

# **Committee for Health End of Session Report**

## **February 2024 – August 2025**

### **Powers and Membership**

#### **Powers**

1. The Committee for Health is a statutory departmental committee established in accordance with paragraphs 8 and 9 of Strand One of the Belfast Agreement and under Assembly Standing Order No. 48. The Committee has a scrutiny, policy development and consultation role with respect to the Department of Health and has a role in the initiation of legislation.
2. The Committee has power to:
  - Consider and advise on departmental budgets and Annual Plans in the context of the overall budget allocation;
  - Approve relevant secondary legislation and take the Committee Stage of relevant primary legislation;
  - Call for persons and papers;
  - Initiate inquiries and make reports; and
  - Consider and advise on matters brought to the Committee by the Health Minister.

#### **Membership**

3. The Committee has 9 members, including Chairperson and Deputy Chairperson, and a quorum of five members. The membership of the Committee is:
  - Philip McGuigan MLA (Chairperson)\*
  - Danny Donnelly MLA (Deputy Chairperson)
  - Alan Chambers MLA
  - Linda Dillon MLA
  - Diane Dodds MLA
  - Órlaithí Flynn MLA
  - Nuala McAllister MLA
  - Colin McGrath MLA
  - Alan Robinson MLA

\*Philip McGuigan replaced Liz Kimmins as Chairperson on 03 February 2025.

## Committee meetings

Between February 2024 and September 2025 the Committee for Health held 52 meetings consisting of 235 individual sessions. 228 sessions (97%) were held in public with 7 in closed (3%). The Committee heard from 65 individual organisations.

Closed sessions were held to hear from those with lived experience for the Inquiry. Other closed sessions were held to discuss the Committee's priorities, to consider the Review of Children's Social Care Services and to consider the Minister of Health's First Day Brief and Budget scrutiny.

There were 2 concurrent meetings – with Justice Committee (07 November 2024) and with Education Committee (19 February 2025).

The Committee held 4 external meetings at NICVA (an informal Strategic Planning meeting), Newry and Mourne District Council, Northern Ireland Fire and Rescue Service Learning and Development Centre and at the 2024 NICON conference.



Pictured: Colin McGrath MLA with Chief Fire and Rescue Officer Aidan Jennings at the NIFRS Learning and Development Centre, Cookstown

The Committee for Health took part in 19 visits over the 2024-25 session. A number of these visits were for the Access to Palliative Care Services inquiry to the following sites:

- Northern Ireland Hospice
- Northern Ireland Children's Hospice
- Marie Curie headquarters
- South Eastern Hospice
- Southern Hospice
- Foyle Hospice
- St Francis Hospice, Dublin

Other Committee visits:

- Northern Ireland Fire and Rescue Learning and Development Centre
- Northern Ireland Ambulance Headquarters
- Belfast Maternity Hospital
- Middletown Centre for Autism
- Common Youth
- Ulster Hospital
- Daisy Hill Hospital – Elective Care Hub and Ambulatory Department
- Southern Trust – Hospital at home
- Oireachtas – meeting with Health Committee
- New Children's Hospital – Dublin
- Maternity Hospital – Belfast Trust
- Mental Health In-patient Unit – Belfast Trust



Pictured: Philip McGuigan MLA and Colin McGrath MLA with staff at Ulster Hospital

### **Informal meetings**

The Committee held a number of additional informal meetings over this period, this included 8 briefings from the Department of Health in relation to its workstreams. It also met with 12 organisations informally, including the Trusts, Arms Length Bodies, Unions and representative bodies.

The Committee also met with a number of individuals and families with lived experience of the Health system. This included on issues such as Palliative Care, Respite Care, Mesh Implants, Infected blood victims, SAIs, Cervical Screening, Neurology Inquiry, Social Care and young people in care.

### **Committee Clinics**

The Committee for Health hold a number of Committee Clinics throughout the year. These Clinics are an opportunity for organisations to present to Committee Members in an informal setting. Any decision or action agreed at this informal meeting is then ratified at the next formal Committee meeting.

Over the period covered by the report the Committee held four Committee Clinics where it heard from a total of 21 individual organisations:

- Haemophilia NI
- Safe Families
- Patient Client Council
- NIC-ICTU
- Children's Health Coalition
- ADD NI
- NICMA
- Menopause Together
- Versus Arthritis
- NI Obesity Coalition
- Ark
- Calebs Cause NI
- Hourglass
- Alzheimer's Society
- Mental Health Policy Alliance
- Community Transport
- British Heart Foundation
- NIADA
- Auditory Verbal
- Cubbie
- Alliance for Choice

The Committee took forward a number of actions in follow-up to briefings from these organisations.

## **PRIMARY LEGISLATION**

### **Hospital Parking Charges Bill**

While the Hospital Parking Charges Bill went through the accelerated passage process, the Committee continues to scrutinise progress in relation to the implementation of the Bill. The Committee receives regular bi-monthly updates on progress of implementation of the Automatic Number Plate Recognition technology at hospital sites.

### **Adult Protection Bill**

The Adult Protection Bill was introduced at the end of the 2024-25 session and is currently in Committee Stage of consideration.

## **Legislative Consent Motions**

**Tobacco and Vapes Bill** – The Committee considered this Bill on two occasions. The first occasion was in April 2024. The Committee took evidence on this issue from the Department, the Public Health Agency and the Institute of Public Health. The Committee also met with the Youth Assembly to hear the views of young people on this Bill. However, the Bill fell in Westminster due to the calling of the General Election in July 2024. The Committee outlined it was content with the provisions in the Bill.

The Committee considered this LCM again in January 2025 when it was re-introduced in Westminster and the Health Minister sought approval for NI to be included in the provisions of this Bill. The Committee reconfirmed that it was content with the Bill applying to Northern Ireland.

**Rare Cancers Bill** – The Committee considered this LCM in June 2025. The Bill sought to introduce measures that would encourage more research into rare cancers. The Committee took evidence from the Department and agreed to support the LCM.

**Mental Health Bill** – The Committee considered this LCM in June 2025. The Bill sought to designate private providers delivering publicly funded mental health services as “public authorities” under Section 6(3)(b) of the Human Rights Act when delivering services. The Committee took evidence from the Department on this and agreed to support the LCM.

## **SUBORDINATE LEGISLATION**

The Committee considered 32 statutory rules during the period of this report. These included, but not limited to, regulations regarding:

- Health and Social Care Pension Schemes
- Misuse of Drugs Amendment orders
- Recovery of Health Service Charges
- Period Products Regulations
- Draft Human Medicines Manufacture and Point of Care
- Optical Charges and Payments

## **BUDGET SCRUTINY**

Over the 2024-25, the Committee were briefed on a number of occasions in relation to the Department’s Budget, including detailed briefings on the Department’s monitoring round bids and the savings the Department was achieving.

The Committee considered the Department’s capital spend in detail, including new build projects such as the Maternity Hospital and the new Children’s Hospital at the Royal site.

## **POLICY SCRUTINY**

Over the 2024-25 session the Committee has received regular briefings on over 20 different policy areas. Outlined below are some of the key priorities from the 2024/25 session.

### **Access to Palliative Care**

A large part of the Committee focus in the 2024-25 session was its Inquiry into Access to Palliative Care. The Inquiry was launched in October 2024 and the call for evidence received almost 350 responses from organisations, health professionals and patients and families.

In order to inform the Inquiry the Committee took oral evidence from a number of organisations and healthcare professionals. The Committee also visited the 5 hospices based in Northern Ireland and St Francis Hospice in Dublin. The Committee also held an event to hear from the families of patients of palliative care regarding the challenges they faced in accessing palliative care.



Pictured: Committee Members welcomed by staff at Northern Ireland Children's Hospice

The Committee will publish its report and recommendations in early October and this will be a priority for the Committee in the coming period.





Pictured: Committee Members and family representatives at the Lived Experience event

## **Accountability and Best Practice**

Accountability has been of particular importance to the Committee over the past 18 months. The Committee has heard first-hand from patients and families on the difficulties there have been in receiving answers when things go wrong in the health system. The Committee has closely scrutinized the Department's and the Trusts' work in relation to accountability. This includes in relation to Severe Adverse Incidents, the implementation of the recommendations of the various Inquiries, the Duty of Candour, the being Open Framework and issues in the Belfast Trust.

The Committee has taken evidence on the cervical screening issue and has met with patients and families affected by failures in the system. The Committee has been briefed on a number of occasions on progress there is to resolve the issue and in ensuring that there is accountability for the failures in the system.

The Committee has also looked at the various issues there have been in relation to capital builds and expenditure in the Department/Trusts. This includes issues in relation to the Maternity Hospital and the Mental Health Inpatient Unit. The Committee is keen to ensure that lessons have been learned from previous capital builds and implemented in the build for the new Children's Hospital. The Committee will continue to receive regular updates on these issues.

## **Respite Services**

The Committee welcomed the additional funding provided by the Minister for respite services after the "I am not OK" Spotlight Programme. The Committee

has met with the families involved in the programme and is receiving regular updates from the Department on the work being undertaken to increase the availability of respite care, especially for those with complex needs. This will remain a priority for the Committee.



Pictured: Committee Members and family representatives at Respite Services event

## **Waiting Lists**

The Committee have received regular oral briefings on waiting lists. The Committee welcomes that waiting lists were a priority in the Programme for Government and there was additional money announced to reduce waiting lists. The Committee has been scrutinizing how that money has been spent and the impact that interventions have on the waiting lists.

## **Review of Children's Social Care Services**

The Committee took particular interest in the implementation of the recommendations of the Report of Professor Ray Jones Independent Review of Children's Social Care Services. The Committee took evidence from Professor Jones and met with a number of stakeholders, including young people in care. The Committee also received regular 3 monthly briefings on the implementation of the recommendations. The Committee also had a Committee Motion calling on the Minister to fully implement the recommendations of the Report.





Pictured: Committee Members with Professor Ray Jones

### **KEY PRIORITIES FOR NEXT SESSION**

The Committee's identified key priorities for the next session include:

- **Committee Stage of the Adult Protection Bill** – Committee Stage of the Bill commenced on 1 July 2025.
- **Other Bills that will be introduced over the next session** – up to 5 additional Bills from the Department and 3 Private Members Bills.
- **Consideration of waiting lists** – linked to scrutiny of additional funding and a priority in the Programme for Government.
- **Respite Care** – The Committee will continue its scrutiny work in relation to the implementation of the additional resourcing announced by the Minister.
- **Palliative Care** – the Committee's Inquiry Report will be published and the Committee will monitor in relation to the implementation of recommendations.
- **Focus on “shift left”** – this is a priority for the Minister and the Committee will undertake work in relation to what this looks like and will include engagement with GPs, Dentist, Pharmacy etc.

## ANNEX A

### Committee for Health

#### Expenditure for the period 3 February 2024 – 31 August 2025

Budget area	Details	Expenditure
Committee Travel - committee members and staff travel and subsistence in relation to visits and meetings outside Parliament Buildings	Includes the cost of committee visits to: <ul style="list-style-type: none"><li>Visit to Dublin Children's Hospital</li><li>Visit to St Francis Hospice, Dublin</li><li>3 external committee meetings</li></ul>	£905.14
Printing of committee reports	Includes the cost of committee reports on: <ul style="list-style-type: none"><li>Inquiry into [name of inquiry]</li><li>[ name of ] Bill</li></ul>	nil
Advertising – the cost of public notices relating to committee inquiries, the committee stage of Bills and meetings held outside Parliament Buildings	Includes the cost of public notices in relation to: <ul style="list-style-type: none"><li>Access to Palliative Care Services inquiry</li></ul>	£702.32
Specialist Advice - the cost of specialist advisers appointed by the committee and commissioned research, also the cost of drafting Standing Orders	Specialist adviser to the Committee on [issue/inquiry to which the advice related]	nil
Refreshments & Hospitality	Includes the cost of all refreshments and hospitality provided by the committee; to include meetings, working lunches, seminars and any other such expenditure.	£4540.41
General expenses	Includes the cost of seminars (excluding refreshments and hospitality); room hire; witness expenses; gifts provided by the committee during visits; and conference fees for members.	£6495.42
<b>Total Expenditure</b>		<b>£12643.29</b>

#### Notes:

1. It is not necessary to break down costs for individual visits, reports etc. These should be described under "details", with only totals included in the "expenditure" column.
2. It is not necessary to include budget areas on which there has been no expenditure.











