

UK Covid-19 Inquiry

Local government roundtable - opening remarks, breakout discussion and closing remarks

1 April 2022

Online

(Participants were offered an in-person meeting in Birmingham but either chose to attend online or we moved the meeting online due to a lack of in-person attendees)

The Inquiry held a roundtable on local government issues. This transcript includes the opening remarks, one of two breakout discussions, and closing remarks.

Participants

Sam Hartley, UK Covid-19 Inquiry

Adam Hill, Solace

Joanne Roney, Solace

Jim McManus, Association of Directors of Public Health

Graham Farrant, R9

Gary McFarlane, Chartered Institute of Environmental Health

Tom Riordan, Leeds City Council

Mark Norris, Local Government Association

Robin Tuddenham, Calderdale Council, West Yorkshire

Alison Griffin, London Councils

Daniel Hurford, Welsh Local Government Association

Louise Davies, Directors of Public Protection Wales

Chris Llewelyn, Welsh Local Government Association

Anisha Worbs, Nana Gyamfi, Max Williams, Aisha-Asher Morgan, UK Covid-19 Inquiry

Katie Hitchinson, Citizen Coaching and Counselling

Sam Hartley: [00:00:01] Good morning, everyone. In the interest of time, I'm going to kick off. I think we haven't quite got everybody yet but I'm sure people will join as we go. So, my name is Sam Hartley. I'm Director of Policy, Research and Analysis and one of the Deputy Secretaries at the Covid Inquiry. I'd like to welcome you to this session to hear your views on the Inquiry's Terms of Reference.

I'm just going to say a few bits and pieces at the start of the session before we get into the questions, if that's okay. But first of all, I'd just like to introduce some of my colleagues who are

with us today and will help us facilitate this session. I'm joined by Anisha, Nana, Aisha and Max and we're also supported, as you can see, by our AV company called RTS who are on the line to help us facilitate the session and to record. I'll come on to talk about the recording in a minute.

So, just to be clear, we're here because we want to hear your views on the Terms of Reference for the UK Covid Inquiry. The Inquiry is an independent inquiry chaired by Baroness Hallett, as I'm sure you know, who's a retired Court of Appeal judge. It's being established by the Prime Minister to investigate the UK's response to the Covid-19 pandemic. And I'd like to thank you all for joining us at this stage virtually to give us your views on what we should be looking at.

Before we talk about the Terms of Reference, I just wanted to acknowledge and recognise that everybody in the country has been affected by the pandemic. Although you're all here at professional capacity, people will have varying different experiences and personal experiences that they will have gone through. And in all the sessions that we've been running, we have been supported by a counselling service and I think the information is in your agenda, the invite sent out to you. Please feel free to use that today. Katie, from the counselling team, is available to take any calls. So, please, if you do feel you need to step away from the conversation, please don't feel shy about doing so.

As I said, over the last few weeks, we have been meeting with a number of different sector-led groups. Baroness Hallett has been meeting with bereaved and affected families as well around the country to get a real sense from them and from you of the impact of the pandemic and how we can reflect or we can recommend to the Prime Minister that we're reflecting in the Terms of Reference the best way to investigate what has happened in this country.

I will say at this point that these meetings are about the Terms of Reference, what should be in the Terms of Reference and to consult on how we should go about doing the Inquiry. This is not about taking evidence yet. The Inquiry is not formally established and it's not formally set up until it has a final Terms of Reference.

So, we're not here to take legal evidence and put it forward to Baroness Hallett about experiences that have been had. That will come, obviously, over the course of the next few years, no doubt. Inevitably, sometimes, discussions about Terms of Reference obviously will touch on your own professional and perhaps personal experiences of what's happened. But I just want to stress that we're not sort of taking evidence about what has happened to feed into the investigation that Baroness Hallett will lead in due course.

As well as these roundtables, we have an online tool where the public and organisations can submit their views. Some of you may have done so already. I would encourage you and I'll remind you at the end to, as well as in today's sessions, to please tell your organisations or those that you represent to submit their views through our consultation website so that we have that recorded there as well. The deadline, as you all know, is the 7th of April, next Thursday.

I mentioned that this meeting is being recorded by our colleagues from RTS and a transcript of this meeting will be published at the end of the consultation period and available on our website. If, for any reason, you don't want to be named in that transcript, please let one of my team know through the contact details that you have already after the session.

We're going to run this session in two breakout rooms because of the size of the group we have today. I hope that was made clear to you in the information beforehand. Anisha's going to chair one of them and I'm going to chair one as well. We're going to break out in a few minutes. We're going to be talking about the same things. We'll be going through the list of the four questions that have been asked as part of the consultation. And what we aim to do is spend an hour or so in our breakout sessions discussing the four questions and then we'll come back and wrap up for 15 minutes or so, about 11.15, and get some feedback from both groups as to what each of you have discussed and each of you have heard.

The chat function is open and available on Zoom. It's quite difficult for us to respond directly. We are keeping a record of what the chat has said. And if there's anything that you want to put in there, any additions that are worth perhaps saying, then please do you use it. But please forgive me if I don't pick up on everything that goes into the chat during the course of this session.

The usual online rules about discussions apply. Please keep yourself muted when you're not speaking. Please raise your hand through Zoom if you want to come in and Anisha and I will try to bring you in, in the order that you raised your hands. It's sometimes difficult so, please, bear with us on that if lots of people want to speak.

And the final thing is that the first time that you speak, if you could introduce yourself to the group rather than do a round of introduction at the start which can take some time. The first time you put your hand up, please do introduce yourself and the organisation that you are representing.

I think that's everything that I need to say by way of introduction. As I said, we will come back and speak together for the last 15 minutes or so and I'll just set out at the end what happens next after this session. But for now, if everyone is clear on what's happening, we're now going to, as if by magic, to take some of you away to a breakout room chaired by Anisha. I hope that everybody gets into the right room. There will be some of our staff supporting in each of those rooms as well, the RTS staff supporting as well. So, RTS, if you could open the second breakout room and remove those that need to be removed please, and then we will carry on in my session in a couple minutes.

[The second breakout room opens and some participants are moved into that room. The transcript continues with the first breakout group]

Sam Hartley: [00:08:10] So, welcome everybody in my breakout room. Hopefully, essentially, I was given loosely the representatives from England and Wales, and the folks from Northern Ireland and Scotland have gone to the other room. I hope that sounds familiar to you and that you're in the right place.

So, without further ado, if everyone's clear on the purpose of today, I'd like to open the floor to the first question about the Terms of Reference, which is all about essentially, it's a fairly broad question. Do you think that the Inquiry's draft Terms of Reference cover all the areas that you think should be addressed by the Inquiry? So, thank you, Adam, to start with and then Joanne.

Adam Hill: [00:09:17] Thank you. Adam Hill, Deputy Chief Executive of Swansea Council representing Solace Wales. Four points, I think, really for me just to potentially add in. The first one is the potential effectiveness of public information including the coherent advice between UK and devolved nations, how that all works and how that message was relayed and updated as we went. The Terms of Reference refer to the management in hospitals and in care homes, in care settings. But I guess, is there something there around the management of joint working across the two sectors thinking about the disconnect that happened around hospital discharges to care homes that happened really very early on but was seen reflected throughout.

Something around local authorities in terms of the more general wellbeing, which became more apparent. What we did within our parks, open spaces, access to [inaudible], all the aspects that we have to manage whilst ensuring things like social distancing wherein – how do [inaudible] that feature within there.

And then the final bit for me is the potential impact of decision-making on care and support, for unpaid care as in disabled people that we're seeing. So, a lot of those decisions had an impact over that sort of mainstream area. So, four points, really, as a starting point.

Sam Hartley: [00:10:58] Great. Thanks, Adam. We'll go to Joanne next and then Jim afterwards.

Joanne Roney: [00:11:03] Morning, everybody. So, I'm speaking in my capacity as President of Solace. So, just to say that we will be submitting a written submission on behalf of a range of chief executives, some who are in the room today but many others who have wanted to contribute. So, a fuller paper will come at the close of today.

Just general comments, really, reflecting what the sector has said about the Terms of Reference. I think it's too focused on what's happened nationally and not enough about what was happening locally. So, we would like some thought given to how we can feed in local impacts and responses.

I think that the remit as it's set out is a little narrow. Some of the criteria listed misses some important topics not mentioned. So, for example, vaccination decisions, where do they fit in these Terms of Reference? We also think some of the criteria are a little bit too tight. So, for example, insufficient thought given to the impact on wider education and impact on young people. So, it wasn't just about impact on schools but examinations, mental health of young people and so forth.

The third point from us would be the need to consider the impact of decisions made, as much as how decisions were made. I think that picks up those issues around fuller inequality and equality impacts of those decisions particularly in local places, but also the relationships between national Government, local government, local resilience forums. So, that we know how decisions were made and the impact of decisions.

We think that we need to reflect a little fuller the impact of the devolved administrations and hopefully that will be picked up by the two separate groups. But the point was made around different communications and different messages and the impact of that.

We also think that the Terms of Reference should acknowledge what did work and to celebrate and record that there were some achievements and some good practice that was captured, not least the role of communities themselves in their response, which we think is slightly underplayed.

And a final point is whether recovery would be included in the Terms of Reference or not, as local government was mainly concerned with both immediate response but in parallel planning recovery. And there may well be some lessons learned in that.

So, those are my opening key points. And I've got colleagues on the call, no doubt, who will be able to add further details on each of those points. Thank you.

Sam Hartley: [00:14:09] Thank you, Joanne. Jim next and then Graham.

Jim McManus: [00:14:13] Thank you. And I'm here in my capacity as President of the Association of Directors of Public Health. I would agree with everything which Adam and Joanne have said. So, I won't repeat that.

I think from our perspective, firstly, ADPH has produced a briefing on issues we think are relevant to the Terms of Reference of the Inquiry. And obviously, we will be, like Solace, submitting a written response. I'll address that again here for reference.

I think there's a couple of specific areas I'd like to raise. The first for me is the collaboration between different organisations. Particularly, NHS England worked with local authorities on a number of things both from the beginning about communications and whether there are lessons to be learned there and through the vaccination programme. So, that's one important thing.

I think whether the national system is sufficiently connected at national and local level between NHS and non-NHS I think is missing from the Inquiry. And it's probably obvious from that that I felt there was a disconnect to the NHS doing something in parallel at some points.

I think there are other things about how well the Government understands local. You know, for example, the Department of Health didn't actually have an email list for Directors of Public Health for the first six months of the pandemic. So, I do want the Inquiry to look at how well national Government understands what local government did and its capabilities.

I think there is an issue about schools and education settings. I think there's also an issue about some Government departments who either felt they didn't have a response to make or actually got in the way of local responses because their priorities were not about health protection. And so, for example, DEFRA and DfE behaviour during this whole thing was, in some cases, actively destructive.

A final issue, and I think we do need to look at this, is the impact of pressure groups on national decision-making. The impact of groups that sought to minimise either the role of vaccination or the role of Covid or the seriousness of Covid and how they got into Government departments and made decisions. That, I think, does need to be looked at.

So, those would be the things I would add to this if we're going to have not just a narrative that tells the story but I think lessons for the future, for going forward. I'll stop there.

Sam Hartley: [00:17:36] Thank you very much, Jim. I have lots of hands up, which is excellent. I will try and keep things in order. Graham, I think you were next and then I think we've got Gary and Tom and then Mark after that. Joanne, I don't know whether your hand is a legacy hand or not but I will come back to you if it's up again deliberately. So, let's go to Graham.

Graham: [00:17:56] Okay. Thanks very much, Sam. So, to make some initial points, I think I want to reinforce what Joanne has said about the danger of the wording being too specific because I think there are some really good lessons that have come out that could be excluded from the current wording because it's quite specific about some areas.

And so, just as an example. We've talked about decision-making and the response to health and care sectors. Actually, the response is from a lot of areas that are outside of health and care that would be missed through this. So, if I just give you a couple of specific examples.

The effect on public transport, I think, is missing from your Terms of Reference. You've talked about travel and borders but I don't think that includes public transport. And actually, public transport has still been affected now. So, there are some really big impacts that could be missed by that narrowness of wording.

But also some benefits, for example, those incidental impacts on other diseases. The result of people wearing facemasks and increased hand washing and cleaning of surfaces. We reduced other disease transmissions that could be missed as a result of this.

Some other things like the improvement in relationship between public sector bodies as a result of working constantly in emergency mode actually has set us up for some real improvements in the way that health and police and local authority works together. And again, that could be missed by some of the narrowness of the wording.

And also, there is an issue for me about the value that was suddenly seen in other professions that weren't directly related to frontline. So, my example is environmental health. I know we've got the Chartered Institute of Environmental Health recognised here. But suddenly, environmental health officers became the most important resource that we could get hold of in June of 2020 and there weren't enough of them. And I think that sort of lesson could be missed out from the narrowness of wording.

So, I'd encourage that economic development, I think, which Joanne touched on in recovery. But actually, there are a whole series of economic development activities that took place during the middle of the pandemic crisis and then from recovery and local Governments rolling that. So, you know, I do think there's a danger of being as specific as you are in some of this wording.

Now, I realise you don't want to say we want a public inquiry into everything to do with Covid and everything that happened for the last two years. But the narrowness of this wording could mean that you exclude some really valuable lessons for the public sector, I think.

And one of the biggest ones that I want to mention is about volunteering. We saw a huge benefit from volunteering: a) for public services; b) for those that were affected by Covid; and c) for the volunteers themselves who got mental health and physical benefits. And actually, we've seen a lot of those people continuing to volunteer as a result of what they did in the first and second waves of the pandemic.

So, for me, it's about trying to make sure these Terms of Reference are broad enough to bring out some of that best practice. Some were short-lived but much of it is long-lasting.

Sam Hartley: [00:21:00] Great. Thanks, Graham. And I'll just say on your points about specificity, I think that is something we are definitely hearing a lot about around the country and in the online responses. And Baroness Hallett is actively thinking about the best way to – whatever happens to the Terms of Reference themselves and the words in that, the best way to reassure people that she will be looking at the more granular and more specific details that you're talking about. So, it is an active full process that she's going through at the moment. So, thanks for those comments. I think we have Gary next and then Tom.

Gary McFarlane: [00:21:34] Thanks, Sam. Gary McFarlane, I'm a Director in the Chartered Institute of Environmental Health. I'm not going to repeat. I agree very strongly with all of the points that have been made, in particular, the points relating to the local.

Just looking at the way in which the Terms of Reference are set out, I'm noting that there is a specific section dealing with both central, devolved and local. We wonder whether or not it might be worth having a specific bullet point around local to delineate and clarify – there's a very long list of bullet points that is supposed to mop up, as I read it anyway, central, devolved and local. And I note there is clearly a section on the response of the health and social care sector. We wonder whether it might be worth having a section that is specifically about the response of the local sector and actually setting out the bullet points and in a slightly clearer way. Colleagues on the call have already picked up on a lot of this.

The second point I want to make is, for me, there's a keyword missing from the aim of the Inquiry, which currently says examine the Covid-19 response and the impact of the pandemic, blah, blah, blah, and produce a factual narrative account. Now, I appreciate that it may be implicit within this but the word "effectiveness" is missing for me. So, surely, it is about examining the effectiveness of the Covid-19 response.

And then finally, just in terms of some of the more specific things that may be missing. And apologies, my screen has gone off here. I had a list of them prepared, so, just yeah.

We think that outbreak investigation is missing particularly in relation to businesses and the food supply chain in terms of food processing and delivery. The role of media and communications isn't there nor are public perceptions on behaviour and how that was impacted by a lot of the Government messaging.

Timeliness of official guidance, which I know was a real issue for colleagues working on the frontline of this. Jim has mentioned residential school settings and I would agree with that as well.

And finally, for us, this is not just about public health. It also needs to include, we think, health and safety. So, it needs to be broadened out to not just look at the public health context but also the health and safety context and in particular, the role of the HSE, which at times conflicted with what was trying to be done on the ground to achieve compliance. Thank you.

Sam Hartley: [00:24:41] Thank you very much, Gary. I think I put Tom next and then Mark afterwards.

Tom Riordan: [00:24:47] Thanks, Sam. I'm very much building on the comments made by Joanne, Graham and Gary in particular. I share the concern that the overall bullet point

descriptors in the first section are too restrictive and risk missing the wider issues that were having to be dealt with in the way that things happened.

I speak as a Chief Executive who's one of the so-called R9 group. But also, I worked for the Government, for the Department of Health in the summer of 2020 helping to put together the local outbreak management arrangements. And I think that's where, as Jim was reflecting, to really understand what happened particularly in the early days, you've got to be able to understand the distinction between not just Whitehall departments but also NHSE's role and PHE's role and the way the dynamic in relation to those organisations played out at the centre, which was one of the contributory factors to making it very difficult at times for local government to respond, I would say.

So, I would like to see a bit more assurance that that nuance and that how the local and the national work together is going to be reflected. The reason I say that is because when we had the Health Select Committee, the joint Select Committee report that was done by Jeremy Hunt and Greg Clark, if you read through that report, there's very little reflection of the local government role. And I think to truly understand what happened in the pandemic, you've got to really make sure that the local government role is reflected. So, that's my biggest concern.

And there's also a nuance around regional mayors in certain areas of the country as well, which needs to be picked up. But I wouldn't want that to dominate in a way that sometimes when Whitehall looks at these things, they assume that if they talk to the mayors, they've talked to local. It's absolutely the other way around on this one.

On the second area that I have some concerns about, it's about inequalities and disparities where it's well covered in the lessons learned, which is fine. But I'm concerned that it isn't well enough covered in the first section. And if you don't, in your analysis, have hard-wired in taking account of those issues, then I think you run the risk of not, again, fully understanding what happened.

So, just one example, we don't have technology in here either. I'd like to see rather than availability and use of data and evidence, I'd also like to see technology added in there because if you were a family who basically had three or four kids in one room most of the time and you're having to do education and all you had was access to one phone without data and you didn't even have a laptop, then it's a completely different experience to a family that did have those things. And I think there's a risk that we miss that and I don't think at the time there were enough, sufficient policymakers and decision-makers at the centre who understood that that was happening on the ground in communities.

And then there's obviously all the issues around the BAME community and the work that Kevin Fenton did early on that I hope will be picked up very much in this.

And then the final point was just around nuance really, which I think Joanne and others have mentioned, that the education element runs the risk of restricting too much. And I think that's maybe been some of the reaction that you've seen from people saying, why aren't children in here? I think there's a need to have confidence from the start that communities of interest, of which the BAME community, children and young people, people are going to have confidence that's going to be covered.

And so, I understand, I think, why you've tried to restrict but I think you should just let that go a little bit to give that extra assurance to people. And I would say the same for mental health. I think there's always a danger that we're missing the impact on mental health. And so, I would encourage you to try and find a way of reflecting that and give assurance to people that that is being covered. Thank you.

Sam Hartley: [00:30:11] Great. Thank you very much, Tom. I think we've got Mark next and then Robin and then Ali. And I know there are lots of other hands up as well. So, I will try and bring you in after that. So, over to you, Mark.

Mark Norris: [00:30:22] Thanks, Sam. Mark Norris from the Local Government Association. I'm going to echo, I think, a lot of what's already been said before. So, probably the key starting point is the one that Tom was just making as his initial point, but others have also made, which is about balancing the Inquiry's Terms of Reference about the focus on national versus local in all of this. And tied to that is the point that Jim was making earlier on about the interaction, and Tom did as well, the interaction between various Government departments and the way they worked together but also the way that they worked with local governments in all of this.

And our sense is that there was – certainly, the feeling working with people like Jim and Tom over the last two years was that there were real struggles at times. I would echo Jim's points about the engagement with DEFRA was particularly problematic at times in the sense of particularly when it came to food parcels and things like that and trying to sort out how we could support people who were self-isolating.

So, there was that particular focus there. And I'm really keen to emphasise that we need to do more in terms of looking at the local in all of that.

There are a couple of specific things that didn't seem to be covered by what you set out in the Terms of Reference at the moment. But these, again, echo points that others have made. So, fully agree with Tom and others about the impact on mental health and wellbeing, also around health and equalities and also with Graham about the use of volunteers.

An additional bit I think we'd add to what Graham was saying was that bit around what was the impact in terms of the decision to ask people to come forward, to volunteer for the NHS and support the NHS. And how did that impact on local voluntary sector capacity at a local level, much of which local authorities rely on already and use to deliver food and to provide support to vulnerable people. And I think that's had an ongoing impact that we need to look at and it potentially has an impact in terms of going forward about the capacity of the volunteer sector.

One specific bit that we were involved in very early on, which again, doesn't seem to be covered was the repatriation of UK nationals in the very first stages of the pandemic. It impacted only on a few local authorities at the time but had a significant impact at the time. And again, the question about how that worked, the self-isolation process in terms of putting people in hotels and that particular set of responses from Government would also be [inaudible].

And then again, what is not explicit in terms of some of what you've set out in the Terms of Reference, it'd be helpful, I think, to, as others have said: one, look at public communications and the timing of those communications and also, the timing of the way that announcements were

made and also, how that tied in as others have said with the development of the vaccine programme and also dealing with those who were resistant to the idea of a vaccine programme and how that worked.

Very much echo everyone's comments around the impact on schools, education, children and young people in all of this to which I think we would also add specifically a bit around the requirement for young people during the course of the pandemic coming into the UK, whether they were UK nationals or others, to isolate in hotels and what implications that had for safeguarding and wellbeing of those children and young people because that became particularly problematic from our perspective, I think, and for member authorities.

And when it comes to social care, again, echoing comments from others around the need to broaden out what we're saying around and looking at in terms of there. In particular, I haven't caught anyone talking about it yet but for example, those in receipt of direct payments, those getting home care and the providers of home care services in all of that. And there's also a bit around how did the redeployment of NHS staff who were working very intimately with local authorities pre-pandemic, such as school nurses and others, how did they affect this kind of redeployment. Those also impact on the delivery of some of what local authorities were responsible for and also, for example, around children's wellbeing.

And like others, the LGA will also be making a written submission, which will cover some of these off but those were some of the key points we've taken so far from looking at the Terms of Reference.

Sam Hartley: [00:34:54] Mark, thank you very much for that. So, I'll go to Robin next and then Ali. And if I may, I will just jump to Daniel first because we haven't heard from Daniel before and I know that Jim and Joanne have got their hands up too. So, let's go to Robin.

Robin Tuddenham: [00:35:08] Thanks, Sam. I've only got three points because colleagues have made points very powerfully that I also had. I'm Robin Tuddenham, Chief Executive, Calderdale Council, West Yorkshire. I was co-Chair of the LRF in West Yorkshire for most of the pandemic until late last year. So, I've got a particular focus on that.

The first point is I think at the beginning, you talk about preparedness and resilience. I think it'd be good to be explicit about preparedness and the resilience arrangements and to ensure that we learn and think about, first of all, the lack of clarity about what was the role of LRFs.

Secondly, the lack of clarity, the relationship to health and care resilience arrangements in LRFs and that we learn from that. And also, the lack of understanding outside the CLG, as it was then, in Government departments of the LRF. So, I think there's a whole thing about resilience at a local and sub-regional level, that's one thing.

Second point, I'll give a suggestion rather than raise a concern. I think picking up what other colleagues have said and building on particularly Joanne and Tom, I think we should be in the point two, the Inquiry will, I would suggest, the relationship between national, regional and local decision-making, those exact words because I think there are so many examples but the tier conversations would be a big one, yeah? The madness of all of that, shielding through food

supplies, decided in Whitehall about who was going to get something in Bradford and what food they're going to get. So, all of that stuff.

So, just how we can think about, not only the awareness, but the connection between because I think we could do better was because we didn't work as a system. So, I think that's the second thing.

And the final thing, and probably for me, the biggest, and I would say particularly as what Joanne and Tom said, that we build in the disparity of impact at the beginning in terms of the impact on the decision-making across all of this. And don't just add it as a bullet point at the end. And I think particularly on the section of the economic response, I think it's quite weak around it's saying how we administered the business scheme rather than thinking about the economic impact of the people in types of work that were going to be disadvantaged around race, around poverty, around protected characteristics in all senses and the disparate impact of wider key workers and what that has meant in our places and the recovery that is taking us to improve from that.

So, aside from decisions around restrictions three hours before [inaudible]. So, there's all of those kinds of things. So, I think, there's something about the decision-making, also the economic impact, not just about how he administered the grant system. Thank you.

Sam Hartley: [00:38:04] Thanks, Robin. Yeah, that's a really powerful point about the impact of inequalities and it not just being in the bottom there of the Terms of Reference. So, thank you for that. Ali next and then Daniel.

Alison Griffin: [00:38:17] Yeah, thank you. So, I'm Ali Griffin. I'm the Chief Executive at London Councils so, here in this capacity. But I was a borough chief exec for most of the pandemic too so probably a bit of that will play out.

I think Robin's last point in particular, and I know everyone's voiced that in different ways, but that lived experience of those disadvantaged communities that have been disproportionately impacted, I think, that's going to be key to this Inquiry that they recognise and see themselves in it and their experience in it and that we take some learning from that because, you know, in London, but not just in London, that has been really marked.

So, that point that Graham has made about drawing narrowly and we understand why, but we are at real risk of missing out whole stories and experiences of people in doing that in a range of ways. So, I think, looking at the whole actually of the first section of the Terms of Reference and the health and care bit again in light of that, I think, will really help to strengthen them. And I think that will be critical for the success of the Inquiry.

To go to some more specifics, there are things that were increased risks as a result of the pandemic. Safeguarding is one that Mark picked up in terms of children arriving and being in hotels but it's wider than that. So, there are safeguarding, increased domestic abuse risks, other increased risks, health risks as a result of the pandemic. So, framing something in that way that gets the Inquiry to explore some of those issues, I think, would be helpful.

And then communication. So, we've talked about decision-making at the various levels: national, regional and local. But there were whole swathes of work and exploration around communication,

engagement with communities, trying to get messages across in different ways. There's got to be some great learning in that and some great success stories, but also where it was conflicting and we really confused the public. So, that area of communications and media were critical, I think, for again, exploration by the Inquiry but at all levels, not just at national.

I'll stop there because other people have covered everything and we want to get to some of the other questions too.

Sam Hartley: [00:40:48] Thanks, Ali. I was going to say on your first point, I absolutely, you know, take the point that you and Graham and others have made about trying not to make sure we exclude some of the experiences that people have had. And actually, that goes to the heart of the fourth question in the consultation, which I do want to make sure we have time for. But so, thank you for pausing there and we'll come back to that. So, Daniel next and then we'll come back to Jim and Joanne.

Daniel Hurford: [00:41:23] Thanks, Sam. I'm Daniel Hurford, Head of Policy at the Welsh Local Government Association, and thanks for the opportunity to contribute to this. And it's good that there's a focus in the Inquiry on local government and everybody's been able to put their point across because there's clearly quite a lot for the Inquiry to consider around local government's role.

And I think it was Tom mentioned that perhaps, UK Government or parliamentary inquiries haven't fully appreciated or given enough emphasis on local government's role; it's slightly different in the Welsh context because we work very closely with the Welsh Government and the Welsh Government and the Senedd have got a very good understanding and appreciation of local government's role throughout the pandemic, the response and the recovery.

And there've been several inquiries into this matter already. And it was on that point, probably not for this specific session, but just a question really for Sam later on around how the Inquiry is doing some initial evidence gathering of all these previous inquiries that have been undertaken. There must be ten or a dozen or so in the Welsh context, obviously, in parliament, and Scotland, Northern Ireland as well.

And touching on the inequalities point, which has recently been made, which is key, there've been several third sector-led or independent-led inquiries around race, around disabled people's experiences. So, there's a wealth of information and evidence already available to the Inquiry before you really start getting into the work.

But just colleagues have really covered pretty significantly everything we were going to pick up on. In particular, there's no specific reference to the role of public transport. Specifically, education is much, much broader than places of education. I think what Joanne mentioned, it's around exams but also wellbeing and mental wellbeing of young people and children over the last two years as well.

There's a reference to PPE specifically around the coordination and procurement of supply of PPE but that's sort of a subset of health and social care. But it's a much wider issue more generally around procurement of PPE and how best that was undertaken but also the availability, supply and coordination of PPE across public services. So, it wasn't just health and social care. It

impacted on all public services, so schools, public transport and other local services as well. So, that's a critical point.

The availability and use of data and evidence, presumably the emphasis on that is around decision-making but I think it's really important that the Inquiry looks at how data and evidence was shared. So, both in terms of local, regional impact of the pandemic but also sharing of individual personal data as well. There have been a couple of references to shielding. And that was a big issue early on in terms of how public bodies, Governments and their agencies were able or weren't able to share their data, which would have made decision-making and service delivery much, much more efficient.

And then just finally, obviously, we're speaking from a devolved context here, we are conscious and there's a couple of colleagues, Adam has already contributed, we are conscious that the experience in the devolved setting will have been different in certain areas than elsewhere in England, in Scotland, in Northern Ireland. So, it's important that there's an appreciation for the Inquiry around how the relationships and roles of local government in England or Wales or Scotland and the relationship with Government, whether that's devolved or central Government was different at different times. So, I think that's an important learning point.

And just very much finally now, the focus on not necessarily celebrating the good practice but pointing out actually what's worked and what's improved over the pandemic, to point to lessons for the future because there has been some excellent work particularly from the local government community in this. And so, I think that that needs to be recognised in terms of lessons for the future. Okay.

Sam Hartley: [00:45:15] Great. Thank you very much, Daniel. I'll come back to Jim and then Joanne now. But before I do, if I can just ask you to think about the other questions as we move on through the session. I do want to make sure we have enough time to talk through question four. I think that's something that Baroness Hallett is really, really interested in and I think, you, in your sector, will – I hope – have lots of good thoughts and ideas about how we can reach people across the country.

But before that, if people can think about question two and three, so essentially, is there a way that we can identify topics to look at first given the scale and the scope of the Inquiry? And then, the third question, although it's phrased as should we propose an end date for the public hearings, really the question there is about pace and how quickly the Inquiry should be proceeding, the trade-off between breadth and depth and the forensic approach to looking at everything. And that ability to potentially do some interim reports and making an impact quickly. So Jim, I'll come to you now.

Jim McManus: [00:46:20] Thank you. A quick comment. I mean, if I can echo what everybody has said, especially Tom, Gary, Robin and Mark, fully agree with all of their comments.

There is a point for me about environmental health and I declare an interest because I'm an honorary Vice President of the Chartered Institute of Environmental Health. But what I'm saying there is an Association of Directors of Public Health policy that we do need to look at the way environmental health has been almost decimated and in some ways excluded from the health

protection system in England. Wales is slightly different but if we are going to go back into another pandemic, and we will, the role of environmental health is going to be absolutely crucial and not less important, in Directors of Public Health, I can't do my job without environmental health officers and environmental health. And actually, they can't do their job without me. So, there is a mutual interdependence across the system that I don't think Government ever got. And I think that needs to come out.

To turn then to question two, topics you should look at first. My money would be on coordination relationships and behaviours, the various national players mentioned by Tom. And I think the first three months of Covid response is probably useful there because, actually, I think that sets a scene against which everything else can be looked at. I think there's also some crucial stuff about the preparedness of national Government, you know, not having email lists, for example, that I think would be quite helpful.

In terms of an end date for its hearings, would it be ambitious to say you should finish the hearings within 18 months so that you can get on to the reports because I think if this Inquiry lasts for five years, the next zoonotic global health emergency will be here before the Inquiry is finished.

The reason I say what I say is because the 2009 pandemic, which I was very heavily involved in as Director of Public Health for Birmingham at the time and the 2016 exercise picked up the issues of culture, understanding between national and local and the mechanisms and how ready we were to kick in. And I think that spectacularly failed during the first months of this pandemic. So, that would be why I would say we should do that.

I think the other thing is there are a lot of people that they have an axe to grind and it's an ideological one about we shouldn't have done anything with schools. Schools should have stayed open. We should never have had lockdowns. Vaccines are bad. And there's a couple of groups like UsforThem and others who are in there.

They have an agenda, which they have pushed alongside HART and I do think the Inquiry needs to take a view on whether it is going to listen to the scientific consensus and from whence that scientific consensus comes. And for my money, it's SAGE because that's the Government's advice. You need to have one version of the scientific truth here and not 97 because otherwise, it will just end up in a "he said, she said, they said" about whether vaccines work or not.

I'll stop there. Hopefully, that helps. Happy to put effort into this if you need it.

Sam Hartley: [00:50:39] Great. Thank you very much, Jim. I'll come to Joanne next and then I will abuse my position as facilitator and ask Louise to jump the queue because we haven't heard from her, if that's all right. So, let's go to Joanne.

Joanne Roney: [00:50:51] Okay. Thank you. So, a couple things we haven't mentioned and also, I think, goes to question two. I would support that we start by asking ourselves the question, did we miss an opportunity to use the established infrastructure to its best effect. And I think that goes to the point around the decision-making structures between local resilience frameworks, NHS emergency management arrangements, the regional, the local. And I do think it's important that

we start with understanding early on whether we did have the right arrangements in place had we done the right preparedness.

My second point would be the one that a number of colleagues have made but particularly Tom. I don't think it's enough to just address inequalities or equalities through protected characteristics. I think we really need to think early on about the impact on those who are facing multiple inequalities, those large families in densely populated households who were predominantly Black, Asian or minority ethnic groups and there were regional disparities around those pressures that perhaps need to be brought out. There will be other multi-complicated groups and I think the earlier we identify and surface that, those circumstances and address them, the better, for me.

I think, for me, we've also got to look at health in a wider context. I think Graham may have made it earlier but the impact on our GPs, the impacts on dentists. It was much broader than hospitals and sometimes, that did kind of over-dominate and perhaps, we should think broadly about the wider health system and those wider determinants of health.

I was reflecting on a position that we debated in Manchester about the assessment and the policy arranged around age cohort prioritisation for vaccines when I represent an area where some 50-year-olds have worse health conditions than 70-year-olds in other parts of the country. And yet, there was no scope for local flexibility or indeed opportunity to influence those cohorts to reflect our local circumstances. That's an example; there will be others.

Finally for me, a couple of things we haven't mentioned that I'm not suggesting these are necessarily priority areas but should be within scope of our Terms of Reference. One is death management and the role of faith groups in particular and death management at mortuaries. I think we should, at least, have that down in the Terms of Reference.

And homelessness, we've talked about the resettlement programmes for asylum seekers that were going on. But actually, there was good practice here particularly around rough sleepers. And again, what have we learned from that and what didn't go well around that might be worth looking at.

So, those would just be a couple of extra points that I would put in somewhere in the Terms of Reference. But I would start with the priorities for me are those two categories that I mentioned at the start.

Sam Hartley: [00:54:26] Great. Thank you, Joanne. I will go to Louise next and then Gary.

Louise Davies: [00:54:30] Thanks, Sam. I'm Louise Davies. I'm Director of Public Health Protection and Community Services in Rhondda Cynon Taf Council but I'm here as Chair of Directors of Public Protection Wales. So, I have a particular interest, I guess, in the environmental health comments that have been made.

So, just in terms of building on some of what Daniel has already said about Wales' context, I think the relationships in Wales did lead to quite different responses. So, it would be useful to understand particularly how test, trace, protect and the role of environmental health and local government in delivering that will be considered within, you know, the Terms of Reference or the work of the Inquiry.

I think that is an issue as well is quite a section on backlog of needs and lots of needs, as has been mentioned by others already. I think recognition already that environmental health officers were taken from normal business because there aren't enough environmental health officers across the country. You know, there needs to be some recognition and consideration may be of how that recovers as a service in terms of all the normal ways that determinants of health were getting health protection work that those professionals would have been doing. We already mentioned DEFRA and HSE, Food Standards Agency expectations during the pandemic as well as now as we recover - how that relationship played out in enabling environmental health services to make choices.

I think there is a need – it's good obviously, that – I know it's not the Terms of Reference for the Inquiry but I think when we talk about recovery, I think there is an aspect that from lessons learned that we need to think about those legacy systems, what the health protection system in both the devolved administrations because obviously, local government doesn't have public health within it. So that is different to England and some of that, as we get into the granular detail, would be interesting to tease out. But I think there is something in that around what the impact of not having particular key professionals in the workforce, what impact that had and what can we learn from that really to enable us, as Jim has said, to plan for the next pandemic or next major outbreak or major incident that those professionals should be key. So, I just want to make those points. Thank you.

Sam Hartley: [00:57:16] Great. Thank you very much, Louise. And Gary and then Chris.

Gary McFarlane: [00:57:25] Thanks, Sam. Well, first of all, just to echo the comments that Jim made. I've actually put something in the chat about that. But to come to the questions around any sense of an order in terms of the Inquiry and also should there be an end date, on the latter point, I would support what Jim had said. I think that it's important that there's a balance struck between rigour in terms of the evidence gathering but also timeliness in terms of the reporting because if it takes five years, I absolutely agree with what Jim said, the next crisis will be upon us long before then.

And so, it's critical, I think, that the lessons and the learning from these are investigated and reported sooner rather than later but bearing in mind that it has to be proportionate to the scale of the task.

In terms of the order and priority, we think that it's critical that the people that had been directly affected by this are heard first, in other words, people who suffered bereavements, disadvantaged communities, the BAME community, they need to be the top of the priority list and the professional and scientific parts can follow. Thank you.

Sam Hartley: [00:58:57] Thank you very much, Gary. Chris, before I ask you to come in, if I can just ask people to respond to the fourth question. We've got sort of 30 minutes or so left. Gary, you've already given us some thoughts. I think they cover both the priority and order but also that sort of listening side of things. And just to set the context, as you will all know, statutory inquiries are a legal process. It involves the calling for and collation of lots of evidence. It involves lots of lawyers. It involves lots of hearings that are quite intimidating. Baroness Hallett is very, very keen

to make sure that there is a parallel process that helps inform her that is more accessible and allows her to hear from, as you said, Gary, those that are the most affected, whether that's through bereavement or through inequalities or through other matters, economic matters as well. Any thoughts that you might have on that in the last few minutes would be really appreciated. So, not necessarily on that, Chris, but I'll invite you in now.

Chris Llewelyn: [00:59:54] Thanks. I'm Chris Llewelyn, Welsh Local Government Association. My colleague, Daniel, has made most of the points that we would want to make. Can I say, I agree with almost everything that's been said? I think this has been a useful exercise. Thanks for the opportunity to comment and I think it's been a very informed discussion.

I think much would depend on the way the Terms of Reference are interpreted. And just as in the preamble, there's a reference to avoiding duplication. I think there is something to be said as well in terms of following the evidence and pursuing lines of inquiry as they arise, which is very difficult to pre-empt. Any good piece of research inevitably does that.

And some colleagues have mentioned the differences in governance in Wales. And I think that the issue of governance throughout the Covid period has been important. And for that reason, I think that the learning lessons section shouldn't be restricted to preparations for future pandemics. I think we can learn lessons from this experience that inform the way public services are delivered more generally.

And within Wales, certainly, I think governance has improved. And that is currently informing the way we respond to the Ukrainian humanitarian crisis. So, I think that my substantive point is that we need to look in a more expansive way other than lessons and not restrict them to future pandemics.

And then lastly, in terms of the timeliness, I think there clearly is a balance between the rigour of the Inquiry and the timeliness of learning lessons but [inaudible] to it as well.

Sam Hartley: [01:01:38] Chris, thank you very much. Tom next and then Mark.

Tom Riordan: [01:01:46] Thanks, Sam. I was just going to make just a couple of specific suggestions to try and help, and then make a general one about your point about the approach that you want to take to try and make sure all voices are heard.

First of all, I wonder whether the really accurate wording that Robin described about how the national, local works together I think would really benefit from being a bullet in the first section in relation to central, devolved, local decision-making where we've only got intergovernmental decision-making listed specifically. I think that's where we need to add. And it's also in Government. It's within Whitehall and I'll come back to that.

And then the other suggestion is at the end, it sort of implies in the way that it's laid out that the Inquiry will just take account of inequalities as said at the start in the lessons learned and I don't think that's what's intended. So, I'd wonder whether that section at the end needs to be at the front and then it can make those points upfront that can sort of settle people that they are going to be taken into account as the rest comes.

And then my other point about the parallel processes, I'll just make a point that I firmly believe [The speaker has asked that this contribution remain confidential to the Inquiry.]

Within PHE lay the solution to a lot of how we were going to get national and local to work together most effectively through the regional teams. NHSE took a very firm decision and the Government backed it to protect the NHS. And that drove – those two things drove, from that point, a lot of things that happened, which were critically important and probably led to things like what happened to the care homes. And in some ways, it was odd that Test and Trace appeared to replace PHE effectively but not only to replace PHE but to almost take the space of NHSE in the decision-making and the formulation of policy. [The speaker has asked that this contribution remain confidential to the Inquiry.]

I think you need that insight in the Inquiry somehow. So, I don't quite know how we pull it off but between us, we need to make sure that those points are able to be made not in a political way, in a very sort of objective way that we – exactly, Mark, I'm sort of exaggerating a little bit to make a point with what I've said but I think that's a really important thing that I think you need to maybe take away and think about whether there's another element to that in formal parallel process that can include unelected people who can't make statements that are going to be seen as highly political.

Sam Hartley: [01:05:53] Tom, thank you very much for that and your honesty. And I know that if Baroness Hallett were here, she would be supporting your ability to do that and encouraging you to do that. And we will certainly take it away and see how we can build in this sort of level of engagement how we can build in a space for you and others to do exactly that. She wants to hear from everybody and she wants to hear the unvarnished truth from everybody. And she has been saying that to families around the country as well. So, thanks for the point, very well made. Mark is the last hand up at the moment. I hope others have got – we've got five minutes left – have got one or two comments that can be made about how we listen to people around the country. But let's go to Mark.

Mark Norris: [01:06:34] Thanks, Sam. I'm just going to run quickly through four, three and two in that order partly because it's easier to do. And I'm just going to echo Gary's point about saying that it's really important that we do hear from the voices of those most directly impacted in all of this. And I think, actually, the Manchester Arena Inquiry and the Grenfell Inquiry provides you with a model on which to build to be able to do that. So, there's something there to look at.

On three, in terms of the planned end date for the public hearings, I think that Jim is right. It's difficult but we need something relatively ambitious and it needs to be quite constrained in terms of timing. And I like the idea of 18 months because that gives you – it's probably going to be a tough deadline to meet. But it gives you a framework to produce something that, as Jim and others have said, means that we don't get overtaken by other events and other policy developments and things happening elsewhere.

And then, related to that, I think, it's definitely worthwhile chunking up the work of the Inquiry into thinking about some interim reports as we go forward both in terms of the Manchester Inquiry and the Grenfell Inquiry. There have been some useful interim reports that have come out that have

helped both shape the policy, directions of national Governments at a particular time, and also mean that you got more timely responses from Government to some of the issues that are being poked at rather than waiting to the end of the process. You've got things they can be working on and doing the policy development before we get to the end of the Inquiry.

And then in terms of issues or topics to look at first, I haven't got a definitive list. But I think my reflection on this one is that we are almost going back to ground zero at this point in time in terms of where we are in terms of the Government's approach to living with Covid. There is an issue about, and we've seen it from Chris Whitty and others in the news over the last couple of days saying we may not be in a scenario where we can do without some of the mechanisms that we've had over the last two and a half years in terms of protecting the vulnerable in particular from the effects of Covid.

So, are we going to be back, come this winter, in a similar situation to where we have been in some of the scenarios of the last two years? So, actually, some of the things that might be helpful for the Inquiry to look at first would be the points that people have been making about that interaction between national and local and what have we learnt over the last two years about how to design the support system that supports local people best. And our reflection from the LGA has been that that's worked best when it has been co-designed by central Government departments with local authorities.

Some of the people on this call were involved in some of the stuff that DWP did around providing support to people who needed financial support and assistance to self-isolate. That was done at pace. It was done with the centre. And actually, I think we concluded it. It worked very well as a result in terms of coming up with a mechanism that works. And I think there are some positives to learn from all of this that we've had coming out about how you can design support structures and services going forward.

And it would be useful, probably, to reflect on some of that because I just have this suspicion that we're going to be back having some of these conversations possibly later this year, possibly next year about how do we support and how do we deal with perhaps a new variant of concern. And it would be helpful if the Inquiry was already in that space and looking at that and potentially thinking about an interim report, which could then steer Government in the right direction as we move on through the process of the pandemic.

Sam Hartley: [01:10:11] Thank you very much, Mark. Gary and then Ali. I think we'll be prepared in a couple minutes to be joined again by the other group. But until then, let's carry on. Gary, if I can ask you to be brief-ish.

Gary McFarlane: [01:10:26] Thanks, Sam. I will be very brief. It's really specifically in relation to your question four, the design and execution as to how to reach bereaved communities. I think it's critical that you use local capacity to do that. It's a little bit like – forgive me for saying this – the completely disastrous contact tracing system that should have been rooted in the local from the very start. And local authorities are much better placed to get to some of these people than some sort of national effort will be. That's it.

Sam Hartley: [01:11:01] Thank you very much, Gary. Thank you for the offer and I'm sure we will come back to you on it. Ali.

Alison Griffin: [01:11:08] Echo what Gary has just said. And I think, as Joanne and the chat have said, we have had both the Arena and Grenfell inquiries and learning from how they – especially for Grenfell, the pen portraits of those that died. There's thousands in this case but giving some time to that upfront, I think, is really critical for, again, the credibility of the Inquiry, listening to those bereaved that couldn't be there at the end, I think. So, there's those different stories.

But whilst we've been talking, actually, something else came to mind about frontline key workers, whether they were in the supermarket, the park, or in care and health service - how are their voices going to be heard through this? And again, thinking from Tom's point of view, not all of them will want to be doing that in that legal forum. So, the parallel process, I think, needs to be – we think about a bit wider in terms of, yes, absolutely, the impacted communities directly but, also, I think it would really add to the richness of the Inquiry if they heard from those in the widest possible sense that played their part in the response and the impact that's on them now as a result. We haven't talked about burnout today but we know that's significant.

Sam Hartley: [01:12:39] Yeah, great. Thanks, Ali. And Adam, do you want to come in with the last contribution because I think our other colleagues would be joining us again?

Adam Hill: [01:12:48] Thank you. Just really echoing that on a bit further [inaudible] utilise local authorities' existing route already set up. Key local authorities were already supporting massively with our voluntary services [inaudible] have that voice. That would be just making sure [inaudible] existing groups, not set up lots of new groups so that we can really tap in. So, use us as best you can in order to do that, facilitate a link and coordinate the way you can.

Sam Hartley: [01:13:23] Adam, thank you very much. The connection was slightly, slightly dodgy there but I think we got the majority of that. So, thank you for that contribution.

[All participants are brought back into the same room again]

Sam Hartley: Welcome back to our colleagues who were with Anisha in the other breakout room. Can I just get a nod from RTS that everyone is back in the room or Anisha that everyone is back with us?

Anisha: [01:13:50] I think it looks good to me, Sam. I know that Aiden has to drop off anyway to chair another meeting.

Sam Hartley: [01:13:58] Okay. Great. Thanks, Anisha. Thank you, RTS colleagues. So, what we thought we'd do is just sum up a little bit, as much as we can. I'm not sure that I can do justice to the conversation that we just had in our breakout room but there are a few points that I wrote down. This isn't exhaustive, obviously, and we've got the transcript. And most of you, I think, have committed to write on behalf of your organisations before the end of the consultation period and we're grateful for that.

The strong messages that I got from our breakout group - and sorry, Anisha, I'll come to you after this - there might be a bit of repetition, I suppose. First of all, the specificity of the language in the Terms of Reference, and in particular, the way in which the relationship between central, local and other agencies, devolved as well, worked. And we got actually a really helpful, very specific piece of language that we could potentially look to put in the Terms of Reference from our group, which we've captured.

Other key things that came up for me, first of all, the issue of the impact on inequalities and whether the sort of catch-all at the end of the Terms of Reference is enough to reflect the disproportionate impact on certain communities that Covid has had over the last two years.

Really interesting for me, this one, was the role of environmental health or rather the sort of the lack of a role at the start and the lack of funding and the lack of importance of the role of environmental health at the start of the pandemic and the need, the reliance on colleagues in environmental health profession throughout that.

This has come up quite a lot in some of the other roundtables but actually, it's good to hear what has gone well in the last two years. What new ways of working have we established? What new ways of using data and technology, breaking down barriers between different Governmental and non-governmental organisations and how we can capture that and make sure that we keep hold of it because of stuff that's come out of the pandemic as well.

And that leads me on to the point about timeliness. And I think the points are very well made in our group about not waiting for five years before we issue any recommendations because something else like this is going to come along, whether it's another wave of what we've got at the moment next year or whether it's something very similar in sort of three to five years' time. And being prepared, learning the lessons quickly about that and looking at interim reporting as well.

And then finally, on the point about question four, we spent some time talking about how we reach everybody across the country that's been affected and in what order we do that. Quite rightly, and no surprises to hear about using the local networks that are already there, using the strength that local government has with its communities, looking to hear from the frontline workers as much as possible and looking at those that have been most impacted, whether it's through bereavement directly or whether it's through the impact of inequalities in the country and looking at that first.

So, really, really good strong messages from our side. Apologies to my group members there that I didn't capture everything and, hopefully, I did it justice in a couple minutes. Anisha, can we come to you to hear as well a readout of how your session went as well?

Anisha: [01:17:17] Yeah, also an incredibly rich and helpful discussion. So, there's loads of details to capture. And as you'd expect, some overlap with what you've just covered so I would try and pick out the themes that were maybe additional to what you've said.

So, I think in terms of the Terms of Reference themselves, a point about the health and care scope needing to look at community care and frontline, you know, GPs, which I've also heard before in other meetings. A really interesting point about enforcement, compliance and public behaviour, given how critical all of those were. So, both looking at local policing but also the behaviour change that was needed from the general public.

I think another thing that I have heard before but came out today was about the role of the media given the importance of communication. You know, that's something that we will be looking at.

And then, the point about intersectionality when you're thinking about different groups that have been affected and looking at individuals and the different ways in which they may have been impacted or harmed in terms of scope.

In our group, there was support for the Inquiry setting an end date for hearings, but a sense that perhaps, that shouldn't be too rigid because you wouldn't want to lose out on hearing critical evidence because of that timing, and definite support for interim reports and potentially on packages of subsets of the scope of the Inquiry.

And I think a really important point, which probably echoes what you were saying about the people and the system still being in recovery and under a lot of pressure. And that impacts, I guess, both on, of course, people to give evidence to the Inquiry but also particularly what I heard was the need for timely lessons that can help people as quickly as possible.

On the last question, really, loads of helpful suggestions. One thing I thought was we tend to focus on harm and the terrible loss that people suffered but people were also saying there were people whose lives were saved by NHS interventions and by vaccines for example, so can we hear from them?

Also, I think, a point around physical and digital means of talking to the Inquiry, you know, thinking carefully about those in digital poverty and making sure that those in more rural areas are able to access us.

And I think you probably covered the point about key workers and the role of the third sector in helping us reach as wide a range of individuals as possible. So, I think that's it from us. Thanks from me to all of my group.

Sam Hartley: [01:20:19] Thanks, Anisha, and thanks everyone for your participation today. I feel I have to say a few bits about what happens next. So, as I mentioned, I think you all know the consultation is open until the 7th of April, next Thursday. And thank you to all those that have committed already to write to us with your organisation's views. Please do share with your membership and your wider sector the fact that this is open. And we do genuinely want to hear from as many people as possible, the sorts of things that you think should be covered in the Terms of Reference, how we can reflect that back to the Prime Minister.

I mentioned in my breakout group that not everything can make its way into the Terms of Reference. I think we have to be realistic about that. But as I said to the people in my group, Baroness Hallett is very keenly aware that she's hearing lots and lots of really good and really well made and actually really good suggestions that she wants to act upon. And we're just thinking about the best way to reflect that back to the public and to the professionals about what sort of commitments she can give to make sure that people understand, she will be looking at lots [inaudible] even if they don't go into the Terms of Reference in terms of that level of specificity. So, we're just thinking about the best way to communicate that at the end of the process.

After the 7th of April, obviously, she needs to do some analysis and some thinking about what she thinks needs to go into the Terms of Reference. Just a reminder that these are the Prime Minister's Terms of Reference. They're not ours. So, they weren't drafted by us. They were drafted by the Prime Minister as the sponsoring minister for this Inquiry. And Baroness Hallett makes recommendations back to the Prime Minister as to what she has heard and what she would like to see in the Terms of Reference in future.

We're confident that we can make changes in the Terms of Reference but it ultimately is up to the Prime Minister as to whether he accepts them, and the time and scale in which he acts. So, whilst we hope to get recommendations back to him within a period of four to six weeks, obviously, there is lots going on in the world that takes the Prime Minister's notice. And although he knows this is a priority, we can't control how quickly he then issues a final version of the Terms of Reference and then we can start the Inquiry properly.

We will commit, of course, to informing people at every stage and getting people, both in your sectoral groups but also the public, as informed as we can as to the process.

Once we are able to start the Inquiry formally with a set Terms of Reference, as we said in the consultation document, we are unlikely to start hearings until next year. For those that know the process of inquiries, there will be a period of calling for evidence and of taking a step back and we're doing this already and just working out in what order we're going to do the investigations. I think, again, there've been some helpful comments on that today and throughout the course of the consultation.

So, this will really be about – and it actually came up in our group – will be about collecting, looking at the evidence and what's already out there, the inquiries that have already happened. Apologies, I can't remember who mentioned it but somebody in our group mentioned what's already out there and that's essentially what we'll be doing over the next few months. We'll make a library of all the inquiries, data, evidence, surveys that are out at the moment just so that we don't duplicate too much of whatever we've got there as well. And from that list, we can then start to drill down, look at the evidence that we need to call before the first public hearings start.

So, I hope that gives you a flavour of where we're going. I'm looking forward to working with all of you over the course of this Inquiry as well so we get the best results.

Just a reminder that the transcript of today's discussions will be available at the end on the website. A final reminder, should you need, Katie from the counselling service is on the line and you've got her contact details in case you do need to make use of that. But I think for now, all that remains is for me to say thank you on behalf of the Inquiry, or Baroness Hallett, all of you for your attendance. And I look forward to seeing your written submissions to the consultation in due course. Thanks, everybody.

[END OF TRANSCRIPT]