

Witness Name: Jamie MacDougall
Statement No: 1
Exhibits: N/A
Dated: 18 October 2023

UK COVID-19 INQUIRY

WITNESS STATEMENT OF JAMIE MACDOUGALL

In relation to the issues raised by the Rule 9 request dated 20 June 2023 in connection with Module 2A, I, JAMIE MACDOUGALL, will say as follows: -

1. I am Jamie MacDougall of working address St Andrew's House, Regent Road, Edinburgh, EH1 3DG. I am employed by the Scottish Government in the role of Deputy Director for Budget, Pay and Pensions. During the period of interest by the Inquiry (January 2020 – April 2022) I worked in DG Health and Social Care on social care, PPE and vaccines.
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.
3. Unless stated otherwise, the facts stated in this witness statement are within my own knowledge and are true. Where they are not within my own knowledge, they are derived from sources to which I refer and are true to the best of my knowledge and belief.

A. Background, qualifications and role during the Covid-19 pandemic

4. Brief description of qualifications and professional experience prior to January 2020.

Scottish Government

- Health and Social Care (Deputy Director), 2016 – 2020
 - Policy lead for care homes and care at home for elderly and disabled people. Sponsored the social care regulator and ensured compliance with Government policy. Implemented a trauma informed organisation to delivery

support to survivors of in-care abuse (Future Pathways) and a BSL translation service (Contact Scotland BSL).

- Social Security and Housing (Interim DD), 2012-2016
 - Advised the Deputy First Minister on all social security matters during the Smith Commission negotiations. Led the subsequent negotiations on the transfer of powers and the implementation of Scottish legislation. Policy lead on homelessness and housing support.
- Education, Teacher Employment (C2), 2008-2012
 - Teacher employment issues, including representing the Scottish Government on the Scottish Negotiating Committee for Teachers pay and conditions and on teacher pensions. Managed relationships with teacher unions.
- Corporate Services, Team Leader Business Planning (C1), 2004-2008
 - Corporate Business and Financial Planning and Performance Management.

Home Office

- Organised Crime, Drugs and International Group (SEO), 2001-2003
 - Programme manager for lawful data intelligence access capability at communication service providers; UK-wide secure networks to transport the intelligence product; a data processing centre to decode and decrypt the data.

GCHQ (1997-2001)

- Graduate trainee, completed six challenging placements that developed intelligence analysis, technical, project and managerial skills.

Education

- B.Eng (Hons) Electronic and Electrical Engineering, 2:1, University of Glasgow, 1997

Other Qualifications and Training

- Senior Leaders Scheme (2020-2022), Future Leaders Scheme (2014-2016), PRINCE 2 Practitioner, APMP (Association of Project Managers Professional), Government Gateway Reviewer.

5. Roles and responsibilities between January 2020 and 18 April 2022 (all at Deputy Director level).

Vaccine Strategy (December 2020 – April 2022)

- Planning for a new vaccination service for Scotland. The programme included improvements to digital systems, workforce and barriers to uptake.
- Planned and delivered the Autumn/Winter programme for COVID-19 and Flu working closely with senior NHS colleagues and delivery partners.

- Implemented improvements to the delivery of the COVID-19 vaccine programme in Scotland by leading inclusion work that delivered vaccines to people who experience barriers to uptake. Implemented approaches to outreach which reached traveller and ethnic minority communities.

Test and Protect (July 2020 – December 2020)

- Led the implementation of contact tracing, including coordinating the recruitment of 1400 contact tracers and the setup of the national contact tracing centre.

Personal Protective Equipment (PPE) (April 2020 – July 2020)

- Developed a new system for procuring and distributing PPE to the NHS and social care sectors. Distributed PPE to social care staff and unpaid carers using local delivery hubs.

Social Care (January 2020 – April 2020)

- Led on the initial response in social care including part of the initial planning for the sector and Covid-19. Implemented emergency legislation to pay social care workers sick pay.

6. Chronology of decision-making committees.

- Deep Dive on COVID-19 - Care Homes (14 April 2020).
 - Meeting of SGoRR (Scottish Government Resilience Room). Chaired by the First Minister. My role was to provide information and help to prepared the presentation (given by the Director, Elinor Mitchell).
- Test and Protect Operational Steering Group.
 - Initially attended then took on the chair of the weekly meeting of the Test and Protect Programme. This covered testing, contact tracing and protection for the vulnerable.
- Contact Tracing, executive delivery group
 - Attended as lead official from Scottish Government. Colleagues from NHS delivery bodies also attended. Group was responsible for setting up and running the contact tracing service in Scotland.
- Weekly vaccine meeting with the Cabinet Secretary for Health and Sport
 - The Cabinet Secretary has a weekly meeting with the Vaccine team. My role was to initially provide an update on the inclusion work and later on the plans for the Autumn/Winter programme.
- COVID-19 Inclusive Steering Group

- Chaired a group of stakeholders with an interest in vaccine uptake in groups that with low uptake or facing barriers to uptake. Discussed issues and agree actions to improve the uptake in these groups.
- Vaccine Programme Board
 - Initially attended then took on the chair of the programme board. Attended by Health Boards and stakeholders to steer the Covid-19 vaccine programme.

7. Role in relationships between the four nations.

7.1 Took part in four nations calls to discuss the provision of PPE which was being procured by the UK Department for Health and Social Care. My role was to agree the stock transfer to Scotland.

8. Role in relationships with Scottish Local Authorities.

8.1 My work on social care, PPE and Test and Protect was all undertaken working closely with Local Government.

8.2 Officials from the Convention of Scottish Local Authorities (COSLA) were regular attendees at meetings during the pandemic. I also supported the Cabinet Secretary for Health and Sport at some of her regular meetings with Elected Members from COSLA.

B. Initial understanding and response to Covid-19 (January 2020 to March 2020)

9. I first became aware of Covid-19 in late January 2020. At that time, I was responsible for policy on social care in Scotland. The initial briefings concentrated on needing to understand how the system in Scotland would cope if and when this new virus started to take hold. These meetings were quickly replaced with meetings to discuss 'whole system' planning. This meant planning everything from non-pharmaceutical interventions (NPIs) through to expected patient journeys and ensuring the health and social care system could cope. My role in all of this was mainly to input my knowledge around the social care system and to engage with stakeholders. It was during this period that I was made aware of a concern from the social care sector around PPE: it was becoming increasingly difficult to procure and they were looking to Government for help.

10. I was not involved in any of the key decisions (including the two events mentioned - the NIKE conference and the Six Nations rugby match) taken at this time as they were taken by the First Minister and her Cabinet, with advice being provided by more senior officials.

11. My own reflections are that I believe that the UK and the Scottish Governments broadly did the right things based on the information and knowledge at that time. My recollections of that period were that there was a belief that the virus would be around for some time and lockdowns were blunt measures that had a negative effect on the economy. The novel nature of the virus meant that there was little in the way of evidence to support how to proceed and it was clear that each country was trying its best to find a way through that minimised risk to individuals, kept healthcare systems operational and could be sustained over an unknown period.

12. My understanding of the initial strategy by the Scottish Government was that it stayed, as far as possible, in line with the other UK nations. My understanding of this is that it would keep public messaging much simpler and the four nations were pooling their scientific and medical expertise together to formulate advice. Important also to note is that only the UK Government could make new funding available for the devolved nations to combat Covid-19.

C. Role in relation to non-pharmaceutical interventions (“NPIs”)

13. To the best of my knowledge, the Scottish Government implemented a lockdown following evidence emerging about the rate of spread. I feel unable to offer a view on the timeliness of the lockdowns.

14. I was not involved in the advice on NPIs – this was led by clinicians and other policy officials with responsibility for NPIs.

D. Divergence

15. I believe that the Scottish Government’s approach to the pandemic stayed broadly in line with that of the UK. The NPIs had some difference, but I believe that just reflected the spread of the virus and the judgement of the First Minister and her Cabinet about which measures would work best in Scotland.

16. In the summer of 2020 I was responsible for PPE and I advised Ministers to diverge from a four nations supply led by the UK Department of Health and Social Care. NHS National Services Scotland (NHS NSS) advised me that they were receiving items of PPE that were not needed and were not able to influence the procurement. The Scottish Government therefore made a case to the UK Government to provide the funding rather than the PPE to allow NHS NSS to procure the PPE directly. The UK Government agreed to this request and as a result NHS NSS set up new supply lines for PPE. The new arrangement worked well as we were able to order the items of PPE according to the exact level of need across Scottish hospitals and clinical settings. We were also able to make PPE available to the social care sector, which was experiencing trouble in procuring PPE due to global demand.

17. On the vaccine programme, we followed JCVI guidance and the clinical directions set out in the Green Book (published by the UK Health Security Agency) very closely along with the other nations. For example, the JCVI set out the initial priority list which was broadly age based. We turned this priority list into clear policy instructions for Health Boards to follow. The Green Book set out clinical instructions, such as the use of the vaccines and how they should be administered.

18. Vaccine procurement was done on a four nations basis, led by the vaccine taskforce. I believe that this arrangement worked very well as the UK buying power was required in the face of high global demand.

E. Role in relation to medical and scientific expertise, data and modelling

19. I had no role in relation to medical and scientific expertise, data and modelling.

F. Role in Covid-19 public health communications

20. I was responsible for ensuring a high take up in the Covid-19 vaccine programme. To do this, we issued various communications and engaged with stakeholders to promote the programme. This included television and radio adverts, Ministers tweeting updates, leaflets and information materials for clinics. We also provided some funding for third sector organisations to develop their own materials, particularly for minority ethnic people and groups of people where English is not their first language.

21. I believe that this work contributed to a high uptake across Scotland.

G. Role in public health and coronavirus legislation and regulations

22. I led on The Social Care Staff Support Fund (Coronavirus) (Scotland) Regulations 2020. This was legislation introduced when evidence began to emerge that social care workers were going to work when unwell as many employers would pay the statutory minimum levels of sick pay. My role was to lead on the policy advice to Ministers and then the instructions to solicitors drafting the Bill. I did this by working closely with the social care sector, particularly Scottish Care, the Coalition of Care Providers in Scotland (CCPS) and UNISON. The Scottish Government introduced this legislation to allow employers to access funds if a worker was off work due to Covid-19. Feedback from stakeholders was that the fund worked but it had some issues initially with the level of evidence needed from organisations in order to access the fund. I understand that these issues were overcome and the fund was an important intervention from Government to ensure staff did not go into work if they had been exposed to Covid-19 and needed to self-isolate or had received a positive test.

H. Key challenges and lessons learned

23. For future pandemics, I believe there should be a clear arrangement in place between the four nations on when they will align and when they can differ. I believe that the vaccine programme worked well on a four nations basis due to the fact that all four nations were following JCVI guidance on vaccine priority groups and the combined UK purchasing power added weight to the purchasing agreements. Where the four nations approach did not work well was in PPE where the diversity of suppliers and the approaches taken by different Governments meant that freedom to operate independently worked better.

I. Informal communications and documents

24. We used WhatsApp in the vaccine programme. This was an informal group mainly used to alert members to emerging events or urgent requests. No decisions were taken and no sensitive information was shared on these channels. The groups were on an auto-expire setting so no messages remain.

Annex C: Request for documents

25. I no longer have access to any of the documents related to my statement as I now work in a different part of Government. I no longer have any notepads or phone messages. The notepads were securely destroyed in accordance with Scottish Government records management policy. Phone messages were on WhatsApp and set to auto-expire as set out in paragraph 24.

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.

Signed:

Personal Data

Dated: 18/10/2023