Groupings of Amendments for Stage 3

This document provides procedural information which will assist in preparing for and following proceedings on the above Bill. The information provided is as follows:

- the list of groupings (that is, the order in which amendments will be debated).
- the text of amendments to be debated at Stage 3, set out in the order in which they will be debated. **THIS LIST DOES NOT REPLACE THE MARSHALLED LIST, WHICH SETS OUT THE AMENDMENTS IN THE ORDER IN WHICH THEY WILL BE DISPOSED OF.**

Groupings of amendments

**Group 1: Charter of patient rights and responsibilities**
1, 1A, 2, 3, 5, 6, 9, 10, 11, 25, 32

**Group 2: Patient feedback, comments, concerns or complaints**
4, 16, 17, 18, 19, 20, 21, 22, 26

Debate to end no later than 20 minutes after proceedings begin

**Group 3: Treatment time guarantee: relationship with existing duties**
12

**Group 4: Treatment time guarantee: suspension**
13, 14, 15, 33

**Group 5: Patient advice and support service**
23, 24, 27, 28, 29

**Group 6: Protections and Limitations**
30

Debate to end no later than 40 minutes after proceedings begin

**Group 7: Payments to or in respect of certain persons infected with Hepatitis C**
31, 34, 35

**Group 8: Health care principles**
7, 8

Debate to end no later than 1 hour and 5 minutes after proceedings begin
Amendments in debating order

Group 1: Charter of patient rights and responsibilities

Dr Richard Simpson

I Leave out section Z1 and insert—

<Charter of Patient Rights and Responsibilities

(1) The Scottish Ministers must, within 6 months of the coming into force of this section, publish a document to be known as the Charter of Patient Rights and Responsibilities (“the Charter”).

(2) The Charter must set out a summary of the rights and responsibilities (as existing at the date of publication) of patients and relevant persons.

(3) The Charter may also include—
   (a) a summary of the duties of relevant NHS bodies,
   (b) a summary of the behaviour expected from patients and relevant persons,
   (c) such other information as the Scottish Ministers consider relevant in relation to health care or the health service (for example, information relating to targets for the periods of time within which patients are to be treated).

(4) Nothing in the Charter is to—
   (a) give rise to any new rights,
   (b) impose any new responsibilities, or
   (c) alter (in any way) an existing right or responsibility.

(5) For the purposes of this section and section (Review and revision of Charter), a “relevant person” is—
   (a) a person who has a personal interest in the health care of a patient (for example a member of the patient’s family or a carer),
   (b) such other categories of person as the Scottish Ministers consider appropriate.

(6) The Charter is to be published in such form and manner as the Scottish Ministers consider appropriate.

(7) Before publishing the Charter under subsection (1), the Scottish Ministers must—
   (a) consult such persons as they consider appropriate,
   (b) lay a copy of the Charter before Parliament.

(8) The Scottish Ministers must, as soon as reasonably practicable after publication of the Charter under subsection (1), notify each relevant NHS body of the publication of the Charter.

(9) Each relevant NHS body must make available without charge copies of the Charter to patients, staff and members of the public.

(10) In carrying out the duty under subsection (9), a relevant NHS body must take account of the particular needs of the persons to whom the Charter is to be made available as to the form of the Charter (for example by making it available in different languages or in Braille).>
Irene Oldfather

1A As an amendment to amendment 1, line 36, after <Braille> insert <or by having regard to the particular needs of adults with incapacity within the meaning of section 1(6) of the Adults with Incapacity (Scotland) Act 2000 (asp 4)>

Dr Richard Simpson

2 After section Z1, insert—

<Review and revision of Charter>

(1) The Scottish Ministers must carry out a review of the Charter at least once in any period of 5 years.

(2) The purposes of a review under subsection (1) are—

(a) to ensure that the Charter continues to accurately summarise the rights and responsibilities of patients and relevant persons (as existing at the date of review), and

(b) to assess how effective the Charter is in raising awareness of the rights and responsibilities of patients and relevant persons.

(3) When reviewing the Charter under subsection (1), the Scottish Ministers must also review how effective the arrangements for the publication and distribution of the Charter have been in promoting awareness of the Charter and, if they consider it appropriate, take such steps as they consider necessary to improve those arrangements.

(4) In carrying out a review under subsections (1) and (3) the Scottish Ministers must consult such persons as they consider appropriate.

(5) The first review under subsection (1) must be completed not later than 5 years from the date on which the Charter is published under section (Charter of Patient Rights and Responsibilities)(1).

(6) The Scottish Ministers must revise the Charter where, following a review under subsection (1), the Scottish Ministers consider that the Charter—

(a) does not accurately summarise the rights and responsibilities of patients and relevant persons, or

(b) is not sufficiently effective in raising awareness of the rights and responsibilities of patients and relevant persons.

(7) The Scottish Ministers may revise the Charter at any other time if they consider it appropriate to do so (whether following a review under subsection (1) or otherwise).

(8) Where the Scottish Ministers revise the Charter under subsection (6) or (7), they must—

(a) publish it as so revised (in such form and manner as they consider appropriate),

(b) notify each relevant NHS body of the publication of the Charter as so revised.

(9) Before publishing the Charter under subsection (8)(a), the Scottish Ministers must—

(a) consult such persons as they consider appropriate, and

(b) lay a copy of the Charter before Parliament.

(10) In this Act, a reference to the Charter is a reference to the Charter as it may be revised from time to time.>
Dr Richard Simpson

3 In section 1, page 2, leave out lines 12 and 13

Dr Richard Simpson

5 In section 3, page 2, line 29, leave out <and the charter>

Dr Richard Simpson

6 In section 3, page 2, line 32, leave out <and the charter>

Dr Richard Simpson

9 In section 5, page 3, line 6, leave out <and the charter>

Dr Richard Simpson

10 In section 5, page 3, line 7, leave out <and the charter>

Dr Richard Simpson

11 In section 5, page 3, line 10, leave out <and the charter>

Dr Richard Simpson

25 In section 15, page 7, line 31, after <patients> insert <(and in particular, promote awareness of the Charter)>

Dr Richard Simpson

32 In section 19, page 9, line 15, at end insert—

<“the Charter” means the Charter of Patient Rights and Responsibilities published under section (Charter of Patient Rights and Responsibilities);>

Group 2: Patient feedback, comments, concerns or complaints

Dr Richard Simpson

4 In section 1, page 2, line 14, leave out <raises> and insert <raise>

Dr Richard Simpson

16 In section 12, page 5, line 26, leave out <provide feedback, comments, concerns or complaints> and insert <give feedback or comments, or raise concerns or complaints.>

Dr Richard Simpson

17 In section 12, page 5, line 28, leave out <raise such concerns with or give such feedback to> and insert <give such feedback or comments to, or raise such concerns or complaints with>

Dr Richard Simpson

18 In section 12, page 5, leave out line 30 and insert—

<( ) a provider of the patient advice and support service.>
Dr Richard Simpson
19 In section 12, page 5, line 31, leave out subsection (3) and insert—

<(3) Where feedback or a comment is given to, or a concern or a complaint is raised with, a provider of the patient advice and support service, the provider may pass the feedback, comment, concern or complaint to the relevant NHS body (but only with the consent of the patient).>

Dr Richard Simpson
20 In section 11, page 6, line 7, leave out from <feedback> to end of line 8 and insert <feedback or comments given, or concerns or complaints raised, in relation to health care—>

Dr Richard Simpson
21 In section 11, page 6, line 12, leave out <identifying> and insert <using feedback, comments, concerns or complaints to identify>

Dr Richard Simpson
22 In section 11, page 6, line 14, leave out <made and handled> and insert <raised, and (ii) how feedback, comments, concerns or complaints will be handled,>

Dr Richard Simpson
26 In section 15, page 7, line 32, leave out <make a complaint, raise concerns or give feedback> and insert <give feedback or comments, or raise concerns or complaints>

Group 3: Treatment time guarantee: relationship with existing duties
Nicola Sturgeon
12 In section 6, page 3, line 30, at end insert—

<( ) The treatment time guarantee is in addition to, and does not affect, any duty of a Health Board to—

(a) comply with any orders, regulations or directions made by the Scottish Ministers (whether under the 1978 Act or otherwise) which relate to targets for periods of time within which treatments or services are to be provided, or

(b) have regard to any guidance issued by the Scottish Ministers which relates to such targets.>

Group 4: Treatment time guarantee: suspension
Nicola Sturgeon
13 In section 9, page 5, line 8, leave out subsection (3)

Nicola Sturgeon
14 After section 9, insert—
<Treatment time guarantee: suspension

(1) This section applies where the Scottish Ministers consider that exceptional circumstances exist.

(2) The Scottish Ministers may direct that the treatment time guarantee be suspended for such period as they consider necessary.

(3) But such period of suspension must not exceed 30 days.

(4) The Scottish Ministers may by order—
   (a) extend the duration of a period of suspension under subsection (2) beyond the 30 day limit in subsection (3) for such further period as they consider necessary,
   (b) suspend the treatment time guarantee for such period in excess of 30 days as they consider necessary.

(5) An order made under subsection (4) (other than one to which subsection (7) applies)—
   (a) must be laid before the Scottish Parliament, and
   (b) ceases to have effect at the expiry of the period of 28 days beginning with the date on which it was made unless, before the expiry of that period, the order has been approved by resolution of the Parliament.

(6) Subsection (7) applies to an order made under subsection (4) consisting only of—
   (a) provision revoking an earlier order under subsection (4), or
   (b) such provision and provision made by virtue of section 21(1)(c).

(7) An order to which this subsection applies is subject to annulment in pursuance of a resolution of the Parliament.

(8) In reckoning for the purposes of subsection (5)(b) any period of 28 days, no account is to be taken of any period during which the Scottish Parliament is—
   (a) dissolved, or
   (b) in recess for more than 4 days.

(9) Subsection (5)(b) is without prejudice to—
   (a) anything previously done by reference to—
      (i) a direction under subsection (2),
      (ii) an order under subsection (4), or
   (b) the making of a new order under subsection (4).>
Group 5: Patient advice and support service

Nicola Sturgeon
23 In section 14, page 7, line 12, at end insert <, and

( ) in a manner which co-ordinates with the services of other providers of advice and support.>

Nicola Sturgeon
24 In section 14, page 7, line 16, at end insert—

<( ) Healthcare Improvement Scotland,>

Nicola Sturgeon
27 In section 15, page 7, line 35, at end insert—

<( ) make persons aware of and, where appropriate, direct them to—

(i) other sources of advice and support (including persons who provide advice and support in relation to matters other than the health service),

(ii) persons providing representation and advocacy services,>

Mary Scanlon
Supported by: Nicola Sturgeon
28 In section 15, page 8, line 1, leave out subsection (4)

Nicola Sturgeon
29 In section 15, page 8, line 2, at end insert—

<( ) Nothing in this Act prevents a provider of the patient advice and support service from providing advice and support in relation to matters other than the health service.

( ) But the provision of such other advice and support by such a provider must not prejudice its provision of advice and support services under subsection (1).>

Group 6: Protections and Limitations

Nicola Sturgeon
30 In section 18, page 9, line 4, at end insert—

<( ) In this section, references to this Act include references to orders, regulations and directions made under this Act.>
Group 7: Payments to or in respect of certain persons infected with Hepatitis C

Nicola Sturgeon

31 After section 18A, insert—

<Payments to or in respect of certain persons infected with hepatitis C as a result of NHS treatment etc.: eligibility

Payments to or in respect of certain persons infected with hepatitis C as a result of NHS treatment etc.: eligibility

(1) Section 28 of the Smoking, Health and Social Care (Scotland) Act 2005 (asp 13) (payments to certain persons infected with hepatitis C as a result of NHS treatment etc.) is amended as follows.

(2) In subsection (1)—

(a) in paragraph (a)—

(i) after sub-paragraph (i), insert “and”,

(ii) the word “and” following sub-paragraph (ii) is repealed, and

(iii) sub-paragraph (iii) is repealed,

(b) in paragraph (b)—

(i) after sub-paragraph (i), insert “and”,

(ii) the word “and” following sub-paragraph (ii) is repealed, and

(iii) sub-paragraph (iii) is repealed,

(c) after paragraph (b) insert—

“(c) dependants of persons mentioned in paragraph (a) or (b).”.

(3) After subsection (2), insert—

“(2A) In subsection (1)(c), “dependant”, in relation to a person mentioned in subsection (1)(a) or (b) (the “infected person”), means—

(a) a spouse or civil partner of the infected person;

(b) a person living with the infected person as husband or wife or in a relationship which has the characteristics of the relationship between civil partners (or if the infected person was in hospital immediately before death, had been so living when the infected person was admitted to hospital);

(c) such other persons as the scheme may specify; and the scheme may specify or elaborate the meaning of dependant for this purpose.”.

(4) In subsection (3)—

(a) in paragraph (b), after “dead person” insert “falling within subsection (1)(a) or (b)”, and

(b) in paragraph (e), after “dead person” insert “falling within subsection (1)(a) or (b)”.

(5) In subsection (4)(a), after “(1)” insert “(a) or (b)”.>
Nicola Sturgeon

34 In section 22, page 10, line 25, after <sections> insert <(Payments to or in respect of certain persons infected with hepatitis C as a result of NHS treatment etc.: eligibility),>

Nicola Sturgeon

35 In the long title, page 1, line 1, after <care;> insert <to make further provision about eligibility under the scheme made under section 28 of the Smoking, Health and Social Care (Scotland) Act 2005;>

Group 8: Health care principles

Dr Richard Simpson

7 In the schedule, page 11, line 16, leave out paragraph 9A and insert—
   <No avoidable harm or injury is to be caused to the patient by the health care provided.>

Dr Richard Simpson

8 In the schedule, page 11, line 18, leave out <, clean and safe environment at all times> and insert <environment which is as clean and safe as is reasonably possible>