Witness Name: Malcolm Wright

Statement No.: 1
Exhibits: MW

Dated: 17 October 2023

UK COVID-19 INQUIRY

| WITNESS | STATEMENT | OF MALCOLM | ROBERT WRIGHT |
|---------|-----------|------------|---------------|
| | | | |

In relation to the issues raised by the Rule 9 request dated 19 June 2023 in connection with Module 2A, I, Malcolm Robert Wright, will say as follows:

- My name is Malcolm Robert Wright, of Personal Data, I am
 years of age and am a retired, former Director General and NHS Chief Executive for Scotland in the Scottish Government.
- 2. I have prepared this statement myself by reference to records and material provided to me by the Scottish Government. I have also received assistance from the Scottish Government Covid Inquiry Information Governance Division.
- Unless stated otherwise, the facts stated in this witness statement are within my own knowledge, and are to the best of my belief true and where they are not within my knowledge they are derived from sources, and true to the best of my knowledge and belief.
- 4. My career in the NHS began in 1975, as a school-leaver trainee following which I undertook various roles in NHS Lothian and The Hospital for Sick Children, Great Ormond Street, returning to Scotland in 1992, to take up the position of Unit General Manager at the Sick Children's Hospital in Edinburgh.
- 5. Since 1993, I have held a number of NHS Chief Executive roles, including the Edinburgh Sick Children's Trust, NHS Dumfries and Galloway Acute Hospitals Trust, Dumfries and Galloway Health Board, NHS Education for Scotland, NHS Western Isles, NHS Grampian, and NHS Tayside.

- 6. Towards the end of 2018, I was asked by the previous Permanent Secretary, following the resignation of my predecessor, to come into Scottish Government on a temporary basis to cover the role of Director General and NHS Chief Executive for Scotland, a position I took up on the 11th of February 2019. On 17th June 2019. I was appointed to the permanent role.
- 7. On 22nd April 2020, I commenced a period of sick leave following a recurrence of a previously diagnosed and treated medical condition, and I subsequently left my employment in government on 31/7/20.

8. I am:

- A Companion of the Institute of Healthcare Management
- An Honorary fellow of the Royal College of General Practitioners
- An Honorary fellow of the Royal College Of Physicians of Edinburgh.
- A Winston Churchill Fellow
- An Honorary Doctor of the University of Paisley
- An Officer of the British Empire.
- 9. The role I occupied in Scottish Government was unique amongst my Director General Colleagues in Government holding the twin functions of Director General, working to the Permanent Secretary, and directly to the Cabinet Secretary for Health ("Cabinet Secretary"), and also Chief Executive of the National Health Service in Scotland. I was the accountable officer for the Health and Social Care portfolio budget for Scotland. This involves a personal responsibility to the Principal Accountable Officer, the Permanent Secretary, and to Parliament for the proper use of public funds. At the time I was accountable officer, this amounted to approximately £14 billion.
- 10. As Director General, I was a core member of the Permanent Secretary's Executive Team and during the period in question, which, for me was between 21st January and 22nd April 2020, I was heavily engaged in the mobilisation of civil service resources to support the Scottish Government response, particularly in health and social care. I worked closely with the Cabinet Secretary through regular meetings and conversations, both directly, and

- through our private offices to ensure that she received the advice she needed when she needed it.
- 11. I led and coordinated the work of the Health and Social Care Directors, including Chief Medical Officer, Chief Nursing Officer, National Clinical Director, Director of Population Health, Director of Mental Health, Director of Health Workforce, Director of Performance, and Delivery, Director of Finance and Infrastructure, and Director of Health and Social Care Integration. I chaired the Health and Social care Management Board.
- 12. In my role as director general and chief executive of NHS Scotland, I and my team of directors worked with the Cabinet Secretary to help mobilise NHS Scotland in areas such as scaling up bed and intensive care capacity, supporting primary and community care, and in a range of specific areas, including PPE, ventilators, staffing, digital access, development and delivery of the Louisa Jordan, and the mobilisation of military resources to support local systems.
- 13. I supported the Cabinet Secretary in the Scottish Government multi agency resilience arrangements working closely with colleagues in The Society of Local Authority Chief Executives and Senior Managers (SOLACE), The Convention of Scottish Local Authorities (COSLA), Care Sector leaders, Police Scotland and all other Directors General across Scottish Government. I chaired regular weekly meetings of NHS Chief Executives and I supported Ministers in meetings with NHS Chairs. My Director colleagues held regular weekly meetings with their professional counterparts in Health Boards and Trade Union partnership colleagues.
- 14. Healthcare Directors and I met regularly with the Cabinet Secretary who was fully engaged in all of our work. With the Cabinet Secretary we provided help and support to Health and Social Care Partnerships through regular meetings and conversations with Partnership Chief Officers.
- 15. I am clear that decisions were made by Ministers on the basis of submissions and meetings from Directors in the Senior Civil Service and Professional Directors. I am also clear that I did not and would not provide advice to Ministers outwith my own professional expertise. This included professional opinions in areas such as Non Pharmaceutical Interventions. I was clear that my role was to act on behalf of the Cabinet Secretary as Chief Executive of NHS Scotland, and to ensure that the Cabinet Secretary and Ministers were receiving the advice they needed, when they needed it. I am therefore clear that I did not offer advice on areas in which I was not professionally qualified to do. I did not personally provide

professional or other advice to Ministers in areas, such as lockdowns, community, testing, social distancing, herd immunity, Covid communications, as this advice came to Ministers, primarily through directors and professional advisors within government as well as senior professional advisors external to government. I believed this to have been an appropriate approach to take given that all senior staff were focusing their energies on where they could add the most to the collective effort.

- 16. Specifically, in relation to my role regarding NPIs, I did not personally provide information on data analysis or advice on the topics listed. I was aware of that civil service colleagues were concerned about the wider health and social economic impact of NPIs, and my understanding was that these perspectives were being shared with ministers, as were the impact on equalities. I think that the coordination of the Scotland wide Multi agency resilience arrangements worked well in adapting to the very significant challenges we face. I had no personal role in public health Communications, or Covid legislation.
- 17. There is an important lesson in the very distinctive arrangements for inspection and quality improvement systems for staff working in health and in social care. This is particularly important in relation to the systematic approach to training and education and support for staff. A key lesson for me would be the need to more fully and equitably train and support care staff in Scotland.
- 18. In addition to the Cabinet Secretary for Health, I found the First Minister, Deputy First Minister, and Cabinet members, all closely engaged in the work of responding to COVID-19, treating the crisis with the utmost seriousness and focus. From my direct observation, the First Minister and Cabinet Secretary read, challenged, were clear about the information they required and took decisions on the basis of the written submissions and advice received. From my direct observation, staff within the Civil Service in Scotland, reacted rapidly and appropriately to the new challenges.
- 19. I focused my time and role on supporting the NHS and the wider system in Scotland, to respond to the crisis as well as working with my Director General colleagues in mobilising civil service resources and ensuring that multi agency solutions were developed and delivered.
- 20. I was aware in January 2020 that COVID-19 was a developing as a serious issue and I attended with the Cabinet Secretary and Chief Medical Officer ("CMO") what I remember as the first COBRA meeting that Ministers had been invited to on 24 of January 2020.

- 21. I was not involved in discussions on the Nike conference in February 2020 nor in discussions in the run-up to the international rugby match on the 8th of March. I was fully aware that professional colleagues were supporting ministers in these areas.
- 22. I have not provided written or oral evidence to the UK or Scottish Parliaments, nor have I participated in any internal or external reviews or lessons learnt.
- 23. I was not a member of any UK, wide committees or groups and did not play a significant role in the interrelationships between UK government and devolved administrations. I was aware that the Permanent Secretary and other Directors General were undertaking a number of these functions. I did however speak regularly and informally to my counterpart Chief Executives of the NHS in England, Wales, and Northern Ireland.
- 24. Electronic communications played a key role in our work. In addition to email, text messages and WhatsApp messages and groups were utilised. I participated in a number of WhatsApp groups with staff within the civil service and was not a member of any WhatsApp group with politicians or Special Advisors. The Cabinet Secretary for Health would occasionally communicate with me by text often in "out of hours" situations where she needed my direct intervention to ensure that information/submissions/actions were being taken forward in a timely manner and to the quality required. In my experience, the WhatsApp groups that I participated in were not there to make or communicate decisions, rather to coordinate work, to develop positions for the Cabinet Secretary, and Ministers, to expedite actions on behalf of the Cabinet Secretary, and to communicate fast moving developments for information. WhatsApp groups that I was a member of included Directors General and Permanent Secretary, Operational Resilience Group (OROG) which coordinated information on resilience issues, Executive Team, Directors General, Directors General senior staffing, and Health, Directors Group. Ministers and Special Advisors were not members of any of these groups.
- 25. I had individual WhatsApp exchanges with Directors and Director General colleagues on specific, tactical, organisational, and occasionally, personal support issues. We were encouraged by the Permanent Secretary to regularly delete such messages. The rationale for deletion was not explicitly stated. Although I think it was mostly done following my retirement, I still retain some of the later messages. I am happy to make these retained messages available to the Inquiry

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

| | Personal Data | |
|---------|---------------|--|
| Signed: | | |

Dated: 17/10/2023