



**NOTICE OF DETERMINATION**  
**CORE PARTICIPANT APPLICATION**  
**MODULE 3 - BELFAST HEALTH & SOCIAL CARE TRUST**

**Introduction**

1. In my [Opening Statement](#) on 21 July 2022, I explained that Modules would be announced and opened in sequence, with those wishing to take a formal role in the Inquiry invited to apply to become Core Participants for each Module. On 8 November 2022, the Inquiry opened Module 3 and invited anyone who wished to be considered as a Core Participant to that Module to submit an application in writing to the Solicitor to the Inquiry by 5 December 2022.
2. The Inquiry has published the [Provisional Outline of Scope](#) for Module 3, which states that this Module will consider the impact of the Covid-19 pandemic on healthcare systems in England, Wales, Scotland and Northern Ireland. Further Modules will be announced and opened in due course, to address other aspects of the Inquiry's Terms of Reference.
3. On 5 December 2022 the Inquiry received an application from Belfast Health & Social Care Trust ("the Applicant") for Core Participant status in Module 3.
4. I made a provisional decision dated 16 January 2023 not to designate the Applicant as a Core Participant in Module 3, thereby declining the application ("the Provisional Decision"). The Applicant was provided with an opportunity to renew the application for Core Participant status in Module 3 in writing by 4pm on 23 January 2023.
5. The Applicant did not renew the application by the prescribed deadline. Accordingly, this Notice sets out my final decision on the application.

## Application

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

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

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

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

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

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

7. In accordance with the approach set out in my Opening Statement and the Inquiry's [Core Participant Protocol](#), I have considered whether the application fulfils the requirements set out in Rule 5(2) in relation to the issues set out in the Provisional Outline of Scope for Module 3.

## Summary of Application

8. The Applicant states that it is one of the largest health trusts in the UK, the largest integrated health and social care trust in the UK and larger than each of the other four trusts in Northern Ireland.
9. The application states that the Applicant delivers a wide array of treatment and care to citizens of Belfast as well as providing most regional specialist services for Northern Ireland. The application lists the hospitals and other care establishments the Applicant operates, and notes it has a workforce of 22,500 people and receives about a sixth of the entire core Departmental Expenditure Limit ("DEL") funding provided to the Northern Ireland Executive by the UK Government. The Applicant sets out how it was

commissioned by the Northern Ireland Department of Health to host the only Nightingale hospital in Northern Ireland and asserts that because of its size and the extent of its services, it is “the effective health trust of last resort in Northern Ireland”. The application sets out in detail the role the Applicant is said to have played by reference to multiple aspects of the Provisional Outline of Scope for Module 3. In the course of doing so, it anticipates that the Inquiry will examine decision-making within the leadership structures internally and externally. The application notes there have been complaints from families of patients including to the Police Service of Northern Ireland (“PSNI”), and that litigation has been initiated by staff who contracted Covid-19 during the course of delivering their role.

### **Decision for the Applicant**

10. I have considered with great care everything that is said in the application. Having done so, my view is that the Applicant does not meet the criteria in Rule 5(2) for the purposes of Module 3.
11. Module 3 will consider the impact of the Covid-19 pandemic on healthcare systems in England, Wales, Scotland and Northern Ireland. This will include consideration of the healthcare consequences of how the governments and the public responded to the pandemic. It will examine the capacity of healthcare systems to respond to a pandemic and how this evolved during the pandemic. It will consider the primary, secondary and tertiary healthcare sectors and services and people’s experience of healthcare during the pandemic, including through illustrative accounts. It will also examine healthcare-related inequalities (such as in relation to death rates, PPE and oximeters), with further detailed consideration in a separate designated Module.
12. The application is based on the Applicant having played a direct and significant role in the matters to which Module 3 relates (Rule 5(2)(a)) and having a significant interest in an important aspect of those matters (Rule 5(2)(b)). It is also put on the basis that there is a possibility that the Applicant may be subject to explicit or significant criticism (Rule 5(2)(c)).
13. I do not consider the Applicant played a significant role in the matters to which Module 3 relates. I recognise that it did play a direct role in the matters that are relevant to

Module 3 as a provider of primary and secondary healthcare in Belfast, as well as the provider for most regional specialist services for Northern Ireland. However, as an individual trust, its role is not “significant” such that it ought to be granted Core Participant status under Rule 5(2)(a), as opposed to any other individual trust or board of its type. That is notwithstanding its large size and range of services. For the same reasons, I also do not consider the Applicant to have a significant interest in those matters and in my view, Rule 5(2)(b) is also not met. While the Applicant states there may be the potential for it to be criticised, it is too early for me to determine whether any criticism will be made, particularly whether it might amount to explicit or significant criticism and so Rule 5(2)(c) is not at this stage met.

14. Even if that were not the case, in the exercise of my discretion, and having regard in particular to the need to manage the Inquiry effectively and efficiently, I would still decline to designate the Applicant as a Core Participant in Module 3. I am determined to run the Inquiry as thoroughly and as efficiently as possible, bearing in mind the Inquiry’s wide-ranging Terms of Reference and the need for the Inquiry process to be rigorous and fair.
15. This decision will be kept under review and in due course it may be that the operational response of individual healthcare boards or trusts will be examined as case studies as part of Module 3. If the Applicant were identified in this regard, the question of whether or not it should be designated as a Core Participant for Module 3 could be revisited.
16. Paragraph 8 of the Inquiry’s Core Participant Protocol states that I invite groups of organisations with similar interests to submit an application for Core Participant status. While the Applicant has indicated that it explored making a group application with other trusts, it is said that a group approach between trusts across the region was considered not practical and that it could give rise to potential conflicts of interest. However, the Applicant has not identified specific reasons why it cannot form a group with the other Northern Irish Trust (Southern Health and Social Care Trust) that has applied for Core Participant status in Module 3.
17. It is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. The Applicant may have relevant information to give

in relation to matters being examined in the Inquiry and it is likely that the Inquiry will in due course seek information from a range of individuals, organisations and bodies who may have information relevant to the issues raised in the Modules and, where appropriate, make requests for witness statements and documents.

18. For all of those reasons, having considered all of the information provided by the Applicant in light of the Provisional Outline of Scope for Module 3, I have decided that the Applicant should not be designated as a Core Participant in Module 3 and I confirm that this is my final decision.
19. I will keep the scope of Module 3 under review. My decision not to designate the Applicant as a Core Participant in Module 3 does not preclude it from making any further applications in respect of any later Modules. I will consider any future applications the Applicant may wish to make on their merits at the time they are made.

**Rt Hon Baroness (Heather) Hallett DBE**  
**Chair of the UK Covid-19 Inquiry**  
**13 February 2023**