

Immigration (Time Limit on Detention):

Â Sarah Wollaston Chair, Health and Social Care Committee, Chair, Liaison Committee (Commons)

Further to the point made by my right hon. Friend Justine Greening, will the Home Secretary commit to looking at the extra costs and the bureaucracy that will fall on our health service and our care sector? As she has said, because of the salary threshold that applies, many of the key staff who enable our health service and care sector to function will fall below that salary threshold, and the extra costs that will fall on the care sector in particular are quite extraordinary. Will he commit to reducing bureaucracy and tackling that cost?

Sajid Javid The Secretary of State for the Home Department

Again, a very important point has been raised by one of my colleagues. I absolutely make that commitment. My hon. Friend is quite right to raise it, because we have to recognise that as we move from the current system of freedom of movement, in which there is virtually no bureaucracy to speak of, to a system under which we will require visas for every worker, we must keep an eye on the paperwork and bureaucratic requirements and keep the system as simple and light-touch as possible. That applies not just to larger employers, such as hospitals or NHS trusts, but to the smaller employers that may be looking for skills but perhaps taking only one or two people a year, and we should keep that in our minds as well.

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Sarah Wollaston Chair, Health and Social Care Committee, Chair, Liaison Committee (Commons)

It is a pleasure to follow Mr Sharma, and I agree with him that we are stronger when we work with our neighbours. No one doubts the commitment of the Prime Minister to try to deliver on the wishes of the 52%. The trouble is that no one really knows which version of Brexit she was mandated to deliver. There are so many possible alternatives, with everything from Norway, the European Economic Area, the European Free Trade Association and Norway plus a customs union through to a Canada-style free trade agreement and Canada plus plus plus. There are so many options, but after two years of hard slog, we now know what this looks like. We know what the withdrawal agreement looks like, for example. It is a legally binding agreement with more than 500 pages, but worryingly, it has only 26 pages describing what will actually happen after the transition period. That is nothing more than a wish list of asks and it is very sketchy. We are heading for a blindfold Brexit.

I also fear that we are being forced into a binary false choice in which we accept either a bad deal or something even worse: no deal. Unfortunately, the Prime Minister has set down red lines all around herself for the various options. The one area in which she has not put down a red line is the worst deal of all, which is no deal. I am afraid that I do not agree with my right hon. Friend John Redwood when he talks about "Project Fear". I think that very shortly,

possibly in as little as 114 days, we will be up against "Project Reality". In the context of no deal, "Project Reality" would be very serious indeed for patients who use our national health service. We are talking about major interruptions in the supply chain of vital medicines and medical supplies. We are talking about insecurity in the supply of vital diagnostic test materials such as medical radioisotopes, which cannot be stockpiled. We are talking about supply chain issues for complex biological drugs, including those that we use to stop transplant rejection and to treat cancers.

We are also talking about products that cannot easily be switched from one brand to another in cases of shortage, such as medication for epilepsy. We are talking about difficulty in guaranteeing sufficient refrigeration capacity for stockpiling. Nobody voted in the referendum because they wanted to see the stockpiling of medicines and the extra costs involved, or the difficulties that the NHS and our care services will face in providing the workforce that we need. The truth is that there is no version of Brexit that would be positive for our NHS, for our care services, for science and research or for public health, and we need to be honest with people about that.

We also need to be honest and have a reality check about what is happening in this place. It seems to me that even the dogs in the street know that the Prime Minister's deal is not going to pass this House next week. That is the truth of it. We should now be thinking about plan B, and we need to be honest about that. To my mind, plan B must not involve no deal. No responsible Government could inflict no deal on the United Kingdom in 114 days' time. We are absolutely not prepared for that. So what is the alternative? There is no majority in this House for any of the other options, so the alternative is to look at going back to the British people and saying to them, "This is what Brexit looks like. This is the best that could be negotiated. Is this the Brexit you voted for, or do you want to stick with the deal that we have?" I would say that there was no consent to being dragged into Brexit without asking the people.

Before coming to this place, I was privileged to work in the health service for 24 years, and to teach junior doctors and medical students. In medicine, there is the really important principle of informed consent. We should apply it to Brexit, because Brexit is major constitutional, economic and social surgery. To give informed consent, one has to know what the operation involves. Two years ago, there were many possible versions of that operation, but now that we know what the surgery involves, it is time for proper discussion about the risks and benefits, and to allow people to weigh them up for themselves.

James Heappey Conservative, Wells

My hon. Friend knows that I respect her enormously. I agree that being very candid with the electorate is the right thing to do right now. Should we also be candid with them about the mechanism for delivering a second referendum—about the fact that it would require an Act of Parliament; about the European Union (Withdrawal) Bill taking 348 days to get through the Houses of Parliament; and about there being absolutely no expectation that a Bill as controversial as a second referendum Bill would be able to progress through this place any quicker?

Sarah Wollaston Chair, Health and Social Care Committee, Chair, Liaison Committee (Commons)

I ask my hon. Friend to have a look at the work of the Constitution Unit and others, who estimate that we could get a referendum Bill through the House in 22 weeks. We would first need to extend article 50. That is what I hope that the Prime Minister does. I hope that she

looks at the reality of the situation, extends article 50, and asks the British people, "Is this the Brexit you voted for, or do you want to stay with the deal we have?"—the one that has served us well for decades. That question has to go back to the British people.

None of us in this House should be forced into a false choice—into choosing a bad deal because we are told that the only alternative is no deal. That is simply not the case, and I believe that the House will reject the deal. That is why I support the amendment in the name of Hilary Benn rejecting no deal, and urge colleagues to do the same. The House should ask to extend article 50, so that we have the time to consider where we go from here. Otherwise, in 114 days, we run out of road and fall off a cliff. What is needed now—this message is for the Opposition Front Benchers as well as ours—is a BFO: a blinding flash of the obvious. We need to think again. Delivering on a people's vote will require the Opposition Front Benchers not to cling to the idea that they will force a general election; we know that will not happen, either.

We do not have any time to waste. We need Members on both Front Benches to give a free vote, or deliver support for a people's vote. That is the way forward. This House would decide the exact question. I believe that the choice should be between this deal and remain; I know others feel that the question should be more complex. We do not have to decide that now—it is something that the House could decide later—but we must not run out of road; we must extend article 50.

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Sarah Wollaston Chair, Health and Social Care Committee, Chair, Liaison Committee (Commons)

Does the Secretary of State agree, however, that another option would be to extend article 50, and that it is incorrect to present the House with a false choice in which we would automatically fall out on 29 March?

Jeremy Hunt Secretary of State for Foreign and Commonwealth Affairs

I had a conversation with my hon. Friend earlier this evening about how lively things are in her constituency. I think that if any of us asked our own constituents whether the right solution to the dilemmas we face would be to extend the agony by postponing the article 50 due date, they would be absolutely horrified. They want to get this over with. They want to get it resolved.

I mentioned the risks of a no-deal situation to our security, which were recognised by my right hon. Friend Stephen Crabb and my hon. Friends the Members for Ludlow (Mr Dunne) and for Banbury (Victoria Prentis). They all alluded to that issue.

In conclusion, when it comes to defence and security, irrespective of our membership of the EU, the lesson of history is clear. When Britain and Europe stand together against common foes, our combined strength deters our adversaries and keeps the peace. If we did not do that, our common security would be placed at risk in a way that would be wholly unnecessary. So let us grasp this opportunity for a new and different partnership, post Brexit, based on the essential truth that British and European security are indivisible and, whether inside or outside the legal structures of the EU, our common interests are best served by working together to protect the values we all cherish.

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