



**NOTICE OF DETERMINATION
CORE PARTICIPANT APPLICATION
MODULE 1 - DOCTORS IN UNITE**

Introduction

1. In my [Opening Statement](#) on 21 July 2022, I explained that Modules would be announced and opened in sequence, with those wishing to take a formal role in the Inquiry invited to apply to become Core Participants for each module. On the same day, the Inquiry opened Module 1 and invited anyone who wished to be considered as a Core Participant to that Module to submit an application in writing to the Solicitor to the Inquiry by 16 August 2022.
2. The [Provisional Outline of Scope](#) for Module 1 provides that this module will examine the resilience and preparedness of the United Kingdom for a Coronavirus pandemic. Further modules will be announced and opened in due course, to address other aspects of the Inquiry's Terms of Reference.
3. On 12 August 2022 the Inquiry received an application from Doctors in Unite for Core Participant status in Module 1.
4. I made a provisional decision not to designate Doctors in Unite as a Core Participant in Module 1, thereby declining their application ("the Provisional Decision"), on 7 September 2022. Doctors in Unite were provided with an opportunity to renew the application in writing by 4pm on 16 September 2022.
5. On 13 September 2022 Doctors in Unite submitted a renewed application for Core Participant status in Module 1. This notice sets out my determination of their application for Core Participant status in Module 1.



Application

6. Applications for Core Participant status are considered in accordance with Rule 5 of the Inquiry Rules 2006, which provides:

5.—(1) The chairman may designate a person as a core participant at any time during the course of the inquiry, provided that person consents to being so designated.

(2) In deciding whether to designate a person as a core participant, the chairman must in particular consider whether—

- (a) the person played, or may have played, a direct and significant role in relation to the matters to which the inquiry relates;*
- (b) the person has a significant interest in an important aspect of the matters to which the inquiry relates; or*
- (c) the person may be subject to explicit or significant criticism during the inquiry proceedings or in the report, or in any interim report.*

(3) A person ceases to be a core participant on—

- (a) the date specified by the chairman in writing; or*
- (b) the end of the inquiry.*

7. In accordance with the approach set out in my Opening Statement and the Inquiry's [Core Participant Protocol](#), I have considered whether the application fulfils the requirements set out in Rule 5(2) in relation to the issues set out in the Provisional Outline of Scope for Module 1.

Summary of Application

8. The original application states that Doctors in Unite is the oldest medical trade union, formally known as the Medical Practitioners Union, and is a section of Unite.
9. The original application was made on the basis that Doctors in Unite have a significant interest in matters to be examined in Module 1, and in particular issues 1 and 4 of the Provisional Outline of Scope. Doctors in Unite state that they have a significant



interest, given their role as a trade union representing the interests of their members, some of whom have been directly impacted by the pandemic and secondly as an organisation of health professionals dealing with the pandemic.

10. The renewed application asks me to take one additional point into account. Doctors in Unite explain that they are the only trade union recognised in local government which has an organised representative structure for public health specialists, doctors and Directors of Public Health. In that context, Doctors in Unite say that the role of local government in resilience and the role of their public health specialists and Directors of Public Health must be a key issue for Module 1. Whilst they contend that the system was inadequate, Doctors in Unite suggest that if I disagree with their analysis about this, there must be a possibility that their members will be criticised.
11. In summary, whilst the original application sought only to rely on Doctors in Unite having a significant interest in an important aspect of the matters to which the inquiry relates under Rule 5(2)(b), the renewed application seeks additionally to rely on Rule 5(2)(c) by contending that members of Doctors in Unite working in local government may be subject to explicit or significant criticism during the inquiry proceedings or in the report, or in any interim report, for Module 1.

Decision for the Applicant

12. I have considered with great care everything that is said in Doctors in Unite's renewed application and I am grateful to them for taking the time to expand upon their original application. I have also reminded myself of what was said in the original application to enable me to assess the application for Core Participant status as a whole.
13. Module 1 is primarily concerned with the core systems and structures within the United Kingdom for preparedness and resilience for an event such as the Covid-19 pandemic, and with high-level pandemic resilience, preparedness and planning. It will examine whether the correct structures, bodies, procedures and policies were in place at UK



and at regional and national levels, and look at their history, development, co-operation, and performance. In terms of inquiring into pandemic planning, this will include examination of the forecasting processes, the extent to which lessons were learned from past knowledge of actual events and simulated exercises, the degree of readiness preparation and the general resources that were available. The Module is therefore concerned with how the relevant entities prepared and whether they were ready by way of general response.

14. I appreciate that Doctors in Unite have taken a close interest in the transmission of Covid-19 and the response of the government and have written and advised in relation to this. However, the focus of Module 1 is the resilience and emergency preparedness of the UK in advance of the coronavirus pandemic.

15. Doctors in Unite’s original application explained that *“As the main representative union for non-medical public health consultants (who we regard as medical specialist colleagues and admit to membership alongside their medical colleagues) and as the only medical or public health union recognised in local government, we are deeply concerned by the progressive run down of public health capacity since 2015”*. Therefore, the issues raised by Doctors in Unite in their renewed application have already been raised to a significant degree in their original application, which I considered. This includes the representative function performed by Doctors in Unite in respect of public health professionals working in local government.

16. In relation to the point made in the renewed application as to possible criticism of its members, I do not consider that individual members of Doctors in Unite will be subject to explicit or significant criticism during the inquiry proceedings, in the report, or in any interim report, for Module 1. Whilst, ultimately, I retain a completely open mind as to who may or may not be the subject of criticism in due course, I consider it unlikely that individual public health professionals working in various organisations at the level of



local government will be the subject of explicit or significant criticism particularly in relation to this Module.

17. I will of course keep the Provisional Outline of Scope for Module 1 under review and, as I explained in my Opening Statement, other aspects of the Inquiry's Terms of Reference will be covered in future modules for which Provisional Outlines of Scope will be prepared and published in due course.
18. Further, there are a number of ways in which Doctors in Unite can, if necessary, participate in Module 1 without being a Core Participant. For example, as I noted in my Provisional Decision, it is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. Doctors in Unite may have relevant information to give in relation to matters being examined in the Inquiry and the Inquiry will be reaching out in due course to a range of individuals, organisations and bodies to seek information, to gain their perspective on the issues raised in the modules and, where appropriate, to ask for witness statements and documents. More generally, and to the extent that the issues raised by Doctors in Unite are intended to be addressed by Module 1 as opposed to later modules, I have every confidence in the independent legal team to pursue all legitimate lines of inquiry with the investigatory and analytical rigour that a statutory inquiry of this scale and importance demands.
19. For all of those reasons, having considered all of the information provided by Doctors in Unite in light of the Provisional Outline of Scope for Module 1, I consider that they did not play a direct and significant role in relation to the matters to which Module 1 relates, nor do they have a significant interest in an important aspect of the matters to which Module 1 relates, nor is it likely that their individual members will be subject to explicit or significant criticism during the Inquiry proceedings in the report, or in any interim report, for Module 1. Accordingly, in my discretion, I decline to designate Doctors in Unite as a Core Participant in Module 1.



20. My decision not to designate Doctors in Unite as a Core Participant in Module 1 does not preclude them from making any further applications in respect of any later modules. Doctors in Unite may wish to consider making an application for Core Participant status in future modules more directly dealing with health systems and the impact of Covid-19. I will consider any future applications Doctors in Unite may wish to make on their merits at the time they are made.

Rt Hon Baroness Heather Hallett DBE

Chair of the UK Covid-19 Inquiry

28 September 2022