

**STUC – Jamie Hepburn Meeting
11.00 am – 11.45 am
05 May 2020
Note of Meeting**

On call

Rozanne Foyer, STUC General Secretary Designate (RF)

Helen Martin, STUC Assistant General Secretary (HM)

NR Unite NR
NR, UCU NR
NR Prospect NR
NR UNISON NR
NR FBU NR
NR PCS NR
NR USDAW NR
NR CWU NR
NR EIS NR

SG Side

Jamie Hepburn, Minister for Business, Fair Work and Skills (JH) and

Jason Leitch, National Clinical Director for Scotland (JL)

A range of supporting officials

Opening Remarks

RF highlighted the ongoing issue at NR and stressed the urgency of receiving communication from the Government. RF also highlighted the issue of social care living wage payments which were announced in April yet there is still no mechanism for payment. RF highlighted that both issues would be pursued with officials.

Action: NR to update STUC on Irrelevant & Sensitive Issue

Action: NR to update STUC on Social Care Payments

1) Safer Workplaces Guidance (BEIS)

RF raised concerns over the draft guidance and the lack of consultation.

JH agreed with the STUC perspective that the guidance requires proper consultation and that the Scottish Government was in the same position. It was noted the Scottish Government have pressed very clearly the concern that there has been inadequate time given to provide an input into the process and that stakeholders on the ground in Scotland have also not been properly considered in terms of feeding into the draft. The Scottish Government were also seeking clarity on the timescale. JH felt it was worthwhile to find out where the STUC and unions are in respect of the draft consultation.

Name Redacted, Safer Workplaces Team, summarised the key elements. The draft guidance for workplaces is across 7 different themes and each one is very similar and consistent however the gaping hole is that there is not mention of PPE in any of the guidance and this was raised immediately. It was reported the guidance had been developed by Ernst and Young along with a number of stakeholders in England. It was reported the Scottish Government only received sight of the draft on Sunday and would continue to push and raise concerns over the insufficient time to review the draft.

JH raised the response from the TUC to the draft and requested the STUC provide a copy of any response it makes.

RF advised the STUC would be sending out a written briefing stating the position in relation to the draft guidance. RF agreed with the concern expressed by the TUC but that the STUC's response would go further. It was noted the STUC did not feel there was enough cognisance of the need for employers to continue to support homeworking. Further work was required to ensure people are able to isolate with no loss of income and these issues needed to be included to ensure people are covered and not put in vulnerable positions. It was also noted the Scottish Government guidance has diverged from UK guidance and the STUC welcomed where joint working had secured better deals for workers and wished to continue to take this approach.

RF expressed concern over the draft construction guidance which cited the 11th May as the date to get non-essential construction back up and running, and wished to make it clear that even if we agree guidance on a particular sector it does not mean that the time is right for that particular sector to return to work. This also depends on the number of cases and whether this is low enough, and for appropriate testing, tracing, and isolating measures to be in place, along with PPE. Assurance on all this is required before they can accept any return to work and unions need to be fully engaged in this process.

JH advised that the fundamental point is that any guidance laid out can do nothing to undermine the ultimate effort to reduce the pressure on the NHS and frontline. Anything the Scottish Government issues will not undermine that principle and undo all the work that has already been done. In terms of timescale, part of the reason they are moving quickly on the guidance is to ensure it is ready for when the time is right to get back to work.

NR advised, as RF indicated above, that they agree with the majority of what the TUC have said and the lack of consultation / timescale for this.

NR pointed out that risk assessments require to be taken forward with trade union involvement. NR also made reference to hotdesking and sharing tools which should be specifically prohibited. In terms of supporting vulnerable people, or those with vulnerable family members and those with childcare issues, all these people require to be recognised in the guidance and have their incomes protected.

NR reiterated that anybody who has to stay at home because of this should not suffer any detriment and employers should be told that if working from home is currently working then they should continue the homeworking practice. NR also raised again the issue around public transport and the safety of workers travelling to and from their workplace. JC noted that no relaxation should happen until the data level is low enough; and noted that the role of roving health and safety reps has been carried out in the past and that this should be extended across the industry.

JH thanked NR for his comments and noted that there are elements which relate to employment law and these will require to be pushed with the UK Government to push employers, but where this directly relates to Scottish guidance the Scottish Government will take this on board. JH agreed with the homeworking issue and that this remains important and that guidance already issued on social distancing and business will not change going forward.

NR raised an issue contained in the TUC response was that the UK Government had focused on a fairly narrow range of industries reopening the economy and that there was no mention of schools. It was noted this should be recognised as political dimension from UK Government around slightly desperate desire to restart the economy for political purposes and that this has led to an announcement that schools in England are reopening on 1 June. It was reported that this will cause a backlash from parents and teachers alike. **NR** advised there will be a strong need for Scottish Government guidance as to how the economy opens back up as there are much deeper issues around compliance.

JH responded advising the First Minister could not have made it any clearer in her announcement that you can rebuild an economy, but you can't bring people back if they do not have confidence that they will be safe. The Scottish Government are thinking this through carefully and will reiterate the starting premise is that this is a public health crisis and will continue to think of it on this basis. JH advised he would flag up the issue again with the First Minister.

JH reiterated that if there is anything STUC or the Unions wish to flag up directly that they can continue to do so. He stressed that in respect of the guidance issues should be brought urgently as the Scottish Government has no current knowledge of when the UK Government intends to publish its guidance.

RF advised a written response in regard to the draft guidance will be provided imminently and that the consultation process does not bode well for building a way forward or filling workers with any confidence.

JH left meeting and handed over to JL.

Action: STUC to provide **NR with the response it makes to the draft guidance issued by UK Gov on returning to work.**

2) Test, Trace, and Isolate Strategy and 3) Current Testing Practice

JL provided an introduction of the current testing strategy and advised that it was important to understand the role testing can play but also to be careful not to over play this. The WHO provided strategic advice which contains 6 steps. The first step is to suppress the virus and you have to be

in a position where the virus is controlled before you can think about steps 2 – 6.

Step 2 is to set up a reliable test, trace, and isolate system but this system cannot be introduced yet as the number of cases is still too high and there would not be sufficient capacity in the system.

JL advised testing is for sick people first, key workers (health and social care in the first instance), the care home sector and most recently announced, over 65's at home. The present test used around the world is looking for the virus. The virus has to be present for the test to work and will only confirm if you have it that particular day. In moving into the next phase there is testing in every health board and airports etc. with around 8,500 a day moving up to 12,000 and then to 15,000. Currently the Scottish Government is planning that if you self-report as having symptoms you are advised to contact 111 and you will be provided with a test (either trip to testing centre or home kit). You will also be asked who you met and who you were with for longer than 15 minutes. The Scottish Government is currently employing and training people to take these calls and assist with the trace and isolate phase. It was noted that this will be taken forward when the numbers are lower and with less cases which will hopefully keep the virus down.

JL advised that the isolate phase will be more difficult when vulnerable family members are involved and there is a requirement to look at support for these people through local authorities, central government etc. and that there may be a requirement to self-isolate more than once.

JL reported the final point on antibody testing is that it requires a blood sample and will look for immunity responses to the virus. It was noted the first person who caught the virus has only had around 4 months to show their immunity response so it is not certain how long an immunity response will last. It was further reported that there are a vast number of companies working on an antibody and the Scottish Government are discussing this with roche who seem to be doing the most promising work. JL advised that the reports globally are that you cannot get the virus twice but as this virus is new this cannot be guaranteed.

Hugh McAloon, Scottish Government official, advised that a key part of the surveillance is that you can make estimates for the whole population. Through sample testing it is possible to make inferences on the proportion of people who have had the virus and they are working with Strathclyde University on the modelling for this. At present there is an invasive test

that is accurate for antibody testing. This can be given to around 500 people and this can allow population estimates.

NR advised that over the next 2/3 weeks the Scottish Government would need to give consideration to how they build the system, discuss apps, and consider the approach to staffing.

NR thanked JL for the informative update and emphasised that it was dangerous to rely on people choosing to self-isolate if they do not have an income support system in place or if their employer has not agreed to pay them. Some people are deterred from self-reporting or presenting from tests as it threatens their income or their colleagues' income. It is therefore essential that a Fair Work approach is taken.

JL agreed with **NR** comments. JL reiterated public health advice will be that anything that makes it more difficult for individual goes against public health principles. JL's job is to advise Ministers about protecting the public from the virus and that there are things that require to be done to achieve this and that workers health is crucial in this discussion but ultimately it is for senior Government Ministers to make decisions.

NR advised that fire stations have been used to support the testing capacity and asked if the Scottish Government would be looking to expand the use of fire stations to support the capacity throughout Scotland. **NR** also noted that in parts of the UK firefighter are used to undertake testing and enquired if there are plans to pursue this approach in Scotland? In respect of the testing of firefighters, the FBU wrote to the Scottish Government seeking support for frequent testing of firefighters. **NR** advised that there are just over 7,000 staff in Scotland and weekly tests could be considered.

JL responded on the first 2 points of use of staff and thanked the FBU and its members for all their assistance. Fire stations have been used as mobile units and these decisions are made locally by local resilience partnership. In respect of testing, asymptomatic testing is very controversial and not reliable but when we have faster testing and higher capacity than regular testing, we may be able to do so.

Wendy Wilkinson, Testing department, advised DC to contact her with any questions relating to the testing at fire stations.

RH reported on conversations around asymptomatic and antibody testing and was happy to hear roche had been involved. On the issue of

enforcement and staffing he highlighted concerns that environmental health staff are being considered as a workforce to support contact tracing.

RH raised concerns about the need for enforcement of social distancing particularly as workplaces restart, noting that the environmental health workforce is already under severe resource pressure and taking from one key area to give to another does not ultimately support the whole system that needs to be in place.

JL responded advising the points made above were good. It was noted that conversations had been held at sector level with food companies who have vast expertise and scientists to help advise if these teams can't help with this resource that is fine but that there does require some expertise. However, it is not the intention to remove a workforce that is required elsewhere. In respect of the first point the science behind the antibody test and antigen test, as soon as this becomes available, we will be ready to use them.

NR reported that across health and social care and local government issues to deliver strategies are being picked up on. These issues are ultimately about workforce planning and a workforce cannot be used twice. Another issue is the location and availability of testing. The workforce in social care cannot go from care home to the airport, there requires to be greater thought given to where these centres are based.

JL advised that we are slightly different to England. The system in place for contact tracing is in the health protection teams, but these teams do not have large numbers of staff. They have the expertise to carry this out so it was decided to give them the local power as to how this will look like in their area.

It was noted consideration is also being given to utilising dental hygienists, St John's Ambulance, and other parts of the health workforce. It was noted they would not be restrictive but that the numbers are required to train these people. In respect of locations, it was noted that this has got better. JL noted that testing in Scotland started with 1 lab and there are now a number of centres. The home testing kits which are posted out are now up to 25,000 and that will continue to rise and get better, but consideration will require to be given as to how this will look in Hawick and Inverness. JL was hopeful that when the science improves the postal tests will be quicker.

NR advised they have a vast amount of members working in the food retail sector and have been working normally albeit engaging in social distancing, maintaining the 2 metre rule, and engaging shoppers to shop individually. NR asked what reassurance on health is there with regards to the Perspex screens and will this prevent workers from getting infected and also asked about the protection using face masks.

JL reiterated that a lot of work taken forward is about protecting the current workforce and is hugely grateful to these workers. It was noted there is no evidence in a professional setting for face covering. Face masks are temporary, and workers do not require them. These workers would benefit more from regular hand washing, sanitisers, instructions to not touch their faces, keeping people apart, and policing social distancing. The evidence shows that face masks protect people from the person wearing the mask not the other way around.

NR queried the test, trace and isolate and whether this is the litmus test for reopening schools and there had been a lot of discussion around young people potentially being asymptomatic carriers and referred to point made earlier around close proximity being where the transmission occurs most, like in care homes and noted that schools are relatively enclosed also. NR asked what the Scottish Government's understanding is for young people and whether they are seen as carriers of the virus.

JL reported the science is that for some reason, the virus does not affect children to the same level. They also do not seem to spread the virus very well either – it is spread by coughing or sneezing, the droplets of fluid with virus have DNA in them and can be caught when in close proximity to people for more than 15 mins. But it was noted schools are a risk and JL was equally cautious about reopening schools but understands the necessity of education for community cohesion.

JL requested if colleagues can think of any ways in which to reopen schools safely and to advise on this. The science says that children are nothing like the risk that those in care homes are in, but the problem is that cannot be written in stone as it was not certain. It was agreed that JL and NR keep in contact on this issue.

Daniel advised the STUC paper was extremely helpful and it would be useful to give consideration to how these issues can be taken forward with early thinking and resourcing.

RF advised HM could follow up in more detail.

Action: DFM to be made aware of concerns from EIS
Action: STUC to follow up on initial position paper on TTI

Closing Remarks

RF thanked JL for his time and update.

JL also thanked the STUC, Unions and colleagues and advised he would be happy to provide any further clinical advice required.