

UK COVID-19 INQUIRY

SUBMISSIONS FOR PRELIMINARY HEARING IN MODULE 4 ON 13

SEPTEMBER 2023

ON BEHALF OF THE SCOTTISH HEALTH BOARDS

1. The Scottish Health Boards welcome Module 4's examination of Covid-19 vaccines and therapeutics across the United Kingdom. The Scottish Health Boards played a significant role in both the vaccination programme in Scotland and in the use of therapeutics for the treatment of those with Covid-19. They are keen to participate in the Module's work and to listen to the evidence the Inquiry obtains on these matters. Learning for any future pandemic is a key motivation for the Scottish Health Boards participating in the Inquiry.
 2. The Scottish Health Boards are grateful for the helpful Note provided by Counsel to the Inquiry in relation to the first Preliminary Hearing in Module 4, the terms of which are noted.
 3. We have three brief observations relating to the following points, each of which will be addressed in turn:
 - (1) The scope of the issues to be investigated in Module 4.
 - (2) Expert evidence in Module 4.
 - (3) The differences between the healthcare structures across the four nations.
- (1) The scope of the issues to be investigated in Module 4
4. We note that a provisional scope of issues that the Inquiry is likely to investigate in Module 4 has been set out in CTI's Note. It is stated that, 'it is neither practical nor advisable to identify at this stage all the issues that will be addressed at the Module 4 public hearing': (CTI Note, §32.) It is further noted that, 'the issues will be further developed in light of in particular the responses to Rule 9 requests': (CTI Note, §33.)

5. The Scottish Health Boards have also been granted Core Participant status in Module 3, concerning the impact of the pandemic on healthcare systems. As was noted at the preliminary hearing in that module in February 2023, the modular structure of the Inquiry means that having a detailed list of issues to be addressed in each module helps core participants to understand what specific matters are to be addressed at each stage. CTI for Module 3 have now provided core participants with a detailed substantive list of provisional issues to be investigated in Module 3.
6. We would welcome clarification of whether the Inquiry plans to intimate a similar detailed list of the issues to be addressed at the Module 4 hearing. Given the proposed dates for the public hearings in Summer 2024, further detail of the likely timescale for any such list would also be welcome.

(2) Expert evidence in Module 4

7. CTI's Note states that independent expert witnesses are likely to be appointed across various disciplines to assist with investigations: (CTI Note, §49.) Notice is, however, yet to be given as to the identity of any such witnesses, or the issues they will be asked to address. It is anticipated by the Scottish Health Boards that some aspects of the expert evidence might depend on the underlying healthcare structures within which treatments were implemented. No doubt the Inquiry will consider that matter when ascertaining expertise and issuing instructions to experts.
8. Given likely public hearing dates in Summer 2024, clarification of these matters as early as possible would be welcomed.

(3) The differences between the healthcare structures across the four nations

9. It is our understanding that the national differences in the structure of the healthcare systems within the United Kingdom are relevant to at least some of the areas which the Inquiry intends to examine in Module 4; for instance, in relation to the roles and responsibilities of those delivering the vaccination rollout programme.

10. We acknowledge that any such differences will likely bear on the Inquiry's findings in Module 4. The Scottish Health Boards are well positioned to assist the Inquiry in understanding the position in Scotland.

Richard Pugh KC

Cat MacQueen, Advocate

Counsel for the Scottish Health Boards