HOUSE OF COMMONS

# Backbench Business Committee

## Representations: Backbench Debates

Tuesday 20 January 2026

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Watch the meeting

Members present: Bob Blackman (Chair); Mr Lee Dillon; Mary Glindon; Alison Hume; Will Stone; Martin Vickers.

Questions 1-12

### Representations made

I: Daniel Francis

II: Phil Brickell

III: Cameron Thomas

IV: Alex Ballinger and Dr Beccy Cooper

V: Dr Rosena Allin-Khan

**Daniel Francis** made representations.

Q1 **Chair:** Welcome to this meeting of the Backbench Business Committee. For those watching the broadcast, apologies for our late start, which was due to a Division in the House.

This afternoon, we will consider applications from colleagues for debates in the Chamber and in Westminster Hall. The first application, from Daniel Francis, is for a debate on the merits of establishing an independent national review body overseeing wheelchair provision. This is a request for a 90-minute debate in Westminster Hall on either a Tuesday or a Thursday. Daniel, please present your case.

***Daniel Francis:*** I am requesting a Westminster Hall debate on the merits of establishing an independent national review body overseeing wheelchair provision. As a co-chair of the all-party parliamentary group for wheelchair users, and as a parent of a wheelchair user, I have seen at first hand the barriers that many people across the country are facing in accessing vital wheelchair provision.

Integrated care boards are responsible for the provision and commissioning of local wheelchair services. It is therefore the responsibility of ICBs to review and assess the quality of the provision of their commissioned NHS wheelchair services. However, we are aware of considerable issues, including a current investigation by the health ombudsman regarding one provider, and a number of significant complaints on which the health ombudsman will be commenting later this year. NHS England is taking steps to reduce regional variation in the quality and provision of NHS wheelchairs and to support ICBs to reduce delays in receiving timely interventions and wheelchair equipment.

A debate on this topic would provide an opportunity for Members to highlight the issues that their constituents are facing. The majority of my colleagues who represent seats in Staffordshire, if not all of them, have raised persistent concerns about the wheelchair service provided by AJM Healthcare. In my part of south-east London, there are similar issues. I would welcome, as I am sure colleagues would, the opportunity to raise their concerns during a debate and to call for an independent review body to provide greater scrutiny and oversight of wheelchair providers. A number of Members raised concerns in the House last year on behalf of their constituents who have been let down by NHS wheelchair providers. They have asked for more to be done to tackle health inequalities in that area.

I hope that a debate on this topic would allow Members to share their support for a national review body overseeing wheelchair provision and expand on the work of the all-party parliamentary group for wheelchair users, which has identified several issues with wheelchair provision. Members of the APPG have expressed concerns that—because of a lack of competition in contracting NHS wheelchair services, and evidence of the undercutting of bids pushing other service providers out of the running for contracts—the quality of the service has continued to deteriorate.

Wheelchair users will continue to bear the brunt. I therefore ask that this matter be considered for a Backbench Business debate.

Q2 **Will Stone:** Thank you for bringing forward this important debate. You have 26 Members signed up to speak. Are you sure that 90 minutes in Westminster Hall would be adequate for everyone to get their views across and say exactly what they want to say? We have the power, as a Committee, to grant a three-hour debate on a Thursday afternoon if you think that might be slightly better.

***Daniel Francis:*** Obviously I am open to that, and we would be able to expand on that. I am conscious of your queue as well. We are keen to start the debate. Our APPG will be coming out with our own inquiry over the coming months. We are also cognisant, as I say, that there is a separate health ombudsman inquiry regarding one provider. Our view is that we would like to have the debate sooner. I hear what you say about the number of people wishing to take part, but if we could have the debate in the next few months, that would be helpful for us.

Q3 **Chair:** I also have to ask, because this is a Tuesday application, which Government Department you expect to answer.

***Daniel Francis:*** The Department of Health.

**Chair:** That is fine. I just had to confirm that, because it needs to fit with the rota.

Are there any questions, colleagues? No. Thank you very much, Daniel; the Clerks will be in touch in due course.

***Daniel Francis:*** Thank you, Chair.

**Phil Brickell** made representations.

Q4 **Chair:** The next application is from Phil Brickell and John Whittingdale—I don't see John, so I think it is just Phil. This is for a debate on the impact of strategic lawsuits against public participation. It is an application for the Chamber, with a divisible motion. Over to you, Phil.

***Phil Brickell:*** Thank you, Chair. I declare an interest as the chair of the all-party parliamentary group on anti-corruption and responsible tax. Alongside 21 colleagues across all the parties, I am seeking a debate on the egregious phenomenon of lawyers behaving badly by using spurious legal threats to try to shut down public disclosures. These threats are known as strategic lawsuits against public participation, or SLAPPs.

On housekeeping, the answering Department would be the Ministry of Justice. I am looking for a debate in the Chamber on a Tuesday or Wednesday. The reason for the timing—I hope it might be before the next King's Speech, but I am conscious of the backlog—is that many colleagues and I are keen to put the case to the Government that we need to see specific legislation to address the issue of SLAPPs in this year's King's Speech.

I am conscious that the Committee has a backlog, so we would also consider a Westminster Hall debate on a Tuesday or Wednesday if one in the main Chamber is not feasible. I have asked for 90 minutes or three hours because of the demand, but also because of the complexity and sheer volume of cases that I anticipate colleagues will want to discuss. Ultimately, the reason for pitching the debate is that SLAPPs remain a threat to our civic freedoms, and indeed to our democracy. The existing legislative coverage is patchy and ineffective. A number of regulators, in particular the Solicitors Regulation Authority, are lacking in urgency to address solicitors who should be doing the right thing.

A similar debate was held in November 2024. However, I feel that the issue needs a fresh airing because of the number of new cases related to SLAPPs that we have had since, and because at the end of last year the Government published their anti-corruption strategy, in which they committed to considering the future approach for comprehensively tackling the issue. In the recommendations grid at the end of the Government's anti-corruption strategy, it described this issue as an MOJ priority, but then gave a due date of 2029, which is oxymoronic. If you ask anyone who has experienced the mental and financial turmoil caused by a SLAPP, they will tell you that shutting down this practice cannot wait another three years. It urgently needs to be addressed.

There are a few awful cases that I am sure some people in the room will be more than aware of. The sanctioned Russian warlord Yevgeny Prigozhin went after a British journalist, Eliot Higgins, in the UK courts for suggesting that Prigozhin might in some way be connected to a mercenary group of which he later declared himself the leader. It cost Higgins, an investigative journalist, £70,000. Last year, the Solicitors Regulation Authority ended up dropping the complaint against Prigozhin's lawyers.

I am also told that in the past couple of years that there has been a spike in SLAPP cases against private citizens on more localised issues, which are detailed in my application: healthcare whistleblowers, people highlighting building safety issues and even survivors of sexual violence, who are being silenced by their abusers. I would go so far as to say that most Members will have a constituent who is affected in some way by a SLAPP. This debate will give those Members a chance to speak in support of their constituents, protected by parliamentary privilege, without straying into matters that are sub judice.

Both through my constituency work and as chair of the APPG on anti-corruption, I constantly find myself self-censoring because of the risk of being SLAPPed. It has gone on far too long. The Prime Minister has described SLAPPs as intolerable, hence the need for this debate. I look forward to any questions.

Q5 **Martin Vickers:** Phil, your application notes that this debate would be an opportunity to discuss recent SLAPP cases. You are aware of the House's sub judice resolution, which means that Members would need to be extremely careful not to mention specific ongoing cases. Would you feel confident that that could be the case?

***Phil Brickell:*** I think that that is certainly possible; it was the case in the debate that took place at the end of 2024. I mentioned sub judice in my comments. It is something that I am very mindful of, and it is how I comport myself in the Chamber as well. It is something that I can work on with fellow applicants for the debate.

Q6 **Chair:** You also mentioned that you would potentially like a Chamber debate on a Tuesday or Wednesday. Just so you are clear, we allocate for Westminster Hall on a Tuesday morning and a Thursday afternoon, but with Chamber debates the Leader of the House gives us the time. You may help yourself by encouraging the Leader of the House to give us Tuesday or Wednesday afternoons on which to hold such a debate, but otherwise it is likely to be a Thursday afternoon. Equally, because you have a divisible motion, we can only hold this debate in the Chamber. Would a Thursday afternoon be a problem for you and your fellow applicants?

***Phil Brickell:*** I do not believe so, if we had sufficient notice.

**Chair:** Fine. Are there any other questions?

**Mr Dillon:** Just a comment that the application form that you have used might be a slightly outdated one, so have a look at the new template.

***Phil Brickell:*** Okay. Thank you very much.

**Chair:** That is very helpful. The Clerks will be in touch with you in due course.

**Cameron Thomas** made representations.

Q7 **Chair:** The next application, from Cameron Thomas, is for a general debate on estate management. Once again, this is an application for a Chamber debate.

***Cameron Thomas:*** Thank you, Chair and all members of the Committee. Across the UK, private and unregulated estate management companies oversee and maintain an increasing number of residential and commercial developments, with responsibility for repairs and maintenance of communal spaces. A number of these companies, including some with operations across the country, are viewed with scepticism by residents, who cite poor service, while at the same time these companies apply unreasonable, opaque charges for services. Some residents report inadequately delivered, delayed and even non-existent works but feel unable to issue their concerns to the management companies, owing to substandard customer services.

This has been the experience reported by many of my constituents, and I have no doubt that it has been the experience of constituents of other Members of this House. I am a customer of one such estate management company and will declare this shared experience. I have little doubt that residents up and down the country experience similar levels of service, courtesy of a system that they are mandated to enter into in order to

purchase a property. It is, to my mind, a system unfairly balanced against our constituents and worthy of scrutiny by Parliament.

That is why in December 2024 I joined Liberal Democrat colleagues in welcoming one estate management company with a national footprint to this very estate, where a promise was made to install a parliamentary channel to the business within one year. This seems not to have come to pass. I believe that Members across this House should have an opportunity to raise their own constituency-specific issues with the Government in the Chamber and observe a meaningful response from Government.

Q8 **Alison Hume:** Thank you for bringing this application to us. We allocated a Westminster Hall debate on residential estate management companies in November 2024, so for procedural reasons your debate would require a substantive motion. That means that you would need to think of a specific action that you would like to call on the Government to take.

***Cameron Thomas:*** I have one in mind, if I can voice that.

**Alison Hume:** Please do.

***Cameron Thomas:*** That the Government implement a statutory regulatory body for the sector.

**Chair:** Are there any other questions? No.

Thank you, Cameron. The Clerks will be in touch in due course.

***Cameron Thomas:*** Thank you.

**Alex Ballinger** and **Dr Beccy Cooper** made representations.

Q9 **Chair:** The next application, from Alex Ballinger and Beccy Cooper, is for a 90-minute Westminster Hall debate on a Tuesday, on gambling advertising.

***Alex Ballinger:*** Thank you, Chair. I will wait for my colleague to sit down—we work better in pairs.

We would like a debate on gambling advertising. Members of the Committee have probably heard other debates on gambling in which the harms associated with gambling have been well outlined. Some 2.7% of the population—close to 1.5 million people across the country—are facing gambling harms. Interestingly, 1.2% of children are also facing gambling harms. A huge number of people are struggling at the moment.

The Gambling Act 2005 is not up to date, given the rise in online gambling, the rise in online advertising of gambling and the development of the industry overall. We are particularly concerned about the links between advertising and gambling harm. There are some interesting statistics: marketing and advertising are the No. 1 trigger for patients receiving treatment for gambling harm, with 87% of people saying that advertising prompted gambling when otherwise they would not have gambled; 34% of bettors are influenced by gambling; and 13% of people

began gambling due to advertising. We know all of this because the industry spends £2 billion on the sector.

We are particularly concerned about young people's exposure. Anyone who has been to a football game will know that the family areas are saturated with gambling adverts. Some 27,000 adverts were placed in the opening weekend of the premier league, which is up massively from a few years before. There is a front-of-shirt ban being implemented by the Premier League on adverts for gambling companies, but that only represents 6% of adverts, so there is still an enormous amount. This shows the failure of self-regulation and the need for Government regulators to do more. That does not even include influencers and social media companies—there are 1 million gambling adverts on X. There has been a huge rise in the unlicensed industry, and all of this is increasing the gambling harm that we are facing in this country.

There are some interesting comparators. Other European countries, including Belgium, the Netherlands, Italy and Spain, have much tougher regulatory environments for gambling advertising. There is a lot that we can lose—sorry, a lot that we can learn from other countries; lots of people can lose, of course, by gambling. We also have some criticisms of how the Gambling Commission and the ASA are not regulating this space properly, because they have the powers to do things on this but are choosing not to.

We have some recommendations that we think could be raised in the debates around new restrictions, including a ban on inducements—the free bets and promotions that people get that encourage them to jump straight in—and a real look at gambling sponsorship. Formula 1 had tobacco sponsorship for a very long time; that sector has done really well since that was banned, for good reason, so I think we need to talk about what lessons we can learn from Formula 1. There is also a huge amount of gambling adverts in gaming, even in games that are under-18 rated, which is quite concerning, so we need tougher regulations on those, and on online content marketing and influencers.

There is lots to discuss. Lots of MPs across the House are interested: Sir Iain Duncan Smith, Beccy and I are all involved in the APPG on gambling reform, but lots of Labour, Liberal Democrat and independent MPs were keen to get involved in the debate as well.

**Chair:** Anything to add, Beccy?

***Dr Cooper:*** I don't think so, Chair; I think my colleague has done an excellent job. The only thing I would say is about the saliency, in terms of timing. I think we were looking for something like a March debate, if the Committee were minded to grant us some time. On the broader context, I think the fact that there has been no new gambling Act since 2005 gives it ongoing saliency, but the social media review that was announced today really brings things into sharp relief for the digital space, particularly around the influence on children and young people, so it feels particularly timely. As I say, we are happy to go for a March date if that suits the Committee.

Q10 **Mary Glindon:** You have applied for a Westminster Hall debate on a Tuesday. The waiting list for Tuesdays is much longer than the one for Thursdays, so would you consider a Thursday debate if one was available?

***Alex Ballinger:*** I think waiting a bit longer might suit this debate well, because of the timing of the inquiry that we are running with the APPG. I do not know how long your waiting list is, but if it takes us into late March, that might not be the end of the world.

**Chair:** Late May would be more likely, I suspect.

***Alex Ballinger:*** Late May? Then we would consider a Thursday debate.

**Chair:** Any other questions, colleagues? No.

Thank you very much for your application. The Clerks will be in touch in due course. We will add this as a potential Thursday debate, if that is okay with you.

***Alex Ballinger*** *indicated assent.*

**Dr Rosena Allin-Khan** made representations.

Q11 **Chair:** Last but by no means least is Rosena Allin-Khan's application for a debate in the Chamber on corridor care in the NHS. Rosena, please present your case.

***Dr Allin-Khan:*** Thank you very much. Good afternoon, Chair and Committee, and thank you for your time.

As well as being the chair of the all-party parliamentary group on emergency care, I am an emergency medicine doctor, as I have been for the past 20 years. I am here today—for the first time, actually, in my almost 10 years of being an MP—because I am so moved by what we are seeing around the country in our NHS departments: that one in five of all patients are being treated in corridors and other inappropriate places, such as being examined in cupboards.

That is the most undignified experience ever for patients themselves and for their families, who are often not even able to hold their hand, with a seat next to them, while they are in pain. It has also led to death. In one hospital alone, two people died on consecutive days due to corridor care. It is occurring in 90% of hospitals, with 93% of clinicians saying that they have personally experienced it and that they feel that patients are worse off.

Through the APPG, I work very closely with my colleagues and the Royal College of Emergency Medicine, and this is an issue of national importance. It is not confined to big cities; it happens across the country. I am sure you will be alarmed to hear that excessive waits have caused as many as 16,600 excess deaths—that is an astonishing figure—and seven in 10 nurses routinely deliver care in unsuitable spaces such as corridors. Many of my colleagues are reduced to tears on shifts, and we all go home feeling as though we have not been able to deliver the care that our

patients deserve and that we know we can give them and are trained to give them. Some 12,000 patients per day remain in hospital despite being medically fit.

To my knowledge, there has never been a debate on this issue on the Floor of the House. The debate is seen as so important by colleagues across all parties that five members of the Health and Social Care Committee signed the application, and I have had support for it across all parties. Although I have put in an application with 18 signatures, there are a further 18 who are willing to add their names if needed, and many, many colleagues are willing to speak. I understand the challenges around granting time on the Floor of the House, which is why I am very happy to have a Thursday if that makes it possible.

Because there is a present and imminent danger to patients as we speak, due to the winter pressures—we have pressures all year round, but they are particularly prevalent now—I request that the debate be granted as soon as the panel is able. There is a time constraint on this. The sooner we can bring attention to the issue on the Floor of the House and give colleagues the chance to debate it, the sooner we will be able to show the Government that, in a very cross-party way, we support their pledge to end corridor care by 2029. My request is for a debate as early as is conveniently possible.

There is so much that I could say. I will end by saying that so many people have given their lives for the freedom that we enjoy today. It is absolutely heartbreaking to see many members of our elderly community, in particular, languishing in pain on corridors and dying in an untimely way as a result. I am sure we all feel very passionately about that.

Thank you so much for your time. I am very happy to take any questions.

**Mr Dillon:** Thanks for the presentation. You spoke about wanting it as soon as possible, but debates in the Chamber have a waiting list that extends to the summer recess.

***Dr Allin-Khan:*** Understood.

Q12 **Mr Dillon:** Given the urgency, would you consider a Westminster Hall debate?

***Dr Allin-Khan:*** In all honesty, my preference would be for a debate in the Chamber. If having a debate in the Chamber precluded it from being debated at all until September or October, I would not be the decent doctor that I am if I refused a Westminster Hall debate. I would just like to express the fact that this subject really does feel deserving of Chamber time—I mean, all debates are—particularly as we have never had the chance to debate it in the Chamber before. I know that colleagues feel passionately, because so many have had personal experience of this and have inboxes much like mine. I am sure you have inboxes full of people sharing experiences as horrific as the ones that I have seen.

**Chair:** Are there any other questions from colleagues? No.

We might like to have a conversation with the Leader of the House about the importance of this issue so that more time is allocated to us and we can shorten our waiting list, particularly for the Chamber.

***Dr Allin-Khan:*** Would you like me to speak to him?

**Chair:** Yes. The more prompting we get, the better.

***Dr Allin-Khan:*** I am happy to do that. If I and other colleagues have successful conversations about granting more time for this, of course I would be open to whatever day of the week.

**Chair:** Thank you. The Clerks will be in touch in due course.

***Dr Allin-Khan:*** Thank you.

**Chair:** That concludes the applications. The Committee will now go into private session to consider the applications and the allocation of time.