The current situation

Passage of the Health Bill

This section is accurate at the time of publication.

The Health Bill is continuing its passage through parliament at the time of writing. The committee stage in the Lords began in late October 2026 and is scheduled to run into late November. This timetable is not written in stone; the Lords may choose to extend it, which could delay the passage of the bill.

The government does not have a majority in the House of Lords as it does in the Commons, and there is already livelier and more passionate debate in the Lords, including opposition to several parts of the bill.

The role of CoGs has received some attention, but only in terms of their function as local involvement and accountability mechanisms, usually linked to concerns about the abolition of local Healthwatch (see more below). There has been much less focus on CoGs as an integral element of FT governance. Abolishing CoGs is not the subject of significant cross-party opposition at the time of writing, but opposition may grow and it is possible that CoGs ultimately remain on statute, or that the implementation of the Health Act is delayed. This is one of many reasons why FTs should plan for a likely future without CoGs, but be careful to maintain effective relationships and quoracy.

We have already seen two significant concessions from the government in the face of substantial opposition from across the House of Lords, on:

- abolishing local and national Healthwatch – they will be retained and be strengthened, feeding into the new Department of Health and Social Care (DHSC) Patient Experience directorate
- abolishing the Health Services Safety Investigations Body (HSSIB) as a statutory body and transferring its functions to the Care Quality Commission (CQC) – HSSIB will remain on statute.

These are positive signs that the government is listening and taking a pragmatic approach to enabling parliament to focus on the core provisions in the bill: abolition of NHS England and introduction of the Single Patient Record (SPR).

Other parts of the bill concerning peers and receiving reasonably strong cross-party consensus at the time of writing are:

- the extent of ministerial powers of direction, particularly over ICBs, and lack of transparency around their use

- lack of detail about safeguards on data, privacy and permitted uses of patient data in relation to the SPR.

There is also some support for considering alternatives to the Secretary of State making non-executive director (NED) appointments for trusts, FTs and integrated care boards (ICBs).

The government's timeline to abolish NHSE and transfer its staff and many of its functions to the Department of Health and Social Care (DHSC) by 1 April 2027 was always tight and it is starting to look quite unlikely that this timeline can be met. The NHS Alliance is actively lobbying for safeguards to be added to the bill.