My speech during the debate on Covid-19, 28 September 2020

Sir John Redwood (Wokingham) (Con): The Government rightly want to get the virus down and limit deaths, but they also need to promote livelihoods and economic recovery, and it is proving difficult to get that balance right. I do not accept the criticisms that say, "Well, the Government change their mind." Of course the Government change their mind, because the virus waxes and wanes and the situation changes on the ground. They have to study the data and do the best they can.

What I would like to hear from Ministers is more in various directions where I think they could improve the position more quickly. The first is the issue of treatments. There has been some excellent work done in the United Kingdom, and it is great that a steroid has now been discovered that can make a decent improvement for various patients. That is great news and I welcome it, but what about the tests and trials we were promised when I raised this, many months ago now, of other antivirals, other steroids, antimalarials and clot-busting drugs? All those may have possible efficacy and they have their scientific and medical support around the world. We have great science here, so can we hear the results, please, Minister? Where have we got to? Are any of those going to work? The more and better treatments we can get and the more we can understand the different strands and features of this disease in different patients, the better it will be for keeping people safe.

We have learned that the Government now agree with me and others that they need to do a better job on isolation hospitals and on segregating patients who have this very contagious disease from all the other people who need to use our health service. I am pleased about that, but can we have some more details? Why cannot we simply use the Nightingale hospitals for covid-19—let us hope we do not need anything like that number of beds for this second wave—and keep all the other hospitals for non-covid? Or, if they are going to have shared facilities, certainly in urban areas where there is more than one hospital, can we have covid-19 hospitals and other hospitals that are open for other conditions? We do not want to see all the death rates for other things shooting up because people feel they cannot get access to their hospital or they are worried about going to their hospital because of covid-19. \square

We then have the issue of the damage this is doing to the economy. I understand the strategy, but it seems that the damage is going to fall unduly heavily on hospitality, leisure, travel and tourism, the areas where we need more social contact and where that is thought to encourage the transmission of the disease. As someone who does not normally recommend subsidies, I do think that when people are banned from going to work, running their business or doing their job, they deserve some public support. They are doing that in the public interest, because their Government have told them that their activity is particularly damaging to the public good. If that is true, surely we the taxpayers have to pay for that.

I assume that the Government think we will come out of this sometime, and we want to go back to a world where there are theatres, cinemas, entertainments, good restaurants and all the other things that make life worth while and give pleasure to families. We do not want to live in a world where they are gradually all closed because there is no support and they are not allowed to function at all. We need more intelligence to work alongside those sectors, to see how they can get ways of working and living alongside this virus all the time it is out there and causing us trouble.

There have already been hon. Members today requesting exit strategies, and I quite understand why it is very difficult for the Government to give us one, because they are all sorts of unknowns that I do not know any more than they or their advisers do. We understand that their preferred exit strategy is the discovery of a vaccine and the roll-out of massive quantities of that vaccine for sometime early next year, so that we can then come out of lockdown.

That would be great, but we cannot bank on that. There are ifs and buts in that and it may not happen, so there needs to be a strategy for a situation where we do not have a magic vaccine. That is why we need more work on safeguarding people who are most at risk and more work on how we can get other people back to work, to save those livelihoods and those businesses and to wean them gradually off subsidy, which they are going to need all the time they are banned from doing their job and keeping things ready for us when times improve.

Above all, the nation needs some hope. It needs a vision of a better future. It needs to believe that, in a few months' time, something good will happen. It certainly does not need the threat of cancellation of Christmas or the threat that thousands of students will be locked away in rather small accommodation in their universities because there is a fear that they might spread the virus more widely.