TRA to reconsider findings of steel safeguard transition review

Press release

TRA has initiated a reconsideration of its recommendation to the Secretary of State with regards to the UK transition review of the steel safeguard measure.

The Trade Remedies Authority has today (Tuesday 7 Sept) initiated a reconsideration of its recommendation to the Secretary of State for International Trade with regards to the UK transition review of the steel safeguard measure. This follows eight submissions from UK and overseas industry requesting that the TRA reconsider its recommendation.

Reconsiderations are an established part of the UK's trade remedies regime. This ensures businesses can continue to make their case once a decision that affects them has been made. At the end of the reconsideration process, the TRA will reach a reconsidered decision, either upholding or varying its recommendation, and will notify this to the Secretary of State for International Trade. The TRA anticipates it will take several months to complete the reconsideration review.

The TRA's recommendation on safeguard measures for steel

In June 2021, the TRA recommended extending the UK's steel safeguard measure across 10 product categories for three years and revoking the measure on nine product categories. This recommendation was accepted by the Secretary of State for International Trade, who also provided for a 12-month extension of the current protections for five of the nine product categories originally recommended for revocation.

The reconsideration process

Following the Secretary of State for International Trade's decision, the TRA received submissions from five domestic steel producers and three submissions from importers and UK manufacturers asking the TRA to reconsider the original recommendation. The steel producers argue that the TRA's recommendation should have extended protection to more categories of steel products. The importers and UK manufacturers contend that fewer steel categories should have protections maintained.

The TRA's reconsideration will cover the same remit as the original transition review. It will consider, within the rules set in the UK's safeguard regulatory framework and the underlying World Trade Organisation obligations, whether the TRA recommendation was correct. The TRA will review all relevant material including additional information provided by interested parties.

Background

The Trade Remedies Authority and the UK's trade remedies regime

- The Trade Remedies Authority is the UK body that investigates whether new trade remedy measures are needed to counter unfair import practices and unforeseen surges of imports.
- Safeguard measures address unforeseen surges of imports which injure domestic producers – they are one of the three types of trade remedies measures allowed by the World Trade Organisation (WTO). The other two are anti-dumping measures, which counter 'dumping' (sale below the home market value); and countervailing measures, which address the effects of imports of subsidised goods.
- The UK trade remedies regime is set by the Taxation (Cross-Border Trade) Act 2018 and the Trade Act 2021, which operationalise the World Trade Organisation (WTO) agreements covering trade remedies.

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Record £36 billion investment to reform NHS and Social Care

- Prime Minister pledges to tackle NHS Covid backlogs and cut waiting times with new £36 billion investment for health and social care
- Responsible, fair, and necessary action taken to provide biggest catch-up programme in the history of the NHS and reform the adult social care system

- NHS capacity to increase to 110% of planned activity levels by 2023/24, offering more appointments, treatments, and operations
- Social care reform plan will end catastrophic costs for people across the country, and include extra investment in care sector to improve training and support
- Funded by a new Health and Social Care Levy on working adults and an equivalent rise in the rates of dividend tax to make sure everyone pays their fair share

The Prime Minister today set out responsible, fair, and necessary plans to tackle the Covid backlogs, reform adult social care, and bring the health and social care system closer together on a long term, sustainable footing.

£36 billion will be invested in the health and care system over the next three years, to ensure it has the long term resource it needs.

Patients will benefit from the biggest catch-up programme in the NHS's history, so people no longer face excessive waits for treatment.

Successive governments have failed to provide a long-term solution for social care. The system will finally be reformed, ending unpredictable and catastrophic care costs faced by thousands, and making the system fairer for all.

From April 2022, the government will introduce a new, UK-wide 1.25 per cent Health and Social Care Levy, ringfenced for health and social care. This will be based on National Insurance contributions (NICs) and from 2023 will be legislatively separate.

To ensure everyone contributes fairly, all working adults, including those over the state pension age, will pay the levy and the rates of dividend tax will also increase by 1.25% to help fund this package.

Every individual will contribute according to their means. Those who earn more pay more, with the highest earning 14 per cent of people paying around half the revenues.

Employers, who benefit from a healthy workforce and a tax-payer funded health service, will be asked to contribute so the costs are more widely shared.

This will raise around £12 billion in extra funding per year, to be invested in frontline health and social care across the UK over the next three years.

The pandemic put unprecedented pressure on the NHS. The number of patients waiting for elective surgery and routine treatment in England is now at a record high of 5.5 million. This could reach 13 million by the end of the year if left unchecked. Before the pandemic, nine out of ten were waiting fewer than 25 weeks in England. This has now risen to 44 weeks.

To fix this, the NHS needs to be able to offer more appointments, operations, and treatments. Rather than simply plugging the gaps, new, innovative practices must be pushed forward so patients continue to receive the best possible care.

The new funding is expected to fund an extra 9 million checks, scans, and operations. The NHS long term plan committed to increasing activity year on year. In recognition of pressures from Covid, this will now increase to 110% of the planned activity levels by 2023/24.

This is in addition to our historic settlement for the NHS in 2018, which will see its budget rise by £33.9 billion a year by 2023/24.

This is a significant, long-term increase in public spending, which will directly improve people's lives.

Speaking in the House, Prime Minister, Boris Johnson said:

> You can't fix the Covid backlogs without giving the NHS the money it needs. You can't fix the NHS without fixing social care, you can't fix social care without removing the fear of losing everything to pay for it, and you can't fix health and social care without long-term reform. The plan I am setting out today will fix all of these problems together.

Chancellor of the Exchequer Rishi Sunak said:

> We're tackling the NHS backlog and taking decisive action to fix our broken social care system.
>
> This significant £12bn-a-year long-term increase in public spending will improve people's lives across the UK – but our health and social care systems cannot be rebuilt without difficult decisions.
>
> The new Health and Social Care Levy is the necessary and responsible thing to do to protect the NHS, sharing the cost between businesses and individuals and ensuring those earning more pay more.

Amanda Pritchard, NHS chief executive, said:

> It's absolutely right that NHS staff, who have worked tirelessly throughout the pandemic to care for hundreds of thousands of Covid patients in hospital, get strong backing to recover routine services and begin to tackle the Covid backlog.
>
> The pandemic is still with us and we will have to live with the impact of Covid for some time, so the additional funding confirmed this week will help meet those additional costs, and give the NHS clarity for the coming years while delivering millions more of the vital checks, tests and operations that patients need.

Health and Social Care Secretary, Sajid Javid said:

> Our nurses, doctors and care workers have worked tirelessly throughout the pandemic in our hour of need.
>
> But the pandemic has taken its toll – waiting times are longer than ever before and social care is under even greater pressure.
>
> This additional funding is a critical investment in our country's future – it will give the NHS the extra capacity it needs to get back on its feet and is a vital first step in the reform of our broken care system.

The Prime Minister has been clear that we cannot fix Covid backlogs without fixing the social care system. Taking necessary, responsible, and fair action, the Prime Minister has pledged to end the cruel lottery around social care costs.

Currently, families live with the fear of losing everything they own – including potentially a lifetime's worth of savings.

Around one in seven must pay over £100,000 for care, with bills falling indiscriminately on some of the sickest and most vulnerable.

Thanks to the action announced today, no one in England will now have to pay more than £86,000 in care costs over the course of their lifetime. This is equivalent to around three years in care.

This will apply regardless of where they live, how old they are, what their condition is, or how much they happen to earn.

At the same time, the government will support those without savings – with the state covering all care costs for anyone with assets under £20,000.

Anyone with assets between £20,000 and £100,000 will be expected to contribute to the cost of their care but will also receive state support, which will be means-tested.

The new £100,000 limit is over 4 times higher than the current limit of £23,250, meaning many more people will be eligible for support than under the current system.

The overall system will be made fairer, to ensure those who fund their own care do not pay more than state-funded individuals for the equivalent standard of care.

The social care workforce will receive new training and qualification opportunities, so they have the opportunity to progress and improve, while providing an even better standard of care.

The Prime Minister is also clear we must address wider issues in how and where people are cared for. We will bring the NHS and the social care system in England closer together – so people can be better cared for at the time and place that is right for them. An integration white paper will be published later this year.

While Scotland, Wales and Northern Ireland have their own systems, we will work together with the Devolved Administrations to tackle treatment backlogs and improve care for our elderly.

An ageing population with increasingly complex needs is putting ever more pressure on the social care system.

So alongside providing a path to long-term financial sustainability, additional support for the care system is also needed.

The government will set out a detailed plan later in the autumn to enable Local Authorities and other providers to invest in technology, innovative methods of care and in their workforce.

PM statement to the House of Commons on health and social care: 7 September 2021

Mr Speaker, with permission, I will make a statement on the government's plans for health and social care.

Our National Health Service is the pride of our whole United Kingdom and all the more so, after it has been there for us during the worst pandemic in a century, treating almost half a million patients, administering more than 88 million vaccines and saving countless lives.

But the inevitable consequence of this necessary – and extraordinary – action is that Covid has placed massive pressures on our NHS.

As we stayed at home to protect the NHS, thousands of people did not come forward for the treatment they needed.

Like those who suffer from Covid, these are all people we know.

Your aunt who needs a new hip. Your neighbour who has problems with their heart and needs a pacemaker. Your friends your friends at work who thinks they should get that lump or cough checked out.

So we must now help the NHS to recover, to be able to provide this much needed care to our constituents and the people we love – and we must provide the funding to do so now.

We not only have to pay for the operations and treatments that people decided not to have during the pandemic, we need to pay good wages for the 50,000 nurses who will enable that treatment, and who can help us tackle waiting lists that could otherwise expand to 13 million over the next few years.

We need to now to go beyond the record funding we have already provided – and we need to go further than the 48 hospitals and 50 million more GP appointments that are already in our plan.

So today we are beginning the biggest catch-up programme in NHS history, tackling the Covid backlogs by increasing hospital capacity to 110 per cent, and enabling nine million more appointments, scans and operations.

As a result, while waiting lists will get worse before they get better, the NHS will aim to be treating around 30 per cent more elective patients by 2024/25 than before Covid.

And we will also fix the long-term problems of health and social care of health and social care have been so cruelly have been so cruelly exposed by Covid.

But having spent more than £407 billion or more to support lives and livelihoods throughout the pandemic – from furlough to vaccines – it would be wrong for me to say that we can pay for this recovery without taking the difficult but responsible decisions about how we finance it.

As a permanent additional investment in health and social care – it would be irresponsible to meet the costs from higher borrowing and higher debt.

From next April we will create a new, UK-wide, 1.25 per cent Health and Social Care Levy on earned income, hypothecated in law to health and social care, with dividends rates increasing by the same amount.

This will raise almost £36 billion over the next three years, with money from the levy going directly to health and social care across the whole of our United Kingdom.

This won’t be pay awards for middle management, it will go straight to the front line at a time when we need to get more out of our health and social care system than ever before.

And it will enable radical innovation to improve the speed and quality of care, including better screening equipment to diagnose serious diseases, such as cancer, more quickly, designated surgical facilities so non-urgent patients are no longer competing with A&E, faster GP access to specialists, so you don’t have to wait months to see someone in hospital to find out whether something is wrong, and new digital technology so doctors can monitor patients remotely in their homes.

And we will do all this in a way that is right, and reasonable and fair.

Mr Speaker, some will ask why we don’t increase income tax or capital gains instead.

But income tax isn’t paid by businesses, so the whole burden would fall on individuals, roughly doubling the amount that the basic rate taxpayer could expect to pay.

And the total revenue from capital gains tax amounts to less than £9 billion this year.

Instead our new levy will share the cost between individuals and businesses, and everyone will contribute according to their means, including those above State Pension Age, so those who earn more those who earn more will pay more.

And because we are also increasing dividends tax rates we will be asking better-off business owners and investors to make a fair contribution too.

In fact, the highest earning 14 per cent will pay around half the revenues, no-one earning less than £9,568 will pay a penny, and the majority of small businesses will be protected, with 40 per cent of all businesses paying nothing at all.

And while Scotland, Wales and Northern Ireland have their own systems, we will direct money raised through the levy to their health and social care services.

So in total Scotland – yes – in total Scotland, Wales and Northern Ireland will benefit from an extra £2.2 billion a year Mr Speaker – and as this is about 15 per cent more than they will contribute through the levy, it will create a union dividend worth £300 million. Worth £300 million.

But Mr Speaker, we cannot just put more money in.

We need reform and change. We need to build back better from Covid.

When the Covid storm broke last year there were 30,000 hospital beds in England occupied by people who could have been better cared for elsewhere – and who wanted to be better cared elsewhere.

That is 30,000 Mr Speaker out of 100,000 hospital beds in our NHS, costing billions every night, and unable to be used by people needing cancer care needing hip operations, making it harder than ever to deal with the growing backlog in our NHS.

Too often people were in hospital beds because they or their relatives were worried about the cost of care in a residential home.

And that same fear kept many others at home without any care at all.

This anxiety affects millions of people up and down the country, the fear that a condition like dementia, one of nature’s bolts from the blue could lead to the total liquidation of their assets, their lifetime savings, their home – the loss of everything that they might otherwise pass on to their children, however great or small – while sufferers from other diseases – who have had to be in hospital for the majority of their treatment – have their care paid for in full by the NHS.

Governments have ducked this problem for decades.

Parliament parliament even voted to fix it, and yet that 30,000 figure is an indictment of the failure to do so.

And so Mr Speaker there can be no more dither and delay.

We know we can’t rely solely we know we can’t rely solely on private insurance because demand would be too low for insurers to offer an affordable price.

And a universal system of free care for all would be needlessly expensive, when those who can afford to contribute to their care should do so.

Instead the state should target its help at protecting people against the catastrophic fear of losing everything to pay for the cost of their care, and that is what this government will do.

We are setting a limit on what people can be asked to pay, and we will be working with the financial services industry to innovate and help people to insure themselves against expenditure up to that limit.

Wherever you live, whatever your age, your income or your condition, from October 2023 no-one starting care will pay more than £86,000 over their lifetime, and no-one with assets of less than £20,000 no-one with assets of less than £20,000 will have to make any contribution from their savings or housing wealth – up from £14,000 today.

Meanwhile anyone with assets between £20,000 and £100,000 will be eligible for some means-tested support.

And this new upper capital limit of £100,000 is more than four times the current limit, helping many more people with modest assets.

And as we fix this long-term long-standing problem in social care, we will also address the fears that many have about how their loved ones will be looked after, by investing in the quality of care, in carers themselves, and by integrating health and care in England so older people and disabled people are cared for better, with dignity, and in the right setting.

And my Rt Hon Friend the Secretary of State for Health and Social Care will be bringing forward a White Paper on integration later this year.

Mr Speaker, you can’t fix you can’t fix the Covid backlogs without giving the NHS the money it needs; you can’t fix the NHS without fixing social care; you can’t fix social care without removing the fear of losing everything to pay for social care; and you can’t fix health and social care without long-term reform.

The plan that this Government is setting out today, the plan I am setting out today will fix all of those problems together.

And, of course, and, of course, no Conservative government no Conservative government mr speaker ever wants to raise taxes, and I will be honest with the House, I accept yes I accept this breaks a manifesto commitment, which is not something I do lightly.

But a global pandemic was in no-one's manifesto Mr Speaker. I think the people in this country understand that in their bones and they can see the enormous debts this Government the Treasury has taken.

After all the extraordinary actions that have been taken to protect lives and livelihoods over the last eighteen months, this is the right, the reasonable and fair approach, enabling our amazing NHS to come back strongly from the crisis, tackling the Covid backlogs, funding our nurses, making sure people get the care and treatment they need, in the right place at the right time, and ending a chronic and unfair anxiety for millions of people and their families up and down this country.

And I commend this Statement to the House.

Bovine TB: authorisation for badger control in 2021

Natural England has licensed and authorised 7 new badger control areas to begin operations in 2021. It has also authorised the licence holders to resume operations in 33 existing badger control areas in 2021. Licence holders met all the criteria specified in Defra's guidance to Natural England, dated May 2021.

Natural England has reissued the Annex A for 8 licences due to a change to their control areas as licensed in 2019/2020. These areas were 35-Cornwall, 44-Avon, 47-Herefordshire, 50-Shropshire, 51- Somerset, 52-Warwickshire, 53-Wiltshire and 54-Lincolnshire.

It has also reissued the Annex B for all existing licences from area 22 to area 54 (inclusive). This follows a review of the conditions relating to licensed actions on or around protected sites.

Table 1: Badger control areas authorised in 2021

Area number and county	Minimum number	Maximum number	Authorisation date	Year of operations
Area 22 – Cornwall	0	1087	27 August 2021	Year 4
Area 23 – Devon	910	2229	27 August 2021	Year 4
Area 24 – Devon	0	196	27 August 2021	Year 4
Area 25 – Devon	156	651	27 August 2021	Year 4
Area 26 – Devon	234	748	27 August 2021	Year 4

Area number and county	Minimum number	Maximum number	Authorisation date	Year of operations
Area 27 – Devon	0	115	27 August 2021	Year 4
Area 28 – Devon	30	296	27 August 2021	Year 4
Area 29 – Gloucestershire	0	502	27 August 2021	Year 4
Area 30 – Somerset	0	1311	27 August 2021	Year 4
Area 31 – Staffordshire	773	2893	27 August 2021	Year 4
Area 32 – Cumbria	N/A	N/A	27 August 2021	Year 4
Area 33 – Avon	358	990	27 August 2021	Year 3
Area 34 – Cheshire	1397	2237	27 August 2021	Year 3
Area 35 – Cornwall	1689	3325	27 August 2021	Year 3
Area 36 – Staffordshire	324	871	27 August 2021	Year 3
Area 37 – Devon	380	1173	27 August 2021	Year 3
Area 38 – Devon	571	1715	27 August 2021	Year 3
Area 39 – Dorset	75	508	27 August 2021	Year 3
Area 40 – Herefordshire	295	1267	27 August 2021	Year 3
Area 41 – Staffordshire	20	479	27 August 2021	Year 3
Area 42 – Wiltshire	1420	3950	27 August 2021	Year 3
Area 43 – Wiltshire	252	1193	27 August 2021	Year 3
Area 44 – Avon	2613	4050	27 August 2021	Year 2
Area 45 – Derbyshire	1758	3218	27 August 2021	Year 2
Area 46 – Gloucestershire	556	860	27 August 2021	Year 2
Area 47 – Herefordshire	1246	2198	27 August 2021	Year 2
Area 48 – Leicestershire	544	933	27 August 2021	Year 2
Area 49 – Oxfordshire	833	1412	27 August 2021	Year 2
Area 50 – Shropshire	2703	4649	27 August 2021	Year 2
Area 51 – Somerset	2632	4167	27 August 2021	Year 2
Area 52 – Warwickshire	1450	2442	27 August 2021	Year 2
Area 53 – Wiltshire	689	1054	27 August 2021	Year 2
Area 54 – Lincolnshire	N/A	N/A	27 August 2021	Year 2
Area 55 – Shropshire	490	664	27 August 2021	Year 1
Area 56 – Hampshire	1215	1647	27 August 2021	Year 1
Area 57 – Berkshire	359	486	27 August 2021	Year 1
Area 58 – Staffordshire	632	857	27 August 2021	Year 1
Area 59 – Worcestershire	316	429	27 August 2021	Year 1
Area 60 – Shropshire	1478	2004	27 August 2021	Year 1
Area 61 – Oxfordshire	875	1186	27 August 2021	Year 1

Licence holders carry out operations under a 4-year licence. This allows badger control to take place in the licensed control area every year between 1 June and 31 January inclusive.

The licence holder will decide the start date for control operations within this period.

Natural England has confirmed to the licence holders the minimum and maximum numbers of badgers they can remove.

Protected sites listed in the Annex Bs are not necessarily part of any active operations. These can and will only occur on protected sites where the landowner or occupier has granted permission.

The licences only permit badger control to take place outside these closed seasons:

- controlled shooting – 1 February to 31 May
- cage-trapping and shooting – 1 December to 31 May

Chancellor launches vision for future public spending

- The Spending Review will set out the plan for how public spending will deliver the people's priorities over the next three years.

The Chancellor has today (7 September) launched Spending Review 2021 (SR21), which will conclude on 27 October 2021 alongside an Autumn Budget and set out the government's spending priorities for the Parliament.

The three-year review will set UK government departments' resource and capital budgets for 2022-23 to 2024-25 and the devolved administrations' block grants for the same period.

When added to what we have already provided to invest in our future, our plans – including the additional funding for health and social care announced today (7 September) – mean core departmental spending will grow in real terms at nearly 4% per year on average over this Parliament. By 2024-25 that means that core departmental spending will be £140 billion more per year in cash terms than at the start of the Parliament.

At the Spending Review, the government will set out how we will Build Back Better, deliver the priorities of the British people and continue to support businesses and jobs through:

- Ensuring strong and innovative public services – making people's lives better across the country by investing in the NHS, education, the criminal justice system and housing;

- Levelling up across the UK to increase and spread opportunity; unleash the potential of places by improving outcomes UK-wide where they lag and working closely with local leaders; and strengthen the private sector where it is weak;

- Leading the transition to Net Zero across the country and more globally;

- Advancing Global Britain and seizing the opportunities of EU Exit;

- Delivering our Plan for Growth – delivering on our ambitious plans for an infrastructure and innovation revolution and cementing the UK as a scientific superpower, working in close partnership with the private sector.

The Chancellor of the Exchequer, Rishi Sunak, said:

> Since the start of the pandemic, we've delivered on an unprecedented scale to protect people's jobs and livelihoods.
>
> Despite the worst economic recession in 300 years, we have not only got people back into work through the Plan for Jobs but continued to deliver on the priorities of the British people.
>
> At the Spending Review later this year, I will set out how we will continue to invest in public services and drive growth while keeping the public finances on a sustainable path.

As part of today's launch, the Chancellor set the envelope for spending over the next three years:

- Core day-to-day departmental spending will follow the path set out at spring Budget 2021, with the addition of the net revenue raised by the new Health and Social Care Levy and the increase to dividend tax rates announced today. The Government will make available around an additional £12 billion per year for health and social care on average over the next three years.

*This additional funding for health and social care allows the Government to announce an SR21 RDEL settlement for NHS England and Improvement rising to £160 billion by 2024-25

- In total, day-to-day spending will increase to £440 billion by 2024-25, increasing by nearly £100 billion a year in cash terms over the Parliament.

- We will also deliver a step-change in capital investment, as set out at Budget 2021. We will invest over £600 billion over five years, the highest sustained level of public sector net investment as a proportion of GDP since the late 1970s.

- Overall, our record and our plans will see total core departmental spending (for day-to-day spending and investment) grow in real terms at nearly 4% per year on average (nearly 6% in cash terms) over this Parliament – a £140 billion cash increase and the largest real-terms increase in overall departmental spending for any Parliament this century.

This spending increase is part of our broader plan to return our public finances to a sustainable footing over the medium-term. The spending plans and focused tax changes we announced today, alongside the measures taken at the last Budget, show that we are determined to get our fiscal position back on track, so that we can continue to fund excellent public services in the future.

Given the impact COVID-19 has had on the economy, the Chancellor has been clear that our spending plans will be underpinned by a focus on ensuring every pound of taxpayer funding is well-spent, so that we can continue to deliver the highest-quality services to the public at the best value. Departments have therefore been asked to identify at least 5% savings and efficiencies from their day-to-day budgets as part of these plans, which will be reinvested in our priorities.

Further information:

- The SR launch letter can be found online.

- The table below sets out the envelope for core departmental spending for the SR. Given the continued uncertainty around the path of the virus, we recognise that some additional spending on top of these plans may be required in the immediate term as part of the remaining response to Covid-19. This will be considered in exceptional circumstances only, where reform and efficiencies are not sufficient to fund essential activity.

- The table below also sets out the additional funding for health and social care which is expected to be made available by the Health and Social Care Levy and increase to dividend tax rates announced by the government today. As with all tax measures, the additional revenue from the Levy and the increase to dividend tax rates will be accounted for at the next fiscal event and the costing certified by the Office for Budget responsibility (OBR). The exact amount raised will depend on the OBR’s forecast in the autumn. In making these allocations, the government has taken into account the expected impact the Levy will have on profits, wages and prices, which in turn will lower the amount that would otherwise have been raised from personal and business taxes, and compensation for public sector employers. Around an additional £12 billion per year from these tax changes will be made available for health and social care resource spending, with the remainder offsetting the additional public sector costs from the Health and Social Care Levy.

These estimates are based on how the OBR have considered previous similar changes.

- The Office for Budget Responsibility (OBR) will prepare an economic and fiscal forecast which will be presented alongside the Autumn Budget and SR21 on 27 October 2021.

- HMT has opened a process for the Spending Review and Autumn Budget to allow external stakeholders to submit representations. Representations can be submitted here by 30 September.