throughout the process of this Bill, my aim has been to help achieve a piece of legislation that strengthens the ability of our systems to secure the right number of nurses on acute adult medical and surgical wards here in Wales to make a meaningful difference, as Kirsty Williams has said, without the dangers that were clearly identified in this committee's Stage 1 report. That's what the Government amendments in this group set out to achieve. I hope Members here will be able to support them and, other than in those instances where I've indicated areas of agreement, to resist the other amendments in front of you this morning.

[173] **David Rees:** Thank you, Minister. We'll now dispose of all the amendments in group 1. The question is that amendment 28 be agreed to. Does any Member object? [*Objection.*] I have an objection, therefore I'll take a vote by a show of hands. Can those in favour of amendment 28 please show? Can those against amendment 28 please show? Abstentions. Therefore, in relation to amendment 28, there voted seven in favour, two against, and one abstention. The amendment is therefore agreed.

Gwelliant 28: O blaid 7, Yn erbyn 2, Ymatal 1.

Amendment 28: For 7, Against 2, Abstain 1.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Alun Davies
John Griffiths
Altaf Hussain
Darren Millar
Lynne Neagle
Gwyn R. Price

Elin Jones
Lindsay Whittle

Peter Black

David Rees

*Derbyniwyd gwelliant 28.
Amendment 28 agreed.*

[174] **David Rees:** Darren, would you like to move amendment 29A?

*Cynigiwyd gwelliant 29A (Darren Millar, gyda chefnogaeth Elin Jones).
Amendment 29A (Darren Millar, supported by Elin Jones) moved.*

[175] **Darren Millar:** Moved.

[176] **David Rees:** The question is that amendment 29A be agreed to. Does any Member object? [*Objection.*] I have an objection; therefore I'll take the vote by a show of hands. Can those in favour of amendment 29A please raise their hands? Can those against please raise their hands? As there is a tied vote, I use my casting vote in the negative, against the amendment, in accordance with Standing Order 6.20(ii), and therefore amendment 29A is not agreed.

*Gwelliant 29A: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29A: For 5, Against 5, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Peter Black
Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

Alun Davies
John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

*Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais
fwrw yn unol â Rheol Sefydlog 6.20(ii).*

*As there was an equality of votes, the Chair used his casting vote in
accordance with Standing Order 6.20(ii).*

*Gwrthodwyd gwelliant 29A.
Amendment 29A not agreed.*

[177] **David Rees:** Darren, amendment 29B.

Cynigiwyd gwelliant 29B (Darren Millar, gyda chefnogaeth Elin Jones).

Amendment 29B (Darren Millar, supported by Elin Jones) moved.

[178] **Darren Millar:** Moved.

[179] **David Rees:** The question is that amendment 29B be agreed to. Does any Member object? [*Objection.*] I have an objection; therefore I'll take a show of hands for the vote. Can those in favour of amendment 29B please raise their hands? Can those against please raise their hands? As there's a tied vote, I use my casting vote in the negative, against the amendment, in accordance with Standing Order 6.20(ii), and therefore amendment 29B is not agreed.

*Gwelliant 29B: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29B: For 5, Against 5, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Peter Black
Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

Alun Davies
John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliant 29B.
Amendment 29B not agreed.*

[180] **David Rees:** Darren, would you like to move amendment 29C?

*Cynigiwyd gwelliant 29C (Darren Millar).
Amendment 29C (Darren Millar) moved.*

[181] **Darren Millar:** Moved.

[182] **David Rees:** The question is that amendment 29C be agreed to. Does any Member object? [*Objection.*] I have an objection; therefore we'll take a vote by a show of hands. Can those in favour of amendment 29C please raise

their hands? Can those against amendment 29C please raise their hands? In relation to amendment 29C, there voted two in favour and eight against. Therefore, amendment 29C is not agreed.

*Gwelliant 29C: O blaid 2, Yn erbyn 8, Ymatal 0.
Amendment 29C: For 2, Against 8, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Altaf Hussain	Peter Black	
Darren Millar	Alun Davies	
	John Griffiths	
	Elin Jones	
	Lynne Neagle	
	Gwyn R. Price	
	David Rees	
	Lindsay Whittle	

*Gwrthodwyd gwelliant 29C.
Amendment 29C not agreed.*

[183] **David Rees:** Darren, 29D.

*Cynigiwyd gwelliant 29D (Darren Millar).
Amendment 29D (Darren Millar) moved.*

[184] **Darren Millar:** Moved.

[185] **David Rees:** The question is that amendment 29D be agreed to. Does any Member object? [*Objection.*] I have an objection; therefore I'll take a vote by a show of hands. Can those in favour of amendment 29D please raise their hands? Thank you. Those against, please raise your hands. Thank you. As there's a tied vote, I use my casting vote in the negative, against the amendment, in accordance with Standing Order 6.20(ii). Therefore, amendment 29D is not agreed.

*Gwelliant 29D: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29D: For 5, Against 5, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Peter Black	Alun Davies	

Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliant 29D.
Amendment 29D not agreed.*

[186] **David Rees:** I propose that amendments 29E to 29I, which appear consecutively in the marshalled list, are disposed of en bloc, given their nature. Does any Member object to voting being grouped? No. Okay. Darren, would you like to move amendments 29E to 29I?

Cynigiwyd gwelliannau 29E, 29F, 29G, 29H, a 29I (Darren Millar gyda chefnogaeth Elin Jones).

Amendments 29E, 29F, 29G, 29H, and 29I (Darren Millar, supported by Elin Jones) moved.

[187] **Darren Millar:** Moved.

[188] **David Rees:** The question is that amendments 29E, 29F, 29G, 29H, and 29I be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, the question is that those amendments be agreed. Those in favour of amendments 29E, 29F, 29G, 29H, and 29I, please raise your hands. Thank you. Can those against please raise their hands? Thank you. As there's a tied vote, I use my casting vote in the negative, against those amendments, in accordance with Standing Order 6.20. Therefore, they are not agreed.

*Gwelliannau 29E, 29F, 29G, 29H, a 29I: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendments 29E, 29F, 29G, 29H, and 29I: For 5, Against 5, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Peter Black
Altaf Hussain
Elin Jones

Alun Davies
John Griffiths
Lynne Neagle

Darren Millar
Lindsay Whittle

Gwyn R. Price
David Rees

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliannau 29E, 29F, 29G, 29H, a 29I.
Amendments 29E, 29F, 29G, 29H, and 29I not agreed.*

[189] **David Rees:** Darren, would you like to move amendment 29J?

*Cynigiwyd gwelliant 29J (Darren Millar).
Amendment 29J (Darren Millar) moved.*

[190] **Darren Millar:** Moved.

[191] **David Rees:** The question is that amendment 29J be agreed to. Does any Member object? [*Objection.*] I have an objection. I will therefore take a vote by a show of hands. Can those in favour of amendment 29J please raise their hands? Thank you. Can those against please raise their hands? Thank you. In relation to amendment 29J, there voted four in favour and six against. Therefore, amendment 29J is not agreed.

*Gwelliannau 29J: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendments 29J: For 4, Against 6, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

Peter Black
Alun Davies
John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

*Gwrthodwyd gwelliant 29J.
Amendment 29J not agreed.*

[192] **David Rees:** Elin, would you like to move amendment 29Z?

Cynigiwyd gwelliant 29Z (Elin Jones).
Amendment 29Z (Elin Jones) moved.

[193] **Elin Jones:** Symud.

Elin Jones: Move.

[194] **David Rees:** Thank you. The question is that amendment 29Z be agreed to. Does any Member object? [*Objection.*] I have an objection. I will therefore take a vote by show of hands. Can those in favour of amendment 29Z please raise their hands? Thank you. Can those against please raise their hands? Thank you. In relation to 29Z, there voted four in favour and six against, and therefore amendment 29Z is not agreed.

Gwelliant 29Z: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29Z: For 4, Against 6, Abstain 0.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

Peter Black
Alun Davies
John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

Gwrthodwyd gwelliant 29Z.
Amendment 29Z not agreed.

[195] **David Rees:** Elin, 29AA.

Cynigiwyd gwelliant 29AA (Elin Jones).
Amendment 29AA (Elin Jones) moved.

[196] **Elin Jones:** Symud.

Elin Jones: Move.

[197] **David Rees:** Thank you. The question is that amendment 29AA be agreed. Does any Member object? [*Objection.*] I have an objection. We will therefore take a vote by a show of hands. Can those in favour of amendment 29AA please raise their hands? Thank you. Can those against please raise their hands? Thank you. Therefore, in relation to amendment 29AA, there voted four in favour and six against, and therefore amendment 29AA is not agreed.

Gwelliannau 29AA: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendments 29AA: For 4, Against 6, Abstain 0.

O blaid: For:	Yn erbyn: Against:	Ymatal: Abstain:
Altaf Hussain Elin Jones Darren Millar Lindsay Whittle	Peter Black Alun Davies John Griffiths Lynne Neagle Gwyn R. Price David Rees	

*Gwrthodwyd gwelliant 29AA.
Amendment 29AA not agreed.*

[198] **David Rees:** Elin, 29AB.

*Cynigiwyd gwelliant 29AB (Elin Jones).
Amendment 29AB (Elin Jones) moved.*

[199] **Elin Jones:** Symud. **Elin Jones:** Move.

[200] **David Rees:** The question is that amendment 29AB be agreed. Does any Member object? [*Objection.*] We have an objection. I will therefore take a vote by a show of hands. Can those in favour of amendment 29AB please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 29AB, there voted in favour four and against six. Therefore, amendment 29AB is not agreed.

*Gwelliant 29AB: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29AB: For 4, Against 6, Abstain 0.*

O blaid: For:	Yn erbyn: Against:	Ymatal: Abstain:
Altaf, Hussain Jones, Elin Millar, Darren Whittle, Lindsay	Black, Peter Davies, Alun Griffiths, John Neagle, Lynne Price, Gwyn R. Rees, David	

*Gwrthodwyd gwelliant 29AB.
Amendment 29AB not agreed.*

[201] **David Rees:** Elin, amendment 29AC.

*Cynigiwyd gwelliant 29AC (Elin Jones).
Amendment 29AC (Elin Jones) moved.*

[202] **Elin Jones:** Symud. **Elin Jones:** Move.

[203] **David Rees:** The question is that amendment 29AC be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. The question is that amendment 29AC be agreed to. Can those in favour please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 29AC, there voted four in favour and six against. Therefore, amendment 29AC is not agreed.

*Gwelliant 29AC: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29AC: For 4, Against 6, Abstain 0.*

O blaid: For:	Yn erbyn: Against:	Ymatal: Abstain:
Altaf, Hussain Jones, Elin Millar, Darren Whittle, Lindsay	Black, Peter Davies, Alun Griffiths, John Neagle, Lynne Price, Gwyn R. Rees, David	

*Gwrthodwyd gwelliant 29AC.
Amendment 29AC not agreed.*

[204] **David Rees:** Elin, amendment 29AD.

*Cynigiwyd gwelliant 29AD (Elin Jones).
Amendment 29AD (Elin Jones) moved.*

[205] **Elin Jones:** Symud. **Elin Jones:** Move.

[206] **David Rees:** The question is that amendment 29AD be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a

vote by a show of hands. Can those in favour of amendment 29AD please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 29AD, there voted in favour four; against, six. Therefore, amendment 29AD is not agreed.

*Gwelliant 29AD: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29AD: For 4, Against 6, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Altaf, Hussain	Black, Peter	
Jones, Elin	Davies, Alun	
Millar, Darren	Griffiths, John	
Whittle, Lindsay	Neagle, Lynne	
	Price, Gwyn R.	
	Rees, David	

*Gwrthodwyd gwelliant 29AD.
Amendment 29AD not agreed.*

[207] **David Rees:** I propose that amendments 29K to 29O, which appear consecutively in the marshalled list, are disposed of en bloc, given their nature. Does any Member object to the votes being grouped? No, okay. Darren, would you like to move amendments 29K to 29O?

*Cynigiwyd gwelliannau 29K, 29L, 29M, 29N a 29O (Darren Millar, gyda chefnogaeth Elin Jones).
Amendments 29K, 29L, 29M, 29N and 29O (Darren Millar, supported by Elin Jones) moved.*

[208] **Darren Millar:** Move.

[209] **David Rees:** The question is that amendments 29K, 29L, 29M, 29N and 29O be agreed to. Does any Member object? [*Objection.*] I have an objection. I will therefore take a vote by a show of hands. Can those in favour of amendments 29K, 29L, 29M, 29N and 29O please raise your hands? Thank you. Can those against please raise your hands? Thank you. As there is a tied vote, I use my casting vote in the negative against the amendments, in accordance with Standing Order 6.20(ii). Therefore, those amendments are not agreed.

Gwelliannau 29K, 29L, 29M, 29N a 29O: O blaid 5, Yn erbyn 5, Ymatal 0.

Amendments 29K, 29L, 29M, 29N and 29O: For 5, Against 5, Abstain 0.

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Altaf, Hussain	Davies, Alun	
Black, Peter	Griffiths, John	
Jones, Elin	Neagle, Lynne	
Millar, Darren	Price, Gwyn R.	
Whittle, Lindsay	Rees, David	

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliannau 29K, 29L, 29M, 29N a 29O.
Amendments 29K, 29L, 29M, 29N and 29O not agreed.*

[210] **David Rees:** Darren, do you wish to move amendment 29P?

*Cynigiwyd gwelliant 29P (Darren Millar).
Amendment 29P (Darren Millar) moved.*

[211] **Darren Millar:** Move.

[212] **David Rees:** The question is that amendment 29P be agreed to. Does any Member object? [*Objection.*] I have an objection. I will therefore take a vote by a show of hands. Can those in favour of amendment 29P please raise your hands? Thank you. Can those against please raise your hands? Thank you. As there is a tied vote, I use my casting vote in the negative against the amendment, in accordance with Standing Order 6.20(ii). Therefore, amendment 29P is not agreed.

*Gwelliant 29P: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29P: For 5, Against 5, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Altaf, Hussain	Davies, Alun	
Black, Peter	Griffiths, John	
Jones, Elin	Neagle, Lynne	
Millar, Darren	Price, Gwyn R.	

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

Gwrthodwyd gwelliant 29P.

Amendment 29P not agreed.

[213] **David Rees:** Darren, would you like to move amendment 29Q?

Cynigiwyd gwelliant 29Q (Darren Millar).

Amendment 29Q (Darren Millar) moved.

[214] **Darren Millar:** Move.

[215] **David Rees:** The question is that amendment 29Q be agreed to. Does any Member object? There are no objections. Therefore, amendment 29Q is agreed.

Derbyniwyd gwelliant 29Q yn unol â Rheol Sefydlog 17.34.

Amendment 29Q agreed in accordance with Standing Order 17.34.

[216] **David Rees:** Darren, would you like to move amendment 29R?

Cynigiwyd gwelliant 29R (Darren Millar, gyda chefnogaeth Elin Jones).

Amendment 29R (Darren Millar, supported by Elin Jones) moved.

[217] **Darren Millar:** Move.

[218] **David Rees:** The question is that amendment 29R be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. Can those in favour of amendment 29R please raise your hands? Thank you. Can those against please raise your hands? Thank you. As there is a tied vote, I use my casting vote in the negative against the amendment, in accordance with Standing Order 6.20(ii). Therefore, amendment 29R is not agreed.

Gwelliant 29R: O blaid 5, Yn erbyn 5, Ymatal 0.

Amendment 29R: For 5 Against 5, Abstain 0.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Altaf, Hussain
Black, Peter
Jones, Elin
Millar, Darren
Whittle, Lindsay

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliant 29R.
Amendment 29R not agreed.*

[219] **David Rees:** Darren, amendment 29S.

*Cynigiwyd gwelliant 29S (Darren Millar, gyda chefnogaeth Elin Jones).
Amendment 29S (Darren Millar, supported by Elin Jones) moved.*

[220] **Darren Millar:** Move.

[221] **David Rees:** The question is that amendment 29S be agreed to. Does any Member object? [*Objection.*] I have an objection. I will therefore ask for a vote by a show of hands. Can those in favour of amendment 29S please raise your hands? Thank you. Can those against please raise your hands? Thank you. As there is a tied vote, I use my casting vote in the negative against the amendment, in accordance with Standing Order 6.20(ii). Therefore, amendment 29S is not agreed.

*Gwelliant 29S: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29S: For 5 Against 5, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Altaf, Hussain
Black, Peter
Jones, Elin
Millar, Darren
Whittle, Lindsay

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

Gwrthodwyd gwelliant 29S.

Amendment 29S not agreed.

[222] **David Rees:** Darren, would you like to move amendment 29T?

Cynigiwyd gwelliant 29T (Darren Millar, gyda chefnogaeth Elin Jones).

Amendment 29T (Darren Millar, supported by Elin Jones) moved.

[223] **Darren Millar:** Move.

[224] **David Rees:** The question is that amendment 29T be agreed to. Does any Member object? [*Objection.*] I have an objection. I will take a vote by a show of hands. Can those in favour of amendment 29T please raise your hands? Thank you. Can those against 29T please raise your hands? Thank you. Therefore, in relation to amendment 29T, there voted four in favour and six against. Therefore, amendment 29T is not agreed.

Gwelliant 29T: O blaid 4, Yn erbyn 6, Ymatal 0.

Amendment 29T: For 4, Against 6, Abstain 0.

O blaid:

For:

Altaf, Hussain
Jones, Elin
Millar, Darren
Whittle, Lindsay

Yn erbyn:

Against:

Black, Peter
Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Ymatal:

Abstain:

Gwrthodwyd gwelliant 29T.

Amendment 29T not agreed.

[225] **David Rees:** Darren, would you like to move amendment 29U?

Cynigiwyd gwelliant 29U (Darren Millar, gyda chefnogaeth Elin Jones).

Amendment 29U (Darren Millar, supported by Elin Jones) moved.

[226] **Darren Millar:** Move.

11:00

[227] **David Rees:** The question is that amendment 29U be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. Can those in favour of amendment 29U please raise your hands? Thank you. Those against amendment 29U, please raise your hands. Thank you. In relation to amendment 29U, there voted four in favour and six against. Therefore, amendment 29U is not agreed.

*Gwelliant 29U: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29U: For 4, Against 6, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter
Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn. R
Rees, David

*Gwrthodwyd gwelliant 29U.
Amendment 29U not agreed.*

[228] **David Rees:** Darren, amendment 29V.

*Cynigiwyd gwelliant 29V (Darren Millar, gyda chefnogaeth Elin Jones).
Amendment 29V (Darren Millar, supported by Elin Jones) moved.*

[229] **Darren Millar:** Move.

[230] **David Rees:** The question is that amendment 29V be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. Can those in favour of amendment 29V please raise your hands? Thank you. Can those against please raise your hands? Thank you. There's a tied vote. Therefore, I will use my casting vote in the negative against the amendment in accordance with Standing Order 6.20(ii), and amendment 29V is not agreed.

*Gwelliant 29V: O blaid 5, Yn erbyn 5, Ymatal 0.
Amendment 29V: For 5, Against 5, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Black, Peter	Davies, Alun	
Hussain, Altaf	Griffiths, John	
Jones, Elin	Neagle, Lynne	
Millar, Darren	Price, Gwyn R.	
Whittle, Lindsay	Rees, David	

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliant 29V.
Amendment 29V not agreed.*

[231] **David Rees:** Darren, would you like to move amendment 29W?

*Cynigiwyd gwelliant 29W (Darren Millar).
Amendment 29W (Darren Millar) moved.*

[232] **Darren Millar:** Move.

[233] **David Rees:** Before we vote on 29W, Members should be aware that, if amendment 29W is not agreed, then amendment 30A will fall. The question is that amendment 29W be agreed. Does any Member object? [*Objection.*] I have an objection. I will therefore ask for a vote by show of hands. Can those in favour of amendment 29W please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 29W, there voted two in favour and eight against, and therefore amendment 29W is not agreed.

*Gwelliant 29W: O blaid 2, Yn erbyn 8, Ymatal 0.
Amendment 29W: For 2, Against 8, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:

Hussain, Altaf
Millar, Darren

Black, Peter
Davies, Alun
Griffiths, John
Jones, Elin
Neagle, Lynne
Price, Gwyn R.
Rees, David
Whittle, Lindsay

*Gwrthodwyd gwelliant 29W.
Amendment 29W not agreed.*

*Methodd gwelliant 30A.
Amendment 30A fell.*

[234] **David Rees:** Darren, amendment 29X.

*Cynigiwyd gwelliant 29X (Darren Millar).
Amendment 29X (Darren Millar) moved.*

[235] **Darren Millar:** Move.

[236] **David Rees:** Before we move to a vote on amendment 29X, we should be aware that, if amendment 29X is not agreed, then amendment 30B will fall. The question, therefore, is that amendment 29X be agreed. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by show of hands. Can those in favour of amendment 29X please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 29X, there voted four in favour and six against. Therefore, amendment 29X is not agreed.

*Gwelliant 29X: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29X: For 4, Against 6, Abstain 0.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter
Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn. R
Rees, David

Gwrthodwyd gwelliant 29X.
Amendment 29X not agreed.

Methodd gwelliant 30B.
Amendment 30B fell.

[237] **David Rees:** Darren, would you like to move amendment 29Y?

Cynigiwyd gwelliant 29Y (Darren Millar).
Amendment 29Y (Darren Millar) moved.

[238] **Darren Millar:** Move.

[239] **David Rees:** The question is that amendment 29Y be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by show of hands. Can those in favour of amendment 29Y please raise your hands? Thank you. Can those against please raise your hands? Thank you. Therefore, in relation to amendment 29Y, there voted for four and against six, and therefore amendment 29Y is not agreed.

Gwelliant 29Y: O blaid 4, Yn erbyn 6, Ymatal 0.
Amendment 29Y: For 4, Against 6, Abstain 0.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter
Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn. R
Rees, David

Gwrthodwyd gwelliant 29Y.
Amendment 29Y not agreed.

[240] **David Rees:** Elin, would you like to move amendment 29AE?

[241] **Elin Jones:** No, I won't move 29AE in light of the Minister's commitment to work with me on an amendment for Stage 3 on workforce planning.

[242] **David Rees:** Thank you, Elin. Before we move on, does any other Member wish to move amendment 29AE? No. Then 29AE is not considered.

Ni chynigiwyd gwelliant 29AE (Elin Jones).

Amendment 29AE (Elin Jones) not moved.

[243] **David Rees:** Before we move on to a vote on amendment 29, Members will wish to be aware that, if amendment 29 is agreed, then amendments 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 13, 14, 15 and 16 will fall. And, as amendments 29W and 29X were not agreed, amendments 30A and 30B have fallen. If amendment 29 is not agreed, then amendments 30, 31A, 31, 36 and 37 will also fall. Okay, is that clear? The question is that amendment 29 be agreed to? [*Objection.*] I have an objection. Therefore, I will take a vote by show of hands. Can those in favour of amendment 29 please raise your hands? Thank you. Can those against amendment 29 please raise your hands? Thank you. Can those abstaining—? Thank you. In relation to amendment 29, there voted in favour five, against four, and there was one abstention. The amendment is therefore agreed.

Gwelliant 29: O blaid 5, Yn erbyn 4, Ymatal 1.

Amendment 29: For 5, Against 4, Abstain 1.

O blaid:

Yn erbyn:

Ymatal:

For:

Against:

Abstain:

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn. R
Rees, David

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter

Derbyniwyd gwelliant 29.

Amendment 29 agreed.

Methodd gwelliannau 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 13, 14, 15 a 16.

Amendments 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 13, 14, 15 and 16 fell.

[244] **David Rees:** I suggest that we take a 10-minute break because,

obviously, Members have talked quite a lot this morning so it will give us a rest. So, can we reconvene at 11.15 a.m. to finish the groups, please?

*Gohiriwyd y cyfarfod rhwng 11:04 a 11:14.
The meeting adjourned between 11:04 and 11:14.*

[245] **David Rees:** Can I welcome Members back to this morning's session? Just to clarify, previously to the break, amendment 29 was agreed. Therefore, amendments 1, 20, 2, 21, 3, 4, 22, 23, 24, 5, 6, 7, 8, 9, 10, 11, 12, 25, 13, 14, 15 and 16 have fallen. Okay?

[246] As amendments 29W and 29X were not agreed, amendments 30A and 30B have fallen. So, we now move straight to amendment 30.

*Cynigiwyd gwelliant 30 (Mark Drakeford).
Amendment 30 (Mark Drakeford) moved.*

[247] **David Rees:** The question is that amendment 30 be agreed. Does any Member object? There are no objections. Therefore, amendment 30 is agreed.

*Derbyniwyd gwelliant 30 yn unol â Rheol Sefydlog 17.34.
Amendment 30 agreed in accordance with Standing Order 17.34.*

[248] **David Rees:** We move on to amendment 31A. Darren, would you like to move amendment 31A?

*Cynigiwyd gwelliant 31A (Darren Millar, gyda chefnogaeth Elin Jones).
Amendment 31A (Darren Millar, supported by Elin Jones) moved.*

[249] **Darren Millar:** I move.

[250] **David Rees:** The question is that amendment 31A be agreed. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. Can those in favour of amendment 31A please raise your hands? Thank you. Can those against please raise your hands? Thank you. As there's a tied vote, I use my casting vote in the negative against the amendment, in accordance with Standing Order 6.20(ii). Therefore, amendment 31A is not agreed.

Gwelliant 31A: O blaid 5, Yn erbyn 5, Ymatal 0.

Amendment 31A: For 5, Against 5, Abstain 0.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Black, Peter
Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Gan fod nifer y pleidleisiau yn gyfartal, defnyddiodd y Cadeirydd ei bleidlais fwrw yn unol â Rheol Sefydlog 6.20(ii).

As there was an equality of votes, the Chair used his casting vote in accordance with Standing Order 6.20(ii).

*Gwrthodwyd gwelliant 31A.
Amendment 31A not agreed.*

*Cynigiwyd gwelliant 31 (Mark Drakeford).
Amendment 31 (Mark Drakeford) moved.*

[251] **David Rees:** The question is that amendment 31 be agreed to. Does any Member object? There is no objection. Therefore, amendment 31 is agreed.

*Derbyniwyd gwelliant 31 yn unol â Rheol Sefydlog 17.34.
Amendment 31 agreed in accordance with Standing Order 17.34.*

[252] **David Rees:** Darren, would you like to move amendment 36?

*Cynigiwyd gwelliant 36 (Darren Millar).
Amendment 36 (Darren Millar) moved.*

[253] **Darren Millar:** I move.

[254] **David Rees:** The question is that amendment 36 be agreed to. Does any Member object? There is an objection. Therefore, I will take a vote by a show of hands. Can those in favour of amendment 36 please raise your hands? Thank you. Can those against amendment 36 please raise your hands? Thank you. In relation to amendment 36, there voted in favour two, against eight. Therefore, amendment 36 is not agreed.

*Gwelliant 36: O blaid 2, Yn erbyn 8, Ymatal 0.
Amendment 36: For 2, Against 8, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Hussain, Altaf	Black, Peter	
Millar, Darren	Davies, Alun	
	Griffiths, John	
	Jones, Elin	
	Neagle, Lynne	
	Price, Gwyn R.	
	Rees, David	
	Whittle, Lindsay	

*Gwrthodwyd gwelliant 36.
Amendment 36 not agreed.*

[255] **David Rees:** Darren, would you like to move amendment 37?

*Cynigiwyd gwelliant 37 (Darren Millar).
Amendment 37 (Darren Millar) moved.*

[256] **Darren Millar:** I move.

[257] **David Rees:** The question is that amendment 37 be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I will take a vote by a show of hands. The question is that amendment 37 be agreed. Can those in favour please raise your hands? Thank you. Can those against please raise your hands? Thank you. In relation to amendment 37, there voted in favour two, against eight. Therefore, amendment 37 is not agreed.

*Gwelliant 37: O blaid 2, Yn erbyn 8, Ymatal 0.
Amendment 37: For 2, Against 8, Abstain 0.*

O blaid:	Yn erbyn:	Ymatal:
For:	Against:	Abstain:
Hussain, Altaf	Black, Peter	
Millar, Darren	Davies, Alun	
	Griffiths, John	
	Jones, Elin	
	Neagle, Lynne	

Price, Gwyn R.
Rees, David
Whittle, Lindsay

Gwrthodwyd gwelliant 37.
Amendment 37 not agreed.

Cynigiwyd gwelliant 32 (Mark Drakeford).
Amendment 32 (Mark Drakeford) moved.

[258] **David Rees:** Before we move to a vote on amendment 32, Members should be aware that if amendment 32 is agreed, amendments 17 and 18 will fall. The question is that amendment 32 be agreed. Does any Member object? [*Objection.*] I have an objection. Therefore, I'll take a vote by a show of hands. Can those in favour of amendment 32 please raise your hands? Can those against amendment 32 please raise your hands? Any abstentions, please raise your hands. Thank you. In relation to amendment 32, there voted five in favour, four against, and one abstention. Therefore, amendment 32 is agreed.

Gwelliant 32: O blaid 5, Yn erbyn 4, Ymatal 1.
Amendment 32: For 5, Against 4, Abstain 1.

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter

Derbyniwyd gwelliant 32.
Amendment 32 agreed.

[259] **David Rees:** As amendment 32 was agreed, amendments 17 and 18 have fallen.

Methodd gwelliannau 17 a 18.
Amendments 17 and 18 fell.

Grŵp 2: Cychwyn (Gwelliannau 19, 33 a 34)
Group 2: Commencement (Amendments 19, 33 and 34)

[260] **David Rees:** We now move on to group 2. The second grouping of amendments to consider is in relation to commencement. The lead amendment in the group is amendment 19, and I call on Darren Millar to move amendment 19 and to speak to the amendments in this group. Darren.

[261] **Darren Millar:** I move—in fact, I don't move amendment 19. Having considered the Minister's amendments in this group—amendments 33 and 34—I'm satisfied that they would achieve the aims of my amendment 19 and that they deal appropriately with commencement issues.

[262] **David Rees:** Thank you, Darren. In that case, the Minister's amendment becomes the lead amendment in this group.

Cynigiwyd gwelliant 33 (Mark Drakeford).
Amendment 33 (Mark Drakeford) moved.

[263] **David Rees:** I move amendment 33 on behalf of the Minister and ask the Minister to speak to the amendments in this group. Minister.

[264] **Mark Drakeford:** Thank you, Chair. I'm very grateful to Darren Millar for his recognition that amendments 33 and 34 are, in impact, identical to his amendment 19. Amendment 33 clarifies the Bill. It comes into force, apart from section 2, when it receives Royal Assent. Section 2 will be brought into force by commencement Order, and amendment 34 means that different parts of section 2 can be commenced at different times and for different purposes. Both of these amendments aim to satisfy both this committee's and the Constitutional and Legislative Affairs Committee's recommendation that the commencement section in the Bill, as introduced, be amended to allow time for guidance to be developed and issued, and for recruitment and retention issues to be addressed. I believe that my amendments meet those requirements and I ask Members to support them.

[265] **David Rees:** Thank you, Minister. Does any other Member wish to speak on this group? No. Then I call on the Member in charge, Kirsty Williams, to speak to this group of amendments.

[266] **Kirsty Williams:** Just briefly, Chair, to say that I support the Government amendments with regard to commencement. It is important that

the guidance is available at the appropriate time and, therefore, commencement should happen when that guidance is there. Therefore, I support it.

[267] **David Rees:** Thank you, Kirsty. Therefore, I call on the Minister to reply to the debate.

[268] **Mark Drakeford:** I have nothing further to say.

[269] **David Rees:** Thank you very much. Darren, given that you've indicated that you do not wish to move amendment 19. Does any other Member wish to move amendment 19? No.

*Ni chynigiwyd gwelliant 19 (Darren Millar).
Amendment 19 (Darren Millar) not moved.*

[270] **David Rees:** Then we move on to amendment 33. The question is that amendment 33 be agreed to. Does any Member object? No objections. Therefore, amendment 33 is agreed.

*Derbyniwyd gwelliant 33 yn unol â Rheol Sefydlog 17.34.
Amendment 33 agreed in accordance with Standing Order 17.34.*

*Cynigiwyd gwelliant 34 (Mark Drakeford).
Amendment 34 (Mark Drakeford) moved.*

[271] **David Rees:** I move amendment 34 on behalf of the Minister. The question is that amendment 34 be agreed. Does any Member object? No objections. Therefore, amendment 34 is agreed.

*Derbyniwyd gwelliant 34 yn unol â Rheol Sefydlog 17.34.
Amendment 34 agreed in accordance with Standing Order 17.34.*

Grŵp 3: Enw Byr ac Enw Hir y Bil (Gwelliannau 35, 38, 39)
Group 3: Short and Long Titles of the Bill (Amendments 35, 38, 39)

[272] **David Rees:** The third group of amendments is in relation to the short and long titles of the Bill. The lead amendment in the group is amendment 35.

Cynigiwyd gwelliant 35 (Mark Drakeford).

Amendment 35 (Mark Drakeford) moved.

[273] **David Rees:** I formally move amendment 35 in the name of the Minister and I call on the Minister to speak to the amendments in this group.

[274] **Mark Drakeford:** These amendments simply give effect, in both the short and long titles of the Bill, to the arguments that I've made earlier in relation to the use of the word 'safe' in a legal context. I won't repeat all those arguments again because Members are very familiar with them by now. I move these amendments on the basis of the arguments with which you are now familiar.

[275] **David Rees:** Thank you, Minister. Are there any other Members who wish to speak to this group? No. Then I call on the Member in charge, Kirsty Williams, to speak to this group of amendments.

[276] **Kirsty Williams:** As the committee will anticipate, I'm disappointed with the Government amendments to remove the word 'safe' from the long and short title. As the Minister says, those arguments have been well rehearsed here this morning and I believe it's a missed opportunity. I believe that the effect of the Bill will be to deliver safe staffing levels and it is a shame that that cannot be reflected in the long and short titles.

[277] **David Rees:** Thank you, Kirsty. Minister, do you wish to reply to the debate?

[278] **Mark Drakeford:** Just to agree with the Member in charge that the impact of the Bill and the effect of the Bill are not affected by the use of a single word. We differ on whether it should be included or not, but we are of the same mind in relation to the impact that the Bill will have.

[279] **David Rees:** Okay, thank you, Minister. I move now to a vote on amendment 35. The question is that amendment 35 be agreed to. Does any Member object? [*Objection.*] I have an objection. Therefore, I'll take a vote by a show of hands. Can those in favour of amendment 35 please raise your hands? Can those against please raise your hands? Thank you. Are there any abstentions? Thank you.

*Gwelliant 35: O blaid 5, Yn erbyn 4, Ymatal 1.
Amendment 35: For 5, Against 4, Abstain 1.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Davies, Alun
Griffiths, John
Neagle, Lynne
Price, Gwyn R.
Rees, David

Hussain, Altaf
Jones, Elin
Millar, Darren
Whittle, Lindsay

Black, Peter

*Derbyniwyd gwelliant 35.
Amendment 35 agreed.*

[280] **David Rees:** In accordance with the marshalled list, we'll return to vote on the remaining amendments in this group later in the proceedings.

**Grŵp 4: Diben y Bil (Gwelliant 27)
Group 4: Purpose of the Bill (Amendment 27)**

[281] **David Rees:** We now move on to group 4. The fourth grouping of amendments to consider is in relation to the purpose of the Bill. The lead and only amendment in this group is amendment 27.

*Cynigiwyd gwelliant 27 (Mark Drakeford).
Amendment 27 (Mark Drakeford) moved.*

[282] **David Rees:** I formally move amendment 27 in the name of the Minister and I call on the Minister to speak to the amendment in this group.

[283] **Mark Drakeford:** Thank you, Chair. Section 1 of the Bill, as originally introduced, was essentially descriptive in nature. However, it contains a series of phrases—improved working conditions, strengthening accountability, equality, safety and efficiency of workforce and planning and management—all of which are open to interpretation and challenge. As the section does not contain any substantive provisions, I believe that its continued inclusion opens up a plethora of opportunities for lawyers rather than for nurses. I believe that its potential ambiguities are best addressed by elimination and that, through elimination, no harm at all is done to the impact that the Bill will achieve. Furthermore, this is a short Bill. The aim of a 'purpose' section is generally to provide an overview of the Bill and is commonly used in a longer and more complex Bills. An overview, I think, is unnecessary in a Bill of this length and I ask Members to agree to my

amendment 27, which would simply remove section 1 from the Bill as introduced.

[284] **David Rees:** Thank you, Minister. Are there any other Members who wish to speak to this amendment? No. Then I call on the Member in charge, Kirsty Williams, to speak to this amendment in this group.

[285] **Kirsty Williams:** Chair, I'm disappointed by the Minister's amendment 27 because, as he states, it would remove the purpose clause of this Bill. Not for the first time, I think this is a missed opportunity, because the purpose clause used language that would be readily understood within the healthcare sector and with the general public, and set out a clear message as to the Bill's intentions. However, regardless of whether it is stated or not in the Bill, the essential purpose of this legislation remains the same: to provide nurses with the time to provide compassionate care. That remains the purpose of the Bill and, I believe, will be the effect of the Bill regardless of whether the purpose of the Bill remains or is amended, as suggested by the Government.

[286] **David Rees:** Thank you. Minister, do you wish to reply to the debate?

[287] **Mark Drakeford:** Chair, can I thank the Member in charge—this is the last time I will speak this morning—for all the efforts that she has made throughout the discussions that we've had to engage with the Government's essential argument, which has been to find ways in which we can successfully retain and, I think, strengthen the key purpose of the Bill, while eliminating some aspects of it—and I understand why she would be disappointed at the loss of section 1, if it is lost—that don't add to that key purpose and run some dangers of distracting attention from it. I continue to ask Members to agree to my amendment 27.

[288] **David Rees:** Thank you, Minister. We therefore move to a vote on amendment 27. The question is that amendment 27 be agreed. Does any Member object? [*Objection.*] I have an objection, therefore I will take a vote by a show of hands. Can all those in favour of amendment 27 please raise your hands? Thank you. Can those against please raise your hands? Thank you. Any abstentions? Thank you. Therefore, in relation to amendment 27, there voted five in favour, four against and there was one abstention. The amendment is therefore agreed.

*Gwelliant 27: O blaid 5, Yn erbyn 4, Ymatal 1.
Amendment 27: For 5, Against 4, Abstain 1.*

O blaid:
For:

Yn erbyn:
Against:

Ymatal:
Abstain:

Alun Davies
John Griffiths
Lynne Neagle
Gwyn R. Price
David Rees

Altaf Hussain
Elin Jones
Darren Millar
Lindsay Whittle

Peter Black

*Derbyniwyd gwelliant 27.
Amendment 27 agreed.*

*Cynigiwyd gwelliant 38 (Mark Drakeford).
Amendment 38 (Mark Drakeford) moved.*

[289] **David Rees:** Before we move on to a vote on amendment 38, Members will wish to be aware that if amendment 38 is agreed, amendment 39 will fall. The question is that amendment 38 be agreed to. Does any Member object? There are no objections, therefore amendment 38 is agreed. As amendment 38 was agreed, amendment 39 has fallen.

*Derbyniwyd gwelliant 38 yn unol â Rheol Sefydlog 17.34.
Amendment 38 agreed in accordance with Standing Order 17.34.*

*Methodd gwelliant 39.
Amendment 39 fell.*

[290] **David Rees:** All sections of the Bill have now been deemed agreed by the committee.

*Barnwyd y cytunwyd ar bob adran o'r Bil.
All sections of the Bill deemed agreed.*

[291] **David Rees:** As Stage 2 has been completed today, Stage 3 begins tomorrow. Members will be notified of the tabling deadlines in due course. Before we finish, Members will wish to be aware that the Member in charge will bring forward a revised explanatory memorandum ahead of Stage 3 proceedings, in accordance with Standing Order 26.27. Therefore, can I thank everybody this morning? I also add my wishes to the Member in charge, who has, I think, demonstrated a strong passion for the Bill

throughout our stages of proceedings. I am sure that that passion will be continued in the further stages of the Bill's progress. Thank you very much.

11:28

**Cynnig o dan Reol Sefydlog 17.42(vi) i Benderfynu Gwahardd y
Cyhoedd o Weddill y Cyfarfod
Motion under Standing Order 17.42(vi) to Resolve to Exclude the Public
from the Remainder of the Meeting**

Cynnig:

Motion:

*bod y pwyllgor yn penderfynu that the committee resolves to
gwahardd y cyhoedd o weddill y exclude the public from the
cyfarfod yn unol â Rheol Sefydlog remainder of the meeting in
17.42(vi).*

*accordance with Standing Order
17.42(vi).*

Cynigiwyd y cynnig.

Motion moved.

[292] **David Rees:** I would like to propose that we have a short break and reconvene in five minutes while we undertake some changes for the next part of our meeting.

Derbyniwyd y cynnig.

Motion agreed.

Daeth rhan gyhoeddus y cyfarfod i ben am 11:28.

The public part of the meeting ended at 11:28.