

## **UK Covid-19 Inquiry**

### **Local government roundtable - breakout discussion**

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 covers one of two breakout discussions.

#### *Participants*

Anisha Worbs, UK Covid-19 Inquiry

Martin Hogg, Citizen Coaching and Counselling

Claire Carleton, Belfast Emergency Preparedness Group

Jim Savege, Scottish Resilience Partnership

Lisa McCann, REHIS

Nicola Dickie, COSLA

Aidan Dawson, Public Health Agency for Northern Ireland

Gillian Topping, Environmental Health Northern Ireland

Alison Allen, Northern Ireland Local Government Association

Dr Josephine Pravinkumar, Scottish Directors of Public Health

**Anisha Worbs:** [00:00:00] Well, as you know, this meeting is being recorded, so there will be a transcript of the session. And as Sam said, that will be made available on our website. So if you would prefer not to be named, please do let the team know after today, and we'll make sure that happens. And then the only other reminder is that I'm not going to do a round of introductions, we'll just get straight into the discussion. But please, the first time that you speak, if you could just briefly introduce yourself and who you're representing today, that would be really helpful.

So we've got about an hour to cover the four consultation questions, and I'll do my best to keep us to time. And when we go back into the main group we'll feed back a bit of a summary of what we've discussed. If anyone feels that they want to be the person to feed back, please let me know. But otherwise, I will be taking notes. And I'm happy to do that if you'd rather concentrate on your contributions.

So the first question which we can spend a bit more time on, depending on how the discussion goes is the big one really: do the Inquiry's draft Terms of Reference cover all the areas that you think should be addressed by the Inquiry? And whilst I let you put your hands up when you're ready to speak, just one – one bit of context, I suppose. The Terms of Reference as Lady Hallett

has been explaining, as she's spoken publicly, are, if you like, the bare bones, the skeleton of what the Inquiry will need to cover. But there will be – once the Inquiry is formally established - Lady Hallett and her legal team will build a much more detailed view of the detailed scope of the Inquiry.

So that's just a bit of context for you. But we're very interested in your views on whether what you've seen so far covers all the areas that you think should be addressed. Please put your hands up when you're ready to come in and I'll bring you in. Claire, thank you very much, over to you.

**Claire Carleton:** [00:02:16] I am Claire Carleton, Belfast Emergency Preparedness Group, which is equivalent to local resilience forums in GB. There are just a couple of things I wondered whether they needed to be spelled out a bit more. There was the link, I see you've got legislation and regulatory control. But I think enforcement was maybe one of the challenges. And whether that needs something specifically noted about it, I wondered did we need something about bereavement, and the funeral director support, because that was certainly one of the massive challenges. And that massively impacted on people and how they're dealing with the aftermath.

I'm not sure it kind of talks about the support to the vulnerable as opposed to the protection they got, so how we tried to help them. And then I wondered when it comes to kind of cultural institutions whether you need a faith/non faith line in there to cover that, because I know that was one of our bigger challenges here. And whenever we get into the health and care sector, does it refer to kind of your frontline like general practice, like your doctors, your GPs, or domestic supports like home help, you know, and district nurses? Because I think that, again, was another challenging area. So maybe it comes into that; it'll come in the detail, but I just thought it was worth highlighting those.

**Anisha Worbs:** [00:03:36] That's really helpful. So a number of those things that you mentioned - bereavement support, district nursing and support for vulnerable people - are themes that have come out of our meetings that Lady Hallett has been having with bereaved families very strongly. So yeah, that's really helpful. Okay, I've got Jim and then Nicola.

**Jim Savege:** [00:04:01] Thanks. So good morning, Jim Savege, Chief Executive Aberdeenshire Council, also Chair of the Scottish Resilience Partnership. Five points briefly if I may do so. In overall terms, content with the Terms of References set out.

The first one would be about the impact of lockdown on communities and businesses. We look at some of the component parts of that one, but I'm not sure we necessarily consider quite what the cumulative effect has been in terms of those aspects, in terms of communities, of what their experience was. Linked to that, I'd reinforce the point that has just been made in terms of I'd broaden out the focus in terms of health and care. It's not just in terms of an acute hospital setting or in a care home, which were some of the sort of significant areas of focus, but on all primary and community care services as well. I think there was a particular consideration needs to be given there.

The Terms of Reference do cover intergovernmental decision-making. But I think they'd be useful to expand to look at decision-making coordination across all public services. So starting to take into account the role and responsibility between national and local governments. And then also

from a Scottish point of view, looking at the role and responsibility of Police Scotland, Scottish Fire and Rescue Service, both at the national and local level as well. So I think that these would be expanded away from just that sort of the national Governmental level.

Aligned with that, third sector and volunteers played a significantly important role in terms of the response. And it'd be useful to explore, again, the Government's coordination and decision-making that involved and engaged third sector and volunteer groups as well.

And last one, maybe in two aspects, the Terms of Reference are light, I think, in terms of that point of enforcement in terms of the role of local public services, be it in terms of local authorities or police colleagues, in terms of the enforcement role responsibility they have.

And maybe linked to that one, I think at the end of it, the Terms of Reference, look in terms of having that lived experience coming through, in terms of families of the bereaved who're impacted in terms of health and care workers. I would sort of want to explore about whether the sort of lived experience and voice of a wider slice of society in terms of businesses, communities, and responders ought to be included here as well, because otherwise we polarise the focus, just on to one centre, and I think many others have been involved and affected as well. Thank you.

**Anisha Worbs:** [00:06:38] Thank you, that's really helpful. And I think on that last point, we might come back to that in the last question a bit later on. Nicola, I'm sorry, I think I actually misspoke. I think Lisa was first. So if you don't mind, I'll come to Lisa next. Thank you.

**Lisa McCann:** [00:06:59] Thanks very much. I'm Lisa McCann, and I'm the past President of the Royal Environmental Health Institute in Scotland, and the day job is an environmental health manager, Fife Council. So my initial thoughts I have to give this morning was to say I think that the draft Terms of Reference are a good start. And I agree with colleagues that have given their opinions so far this morning on things that need consideration.

Couple of other points from myself, and that they probably [inaudible] was on further from potentially what Jim has just said. So I think maybe needs to be more explicit or clear, to look at the communication and coordination between the national devolved and local levels, whether it's the Government, central, devolved Governments, local governments, and the various agencies involved needs to be looked at. And I think what also needs to be reflected is the differences across the UK: there were very keen differences, even I know that just speaking to colleagues in various forums, because that needs to be looked at. The other thing for me is maybe have a look at is how outbreaks and things like that or local clusters were maybe done –

**Anisha Worbs:** [00:08:32] Lisa, I think you've gone to mute. Have we lost you? Okay, hopefully, Lisa, you can rejoin us, and I'm happy to come back to you at the end. But let's go to Nicola, now, and then Aidan after that.

**Nicola Dickie:** [00:08:57] Thanks very much. My name is Nicola Dickie, I'm the Director of People Policy in COSLA for the first part of the – throughout the pandemic, I was Covid lead for our organisation. And I was quite struck by the fact that we're not examining public behaviour and attitude. Because ultimately, at the start of the Covid pandemic, there was an awful lot of compliance and good attitude and behaviour from the public. And if we were looking to learn the lessons for, heaven help us, if something else happened, it would be important to understand why

people complied or did not. So the enforcement point that Jim makes, but maybe a wee bit softer in terms of compliance.

And I wonder just about the way it's set out, and maybe it's implicit, but in many respects, certainly at a Scotland level it was the intersectionality of the measures that were taken. So I suppose there's nothing really in it. So Jim made the point about how did it affect community and business? I think we need to understand how it affected a whole individual because their economic viability was being affected. They were home-schooling. So I suppose it's picking up on the fact that not everybody saw the same type of reaction to restrictions. Because some people, they weren't in, you know, with the fact that they only work in [inaudible] didn't mean anything to them, but the schooling did. So it's just about that impact on the whole person or the whole system response to that. Thanks.

**Anisha Worbs:** [00:10:18] Thank you. Yeah, I think that's a really, really good point. Aidan, shall we come to you.

**Aidan Dawson:** [00:10:26] Thanks, my name is Aidan Dawson. I'm the Chief Executive of the Public Health Agency for Northern Ireland. I'm just conscious that we seem to be the only public health agency represented. I don't know that was intentional, or because Northern Ireland's slightly different from England and Wales and Scotland in terms of what's covered public health as opposed to –

**Anisha Worbs:** [00:10:52] Sorry, Aidan, just to interrupt but I'm not sure that that's true, actually. Because I think Josephine might be representing public health as well. But anyway, you carry on.

**Aidan Dawson:** [00:11:05] That's okay, thanks. Well, that's good. There are a lot of things which I probably thought about, which have already been covered. And I'll not go back over those. But there were a couple of things which hadn't been mentioned today. And I think one of the things is a specific focus on young people. And it was slightly referred to earlier in terms of education, and the long-lasting impact that the pandemic has had and the impact upon education and the recovery of that, for young people. Both their psychological wellbeing and their development over that period of time, right through all of the education sectors from nursery, primary, secondary, further and higher education, too.

I just wonder if that's a particular focus for us and young people, because I was often said that it had a bigger impact upon younger people than many of the other groups in society because of isolation. And during that development phase, so I was wondering if that was something.

The other bit was that whilst there were a lot of significant impacts there was probably also a lot of innovation, and digital innovation, through the pandemic, and how that's been developed, harnessed and worked in a positive sense as well. The other thing was, for me, that the legacy of this pandemic, and has it changed the way that we work forever going forward? And our attitudes to work as well? Because we're now all, well, a lot of organisations, including my own, are now looking at blended approaches to work.

Working from home is much more embedded in organisations, and maybe because of the pandemic and I don't know that we would have got there without the pandemic and not saying that's a – but it's just an impact – I'm not saying it's negative or positive. I'm just saying it's

certainly, I think, a legacy from the pandemic that maybe we should explore through this as the – the lasting impact and social attitudes towards work.

The other thing was, coming back to the health sector was, was that a lot of health sector workers changed their roles and whether or not there was appropriate training for that, and the psychological support for that, as well, and the lasting impact psychologically on healthcare workers during all this – and I just don't mean those in hospitals, but right across the board, GPs, those who provide social care as well, care in houses, but certainly one of the areas I was responsible for, because I'm not in this role that long. A lot of the nurses in my team when I worked in acute hospital, redirected to Nightingale hospitals, etc. So that had a significant impact upon the workforce.

And then the impact upon other health services, which were stood down. And we've seen a lot of the waiting lists etc. that are now growing, and whether or not it was right to stand that all down or whether or not some of it should have been maintained and at what level during that period of time as well. I think maybe the architecture or infrastructure, buildings that were across the health service system, whether or not they were adequate; things like oxygen supply, ventilation, and things like that, and whether or not – maybe that's covered within resilience, but maybe we need something like that.

And then think maybe someone didn't mention this, but the consistency of approach across the four nations. We were all supposedly working off the same evidence. But we all took different approaches and why that was the case. And should there have been more central Government direction, as opposed to local and devolved administrations, our more devolved administrative control? And I think that was probably most of the issues that I wanted to cover. Thanks.

**Anisha Worbs:** [00:15:33] Thanks, Aidan, that's really, really helpful. Gillian.

**Gillian Topping:** [00:15:40] Good morning, everybody. I'm Gillian Topping, and today representing the Environmental Health Managers in Northern Ireland and CIH. And as a day job Head of Department in one of our 11 councils in Northern Ireland. Some of the things have already been spoken about. And, interestingly, picking up the issue around devolved decision-making versus central decision-making, and the challenges then in the messaging, and the communications that that led to across all of our nations. And I think we're probably still experiencing that even today.

And obviously, on the island of Ireland there were also other considerations in terms of communications and messaging common from our colleagues in the Republic of Ireland, that also impacted on that. Alongside that really, sits for me, communications, and the role of media, and comms and how media influenced positively or negatively the messaging which the devolved administrations were trying to put out. So we picked up there's nothing in here really around media and that side of that, and the influence of media.

And obviously, then that is linked very much to public perceptions and behaviour change. We would like to see some reference to that. And there were – yes, we've mentioned enforcement today, and I'm sure that will be dealt with during the Inquiry. But actually, enforcement was only one tool; we needed to rely on public behaviour change, and what tools were used or could have

been used to more advantage. And also thinking of the enforcement side of it, around legislation and guidance, whether guidance was official, or, you know, just something nice that you might choose to do, a lot of that communication as well as to the standards of that.

Picking up probably on some of the devolved issues around legacy structures, obviously, appreciate across all of our devolved nations, structures are different, and communications are different. And in some places that helped. And in other places it maybe broke down in terms of communication and the best use of skills of various groups of staffing and how they could work and support their council's response and in support of their community. So perhaps some reference to that.

One point related to residential school settings, some folk weren't sure if they were included in the list of premises that we should consider. And I suppose just in closing, one overarching comment was really the opening line, 'examine the Covid-19 response'. And we wonder, did that mean, the effectiveness of the response? Or is there a word missing in there? Because actually, is it around effectiveness or timeliness? Or what is the word that might be missing in there? So some clarity around that. So thanks for the opportunity to share that with you.

**Anisha Worbs:** [00:19:04] Thanks Gillian. Yeah, and interesting, because I think there's Lisa saying in the chat as well, the role of the media, and given the importance of communication, as many of you have said, is something that has come up in other meetings that I've chaired as well. So thank you. Right, I think it was Alison and then Jim.

**Alison Allen:** [00:19:27] Thank you. So I'm Alison Allen, Chief Executive of Northern Ireland Local Government Association, and I agree with everything that's been said. I think there's just a few threads that need to be connected in the Terms of Reference, which just make it clearer. And I suppose just drawing on some of the points Aidan made; to me, it's about how the decision-making supported the safeguarding of the physical and mental wellbeing of society.

So, to me, that's not explicit in the document and it should be more explicit, and that hopefully will cover some of the more specific points that have been made by different groupings of citizens and communities and the extent to which they were affected.

I think just to pick up on Gillian's point, I think there is a major gap in relation to the extent to which the decisions that were made achieved the desired impact or effectiveness. And I think that that needs to be examined in the context of decisions at all levels, central, devolved, and local. So, did we get what we were intending to get from the decisions?

And I suppose then drawing that a little bit further, I think what's also missing, there's a section – the first bullet point in section one references the safeguarding of public funds and the management of financial risk. And then the further section down mentions the economic response. But to me there is a threat around the effectiveness of the financial interventions, and did they achieve their desired outcomes as well, because it wasn't just the results of our partnership working, significant amounts of money were spent in trying to ensure society was supported as we came through all of this.

And I suppose it's really then taking it from that then and understanding what other factors were at play. So others may have referenced this, but obviously, you know, public sector decision-making

and Governmental decision-making is only one element of this. But understanding the effectiveness of that, and then trying to understand the other items that are at play, for example, communications and media, would be important as well for me, but thank you very much.

**Anisha Worbs:** [00:21:22] Thanks, Alison. Jim.

**Jim Savege:** [00:21:27] It's a particular point that was just stimulated from the conversation that we're having thus far. And it's a legislative one, there was a significant role, certainly in Scotland, for emergency responders, and for local resilience partnerships and for regional and national resilience working arrangements. And yet there was limited, if any, use of the Civil Contingencies Act as part of the legislative framework which either Government chose to use as the framework and a backbone in terms of their overall response and approach.

And I think there's a question there, not sure whether it is one for the Inquiry, but certainly get raised with the review of the Civil Contingencies Act in terms of the choice to not use that legislation, and the implications of that. And within that, therefore, the role and responsibility of emergency responders and the utilisation throughout the response process. Thank you.

**Anisha Worbs:** [00:22:25] Thank you, Josephine.

**Josephine Pravinkumar:** [00:22:30] Hello, good morning, Josephine Pravinkumar, Director of Public Health and NHS Lanarkshire, representing the Scottish Directors of Public Health Group. Several points have been already highlighted. And there was a mention around young people. And there's also a smaller group around the pregnant women and families with very young children. So whether that is also could be included within the list you've got.

The second issue is around the use of data and information governance, and also research frameworks; there was a lot of very helpful research and a lot of information-sharing across the partners, which is very helpful but it's to look at that, as well, whether that would be considered and the Inquiry's Terms of Reference referred to under the lessons learned being applied to other emergencies, as well as in terms of the disparities evidence will be considered, but just wondered whether it would be looking at also recommendations around the stark inequalities that have existed, been exacerbated by the pandemic and what actions would be taken, again, from the point that was raised around use of finances and how we've got pre-existing inequalities and how that that could be addressed as well. And those were the main points. Thank you.

**Anisha Worbs:** [00:24:01] Thank you very much. I just want to check in with Lisa, because we lost the last bit of what you wanted to say, Lisa, whether you want to come back in.

**Lisa McCann:** [00:24:15] Thanks very much, no idea what happened, had a little blip there. A lot of what I was going to add has already been said by colleagues on the call. And quite reassured that we've all got a core bit that we're all thinking along the same lines within the core, then other specific bits to be along there. So yes, very much echoing what colleagues have said so I won't go too much into detail.

But I would say yes, in terms of that, and the enforcement and things that do need to be looked at. There were obviously different frameworks across the devolved – the different nations and how that went and another bit which I don't know if it needs to be done and needs to be here is

interaction between public health and local government and things like that, because the setups are obviously different. And what worked; obviously, I can talk to what happened in Scotland, and there's colleagues in this workshop for that as well.

But obviously, understanding of what was happening in different parts of the UK would be different. And going forward, if we were ever unfortunately in a similar situation, it would be good to know what worked well in different parts and what maybe didn't work well. Thanks very much for the opportunity to come back in. Thank you.

**Anisha Worbs:** [00:25:51] Thanks Lisa. So I think we've heard from everybody on this first question. And as we said, there will be a transcript of this meeting. So we will pick up everything that you've said, and that will be fed into the consultation and the advice that goes to the Chair for her to consider. But let me just pull out a few of the themes that I've heard on that question.

And so definitely something around looking at the health system as a whole, and that needs to include community care and frontline GPs. And also some specifics around the health service; we've certainly heard quite a bit about looking at the non-Covid impacts on the health service, and what the legacy of that is, as well.

Really interesting theme, I thought, around enforcement and compliance and public behaviour, and looking both at the role of the police and the wider behaviour change that was needed in this situation. Clearly a lot around governance and decision-making, both across the UK, devolved administrations, third sector agencies, and how did that all work together? And as a number of you pointed out, what were the differences within these systems.

I also heard quite a bit about impacts on different groups. And I think Allison, you sort of summed it up as the physical and mental wellbeing, but there's something in there around, who do we mean, are we looking at young people? Where's the intersectionality? And how have all of these different factors impacted individuals.

And I think, also a really good point about the legacy, which I think is interesting, because a couple of you said should we be more specific around looking at the effectiveness of these interventions, and did they do what they set out to do. But there is definitely something there about perhaps the unintended consequences or legacy of this response. So I guess we need to balance looking at whether interventions did what they were supposed to do, but also looking at the wider impacts that perhaps weren't intended.

So loads for us to take away then. And thanks, everyone, for your interventions. I'm going to move us on to the second question. And I actually might suggest that we take the second and third together because there is a link between them. So this is really about sequencing and timing for the Inquiry. So there's a question around which issues or topics do you think the Inquiry should look at first? And then a question about whether you think the Inquiry should set a proposed end date for its public hearings to help ensure timely findings and recommendations? So again, do put your hands up with the Zoom button, and I'm looking forward to hearing your thoughts on either or both of those questions. Gillian. Thank you.

**Gillian Topping:** [00:29:26] I was thinking of some of the things we have spoken about today. Again, we've felt that those folks who were bereaved and particularly traumatised, and whether

that be communities, family, that there should be a need for those folks to have their stories heard. Right at the very start of that and obviously that process has begun. Also around how the business sector would be reached out to in order to come forward with the impacts. And I think it was mentioned earlier on the impact on the whole person, rather than individual aspects of their lives. So interesting that that perhaps could be woven into this topic that the Inquiry could look at, at the beginning.

Certainly, within our own backgrounds here in local government and public health provision there are, of course, issues around our own systems and processes. But I think in terms of our preparation conversations for this today, our feeling was that those will come in time. And it would be important to hear from people first, on how they were affected.

A planned end date. Yes, there should be one - something which was proportionate, but yet not something that was too far away, nor something that actually would come as an end date and then the decision would be made not to hear or to deal with any outstanding issues. So something, which was – obviously, we've been in this for two years. And, you know, an inquiry and then an ongoing situation for two years, will still take a fair period of time. And along the way, perhaps, and there's some interim reports, or if the Inquiry was dealing with, let's say particular packages of work, that there will be an interim feedback on their package, and then moving on and feedback at appropriate points. So those were the thoughts of CIH in that regard. Thank you.

**Anisha Worbs:** [00:31:45] Really helpful. Thanks, Gillian. And it's worth me saying that the Chair, Lady Hallett, has indicated that she would like to publish interim reports. And I think that's very much speaking to the point that you're making about the time that an inquiry of this kind of scope is going to take and she's very, very keen to make sure that she can make timely recommendations to help us learn lessons quickly.

And so yes. I don't see any more hands up. So I'll just talk for a few more seconds while you think about it. Claire? I'll make one point before I bring you in Claire. Which sort of comes back to what you're saying, Gillian: I think there's a real choice to be made about how much depth the Inquiry will go into on any given issue, and then what that means for the overall timescale. There's definitely a sense that the Chair feels about wanting to answer as many questions as she possibly can, but needing to trade that off, and not make this process so long that things have faded, I guess, in people's minds, potentially. And that maybe the lessons would be learned easier, if that makes sense if we make sure that they're timely. So I see that a number of you put your hands up, which is great. But let's come to Claire first.

**Claire Carleton:** [00:33:19] I suppose it is maybe slightly selfish. But at the moment, we're still in recovery, so I'm minded that the things would actually help to guide us on the things we need to do more urgently, are the things I'd like to hear. But I'd also like to focus on how we need to improve because this will happen again. And that could be sooner than the period that we're talking of this Inquiry, and particularly how we need to change for other civil emergencies. To me that's a priority is if there were big lessons learned that we need to get that back to the emergency planning regime as quickly as possible to get that in-built.

**Anisha Worbs:** [00:33:57] Thanks Claire, absolutely. Josephine and then Aidan.

**Josephine Pravinkumar:** [00:34:03] Thank you. So for me, I think a number of things could be looked at first. But as you said, we are in the phase we are in with huge pressures in terms of the hospital settings and our primary care frontline services. It's about the management including in settings like that and the staffing pressures. So something that would help us to feed into managing the challenges we are having in terms of the non-Covid areas of work. And so it'd be helpful to focus on that first and in terms of the end date, it'd be helpful, yes, to set a reasonable end date, which will cover the length and breadth, but again, welcome to note the interim reports would be there. So thank you.

**Anisha Worbs:** [00:34:57] Thank you. Aidan.

**Aidan Dawson:** [00:35:01] Thank you. I think just for me, I think it is important that we do have a timescale or an expected end date, as much to help frame that for the public. So whatever that is, and I don't think we should go into this with an open-ended period of time. Because whilst we will have interim outputs, it's important that this is still very much fresh in people's minds, we're still going through recovery. And I think people would like to understand now, as opposed to 10, 15 years' time, the impact. And there's also the impact upon I think the bereaved as well, that they should have those answers in a timely way. And not prolong that sort of suffering and period of time.

And the other bit that I think, in terms of what we might look at first, is absolutely Government decision-making between the national and the consistency of approach, probably not framing that very well. But certainly how we made decisions, and the impact upon that, and also and I know this is at a micro level, but often in investigations of a serious nature, you have a hot debrief, so that early lessons can be learned. And I don't know there's any such way that you can introduce some sort of hot debrief, or early lessons or early things that we need to move on, which are must dos now, and we can't wait four or five years to get that comfort.

And whilst I think that the voice of those who are bereaved and who have suffered is important, I think it would also be important that we have the voice of those who have – I don't know if benefited is the right word – there have been lives saved by the actions of those taken, there certainly have, to the development of vaccines and to the other precautionary measures taken. And after all, a lot of what we did was to prevent the loss of life, and to ensure that so those which had – I hesitate to say – positive impact is the wrong word. But those of which – you know what I'm trying to say - that there's a group of people who have certainly benefited directly or indirectly from the actions taken. And that needs to be recognised as well, I suppose the good, in some ways, which came out of the actions taken has to be noted, as well as lessons learned. Does that sort of make sense, Anisha? I've probably not put that very well.

**Anisha Worbs:** [00:37:58] No, no, it's a hard thing to articulate. But I do know what you mean, and as well as the terrible loss there were those actions as you say, NHS frontline or vaccines – you know, lives were saved. So that's, I think that's a really good, good point. Alison.

**Alison Allen:** [00:38:20] Thanks, Anisha. I suppose just to emphasise, I think, from what Aidan had said, I think gathering the views of people who have been affected, individuals and families. And I suppose I say that not just in the form of those who suffered terrible bereavement, but

people whose health has been affected by this as well in the long term and people who have benefited from some of the NHS interventions.

And I suppose that, as I think about the things that should be prioritised, I think about the matters that were a part of the public discourse, during those early kind of months of Covid. To me, the resilience of the health system overall, those were the things members of the public were talking about. And I think, given how important that is to how confident, as a nation, we feel about our support mechanisms, I think that's where the public would expect.

So hearing directly from individuals to me is a top priority, not gathering person to person evidence. And then just again, as Aidan has said, I think the other thing that was a matter of public discourse was the effectiveness of decision-making through all of that, and how that all worked at a very high level and right down to those local decisions. And I think it's just reflecting, you know, what were people talking about, in those early days? And for me, those were the things that we're talking about.

**Anisha Worbs:** [00:39:39] Yeah, thank you. I think we'll get more into that point about hearing from individuals just in our last question in just a minute. So can I just check if anyone else – I don't see any other hands up. But if anyone else wants to come in on the sort of end date, or sequencing of what we look at?

And if not, I think, again, definitely some themes coming out from the points that you're all making around the effectiveness of decision-making being one of the early things to look at. I think a general sense that an end date would be helpful, but perhaps it shouldn't be entirely rigid if we find that there's more evidence that needs to be taken. Support for the interim reports, and potentially on packages of, I guess, themes from the Terms of Reference.

And yeah, this point about the fact that you and the system is still in recovery and under a lot of pressure. So I suppose that's something to take into account in terms of calls on individuals to give evidence to the Inquiry, but also in terms of, can the earlier lessons learned, help directly with what you know what you're facing at the moment?

I think one thing, it's probably worth me just reiterating maybe about process and timing, which possibly speaks to Aidan's point about can you do an early debrief? So some of you may know this, but the way that public inquiries work, it is a legal process, a statutory process. So what will happen once the Terms of Reference are set is that Lady Hallett and her legal team will start gathering evidence, and evidence will start to be submitted. And then there's a process of using that evidence to determine scope and potentially preliminary hearings, before the full hearings.

And in terms of timing, what Lady Hallett has been saying is that she would like to do the preliminary scope hearings this year. But the full hearings would not start before 2023. So just to give you a sense because some people have been asking us about, will there be lessons ahead of this winter? And I think the answer to that is no, just because of the legal process that she has to go through. And the necessity for her to hear the full range of evidence. But, I think Tom made the point about not waiting 10 to 15 years, and that is certainly something that she feels very strongly about as well. Aidan?

**Aidan Dawson:** [00:42:39] Thanks, Anisha. Sorry, this is something that occurred to me. And it's maybe come back to a previous question about things which may or may not be included so forgive me, it's just, well, it's random in my head. Environmental impact of the pandemic, both in two senses: we were encouraged to be very green, and we had this real green agenda, which we're moving into as a society. And then suddenly, we move to lots of disposable plastic once again, and everything being one use, and that obviously had a very negative impact upon the environment.

And the other thought was, as we all stopped travelling to work by car, train, and bus, whatever, and we all stopped flying around the world there was a positive, probably – or maybe there wasn't – positive impact upon the natural world of the environment, because a lot less fossil fuel was being used, especially in the airline industry. I don't know whether it was a significant impact. But I suppose what I'm getting at was there an overall environmental impact of the pandemic, either good or bad? And has that left a legacy as well? So sorry, just randomly came into my head, and I thought I would mention it before I forgot.

**Anisha Worbs:** [00:44:09] Yeah. Thank you. And just to repeat, as well, I know some of you are putting stuff in the chat. So we will pick those comments up as well. So I'm going to move on to the last question. Which we sort of started to get into a little bit already, but let's just see if others want to come in. And this is how should the Inquiry be designed and run to ensure that bereaved people and those who have suffered harm as a result of the pandemic have their voices heard?

So I think we've already heard from Aidan and Alison about this point, about, of course, bereavement and harm, but also there were people whose lives were saved by the interventions, so I think that's an important point for us to take forward. But yeah, just really interested in views. I think there's something that we sort of touched on before about what's your definition of harm, and the kind of mental and emotional as well as kind of physical wellbeing and wider impacts on society. But yeah, very interested in thoughts about how we might do that, and how we might hear from the right people during the course of this Inquiry. Thanks, Aidan.

**Aidan Dawson:** [00:45:38] Sorry, I think one of the important things is, and maybe that part following on from previous inquiries, it's important once this is a central and national inquiry, that it has a local sort of field [inaudible] as well, and that the Inquiry team get about and around the four nations, and – but they also may have subgroups, which want to take evidence in. A lot of our population is sort of urban based, but we've a lot of rurality as well, and how we reach those voices, and quite often whilst there's online, there's also those which are digitally impoverished. So I think it's important that there are physical locations around the country where people can go and give evidence to panels, as well as that digital platform.

And I would encourage the subgroups, or whatever way that that's done to get out and actually meet people in village halls or in the heart of their local communities where they feel more comfortable to speak out. And that appropriate support is given to people to enable them to engage appropriately, and be accessible for the whole range of people with disabilities, or language, as well. Where English isn't the first language. So I think that's really important too. So just some thoughts on how you might engage across the whole of the UK. Alicia, thank you.

**Anisha Worbs:** [00:47:22] Maybe helpful. Thank you, Gillian.

**Gillian Topping:** [00:47:25] Thanks. I suppose the question here around reaching bereaved persons, but perhaps there are also many other sectors other than the brief that would wish to input into this. And I'm sure there has been learning from other inquiries into matters of a very sensitive and difficult nature that I'm sure will be brought into this. I think one of the other challenges is there potentially will be so many folk who will want to express how they have been impacted. And the challenge, therefore, is acknowledging that individual contribution perhaps, into the Inquiry, and do people get feedback on that?

Do they get acknowledgement that their story has been heard, rather than filling in a survey form, or putting something in, so that those folk feel that they have been valued in this process? Because obviously, there remain so many significant harms to people probably still yet to be uncovered. And if we open up an inquiry or the Inquiry is opened up to that, how is that handled and dealt with, with the necessary ongoing supports for those people who take the opportunity to express how they're feeling? So that was something that we had brought or considered. Thank you.

**Anisha Worbs:** [00:48:56] Thank you. I'm going to go to Alison, and then Josephine. And then Lisa.

**Alison Allen:** [00:49:06] Thank you. It's just a very quick point about the opportunities of supporting the third sector, across the UK, as being an important – I suppose not just an important conduit, but also an important way of enabling individuals and communities to participate. It can be quite an intimidating matter, trying to submit evidence, even if it's just in writing, or particularly if you're giving the evidence in person.

And I think there's a piece of work around promoting the work of the Inquiry at the appropriate point with third sector organisations across the four nations, so that they are ready and able to enable individuals to be part of that. And I think just to follow up my point around key workers, I think trade unions will be an important part of that conversation as well, obviously, around the role of key workers.

**Anisha Worbs:** [00:49:59] Thank you. Josephine.

**Josephine Pravinkumar:** [00:50:03] Thank you, Anisha, I think for me it was reflecting on how would we be confident that we have captured the range of voices we need to hear through the Inquiry. So, and especially about the hard to - or seldom heard voices.

So another point, I suppose, is that bit about triangulation. So, panels and there'll be various surveys being mentioned. But how do we, again, you want to triangulate that and being confident that we have been able to source some kind of markers or criteria to ensure that we have captured everything that we need to and that that will be something to think about. Thank you.

**Anisha Worbs:** [00:50:47] Thank you. Lisa.

**Lisa McCann:** [00:50:53] Yeah, just want to really echo everybody else, I think the thing of the workers and the key workers, and particularly what I saw from experiences on incident management teams, for investigations and in clusters was the actual impact on staff, particularly

those in care homes that had significant outbreaks so very much looking at trade unions, but very much thinking about, we may have a large sector there of workers who are maybe not in trade unions as well. So thinking how potentially they could get represented or contacted and things like that, particularly if those are some of the workers also on zero hour contracts, and things like that.

So I know up in Scotland, we've got that as a charity called Scottish Hazards that may be able to help and I know they may have similar in the other nations as well. So it's just again, how do you get those hard to reach people, people that might be not willing to come forward if they feel that I'm seen saying something is my job at risk or anything like that, as well, as I think what was said about the thinking about the mix of the urban and the rural. Very much thinking with islands, as well, making sure they're looked at? And then I think it was Jim who made a very good point about the digitally impoverished. How'd you get to them? It's something so, as I say, very interesting to hear the comments of everybody else involved. So, thank you.

**Anisha Worbs:** [00:52:38] Thank you. Alison, I see your hand up, did you want to come back in?

**Alison Allen:** [00:52:44] Apologies; that's from before.

**Anisha Worbs:** [00:52:45] No, that's fine. Right, so we've got a few more minutes. Before we wrap up this last question, I might just pose another one to you. So you've given us loads of helpful stuff about the whole range of people that we need to try and reach. I wonder if there's anything you want to say about how we keep you and people in your community and sector informed about the Inquiry. And I suppose the key thing from the Chair's point of view is how do we give you the confidence that we as an Inquiry are listening to you. Jim?

**Jim Savage:** [00:53:35] I think it's a really helpful suggestion and whether you're wanting to have a sort of a cohort of bodies such as those invited as a sort of professional representatives being able to make a contribution or to be at one side just in terms of kept updated as you are suggesting, more than happy to play an active role in that respect to be able to represent my colleagues and make sure they're kept informed as well. So you know, I think you've articulated it well and happy to play a role and to contribute in that way, a bit in terms of being a conduit or more of an active contribution. Thanks.

**Anisha Worbs:** [00:54:15] Great, thank you. Did anyone else want to come in on that or have any other points on any of the questions that have occurred to you while we've been talking? If not, then I think on that last question – sorry, Nicola, go ahead.

**Nicola Dickie:** [00:54:44] Okay, it was just to see whether the Inquiry intended to do some sort of desk-based exercise, because the Inquiry would [inaudible] people who've started to evaluate what happened during the pandemic. I know at Scotland level, we've got universities, you know, improvement services, etc. So it was just to see whether there was any intention to put that basket of evidence into the Inquiry.

**Anisha Worbs:** [00:55:22] Yeah, that's a good question. And Sam, who's chairing the parallel meeting, has research within his portfolio. So I think there will definitely be a fair bit of work looking at what's already been done and what's out there, as well as obviously the opportunity for people to submit evidence to the Inquiry. I think, yeah, it was worth me saying that – some of you talked about how it can be quite an intimidating experience to give evidence for an inquiry in that

sort of formal quasi-judicial setting. So we are thinking very actively about a parallel listening exercise, where individuals or groups are able to tell their experiences or tell the Inquiry what they want to tell us in a different way, and probably in a whole range of ways, as you've said, and so a lot of what you've said here has been really helpful, I think, and we'll feed back to the team on that.

So I think the themes coming out for me out of that last question were the points about people whose lives were saved by NHS interventions or vaccine interventions, and this really important point about kind of physical and digital presence across the UK, bearing in mind, particularly, you know, digital poverty, also the challenges of rural and those on the islands, as well as disability and all of those kind of accessibility challenges.

There's something about the scale of people who might want to have their voices heard in this Inquiry, and whether it's possible to give people kind of individual acknowledgments and how the third sector and other groups like unions can help us access those people. And particular focus on key workers and the seldom heard, and then finally, I guess that point about yourselves as professional representatives, what we can do and put in place to make sure that you're kept updated, and you know, potentially play a more active role as the Inquiry goes on.

So I think for me, that's been an incredibly rich discussion and I'm really very grateful to all of you for taking the time today and for canvassing views before you got here and feeding that in. I guess just a couple of reminders from me before we all get taken back into the main room. One, our consultation on the website is open until the 7th of April, so please feel free either yourselves, the organisation's you represent to put your views in there, as well.

But we will pick up what you've said today from the transcript and what's in the chat as well. And that will go into our thought analysis of everything that we were hearing through this consultation. I think unless anyone's thought of something that they desperately want to say, that's us done. Perfect. Thank you very much. You can have a couple of minutes' break.

[END OF TRANSCRIPT]