

SCOTTISH CABINET

MINUTES OF MEETING HELD BY TELE-CONFERENCE IN ST ANDREW'S
HOUSE, EDINBURGH AT 8.30 AM ON WEDNESDAY, 7 OCTOBER 2020

Present:	Rt Hon Nicola Sturgeon MSP	First Minister
	John Swinney MSP	Deputy First Minister and Cabinet Secretary for Education and Skills
	Aileen Campbell MSP	Cabinet Secretary for Communities and Local Government
	Roseanna Cunningham	Cabinet Secretary for Environment, Climate Change and Land Reform
	Fergus Ewing MSP	Cabinet Secretary for Rural Economy and Tourism
	Kate Forbes MSP	Cabinet Secretary for Finance (<i>part of meeting only</i>)
	Jeane Freeman MSP	Cabinet Secretary for Health and Sport
	Fiona Hyslop MSP	Cabinet Secretary for the Economy, Fair Work and Culture
	Michael Russell MSP	Cabinet Secretary for the Constitution, Europe and External Affairs
	Shirley-Anne Somerville MSP	Cabinet Secretary for Social Security and Older People
	Humza Yousaf MSP	Cabinet Secretary for Justice
In Attendance:	Leslie Evans	Permanent Secretary
	[Redacted]	
	Graeme Dey MSP	Minister for Parliamentary Business and Veterans
	Paul Wheelhouse MSP	Minister for Energy, Connectivity and the Islands
	Dr Gregor Smith	Interim Chief Medical Officer
	Ken Thomson	Director-General, Constitution and External Affairs
	Professor Jason Leitch CBE	National Clinical Director
	Dominic Munro	Director, Exit Strategy
	David Rogers	Director of Constitution and Cabinet
	John Somers	First Minister's Principal Private Secretary
	James Hynd	Head of Cabinet Secretariat
	Andrew Bruce	Permanent Secretary's Principal Private Secretary
	Alisdair McIntosh	Strategic Adviser, Outbreak Management
	Ross Ingebrigtsen	Special Adviser
	Liz Lloyd	Special Adviser
	Colin McAllister	Special Adviser
	Aileen Easton	First Minister's Official Spokesperson
	Chris Mackie	FM Covid Briefing Unit
	Sinéad Power	First Minister's Policy and Delivery Unit
		Cabinet Secretariat
		Cabinet Secretariat

NR

Apologies

1. Apologies were received from Mr Matheson. He was represented by Mr Wheelhouse.

COVID-19: Consideration of Further Measures *(oral update)*

Ad hoc papers distributed to Cabinet members on 6 October 2020:

- SC(20)39th Meeting - COVID-19 (Oral item) (1 of 3) - Note for Cabinet on Further Measures;
- SC(20)39th Meeting - COVID-19 (Oral item) (2 of 3) - Draft Evidence Paper;
- SC(20)39th Meeting - COVID-19 (Oral item) (3 of 3) - Draft Table on Packages of Measures

2. The First Minister summarised the deliberations that had taken place since the previous morning's meeting of the Cabinet (*SC(20)28th Conclusions refers*) about the additional steps that appeared necessary to tackle the COVID-19 pandemic, in light of its growing prevalence across all parts of Scotland.

3. The First Minister referred to a note by the Director-General, Constitution and External Affairs (DG CEA) circulated to Cabinet members in correspondence the previous evening, which summarised the package of measures she intended to set out to Parliament that afternoon.

4. DG CEA's paper was accompanied by a draft evidence paper, prepared jointly by the Interim Chief Medical Officer, the Chief Nursing Officer and the National Clinical Director, which was intended to summarise the range of evidence available about trends in infections, confirmed cases, hospital use, and deaths, and about how the data varied across Scotland. The paper also considered evidence pointing to trends in people's behaviours and attitudes, and what that might mean for adherence to current and planned social restrictions.

5. In light of this evidence base, the paper drew some stark conclusions about what was likely to happen in the absence of any change to policy interventions, and the authors also examined the probable impact of the proposed policy interventions. In summary, the paper concluded that, without further action now, there would be a new peak in case numbers by the end of October, with a much higher number of people falling seriously ill, and a significant increase in the number of deaths. Nothing could be certain, and a good deal of modelling had been involved in reaching these findings, but the need to take further action seemed inescapable.

6. Action to counter the virus needed to be reinforced to take account of the current situation, with the addition – over the short term – of at least the set of new measures currently proposed. Over the longer term, attention should be turned to increasing compliance across all economic sectors (and among all sections of the population), to improving the regulatory environment, especially for hospitality and retail, and to looking further at testing strategies. The virus would be present for an indefinite period, and long-term societal resilience would therefore be key.

7. In the short term, the path of the Coronavirus needed to be sharply interrupted. Household gatherings were already generally forbidden (even though compliance could be improved), and the opportunity for people to transmit the virus in hospitality venues was therefore the next focus for immediate action.

8. Wherever people came together, particularly where there was poor ventilation and people were less likely to wear face coverings, there was likely to be a higher risk of transmission. In addition, although the greatest risks currently lay in the Central Belt, levels of prevalence in other parts of Scotland were comparatively elevated compared with the situation during the summer months, and there were currently some significant local outbreaks in remote areas such as the Western Isles.

9. In summary (and subject to Cabinet agreement on the detail as set out below), the new package would be as follows:

(a) It would be made clear that the time-limited measures (which were intended to remain in force from 10 to 25 October – that is, for two weeks and over three weekends) were not intended to be seen as a new ‘lockdown’ of the type seen across the UK from March 2020;

(b) People would still be permitted to take planned holidays. The measures therefore put in place similar levels of protection across Scotland – without formal travel restrictions, but with guidance to avoid areas of higher risk and to use active travel wherever possible, keeping public transport safe for those who had no alternative way to travel;

(c) Significant restrictions would be imposed on indoor hospitality, effectively banning the serving of alcohol during the 16-day period, and closing indoor hospitality venues between 6 p.m. and 6 a.m. (with some exceptions for meals served in hotels). The Scottish Government would offer financial compensation to the hospitality sector. Accommodation would not be required to close;

(d) There would be exceptions for “significant life events” such as wedding receptions and funeral wakes, and the current rules would continue in force for these events;

(e) Additionally, in the Central Belt (defined for this purpose as Ayrshire and Arran, Forth Valley, Greater Glasgow and Clyde, Lanarkshire, and Lothian NHS Board areas), there would be no serving of alcohol outdoors (outdoor serving would still be allowed in other parts of the country between 6 and 10 p.m.), no group classes in gyms, no non-professional adult contact sports, and no outdoor live events. Snooker and pool halls, indoor bowling, casinos and bingo halls would be closed, and working from home would be expected of all for whom this was possible;

(f) Provided that no alcohol was served, all hospitality venues across Scotland would be permitted to be open between 6 a.m. and 6 p.m.. This was intended to allow cafés and restaurants to continue to operate (and pubs and bars, provided they only served non-alcoholic drinks);

(g) People from two households would still be permitted to meet in a café or similar venue, and the ‘six from two’ rule (six people drawn from up to two extended households) would remain in place (it had been determined that moving to a ‘six from one’ rule would be likely to cause disproportionate

societal harm and isolation). In this regard, it was also noted that cafés often played an important role within communities as meeting points for friends and families, and also provided an opportunity for those working from home to meet others in what might otherwise be a fairly isolated existence;

(h) Indoor visitor attractions should remain open, recognising the steps taken by the tourism industry to move to operating with COVID-safe procedures and that many families had already made bookings.

10. The complete set of proposed measures was illustrated in the draft table which had been supplied to Cabinet along with DG CEA's note and the evidence paper.

11. To accompany these measures, work would be set in train to expand the wearing of face coverings in the workplace (including in the Parliament), and there would need to be an immediate move back to two metre social distancing in retail environments (*SC(20)38th Conclusions refers*).

12. There had been a sense, among some, of growing complacency. This was understandable after seven months of disruption and restrictions, but the public must be re-energised to take the dangers of the virus more seriously again and to act accordingly, however difficult and frustrating this might be. The principal message from the evidence paper was that the current trajectory must be interrupted.

13. Figure 6 of the evidence paper (which comprised a series of maps showing the percentage change in new cases over the previous seven days) provided a particularly stark illustration of the 'ripple effect' whereby new cases were expanding out beyond the Central Belt to areas of lower population density.

14. In discussion the following points were made:

(a) The package of evidence was highly convincing and would make a significant contribution to the public discourse, as well as providing a useful basis for discussion during the debate planned in the Parliament for the following afternoon. The evidence paper was a very helpful innovation, which would undoubtedly increase public confidence in government decision-making. Consideration should be given to whether the evidence paper should be updated over time and built upon further;

(b) The set of new measures appeared well constructed: they formed a coherent whole, clearly targeted and focused in a way that would allow people to get on with their lives as far as possible. Much had been learned from the experience of recent months, and the package should give the best practical chance (within current constraints) of reducing the rate of growth of the virus by targeting restrictions where they would be most effective;

(c) It would be helpful if the new measures could be presented in such a way that people might be allowed to retain at least some hope for a return to a better, less constricted life at the end of the emergency, however hard life might seem at present;

(d) It was beginning to appear to some within the hospitality industry that it was being in some way singled out. Although this was not the case, it was an understandable reaction, and careful handling would be required – along with the assurance that the Scottish Government was doing what it could to secure further financial assistance from the UK Government for sectors which had been required to curtail their activities as a direct result of the pandemic;

(e) Encouraging the retail sector, especially supermarkets, to enforce restrictions more rigorously should go a long way to helping the general public in their own efforts to comply. Measures in retail should include re-introducing strict two metre distancing rules, one-way systems, systems for cleaning baskets and trolleys, ensuring hand sanitiser was widely available, and monitoring more closely numbers of customers in shops;

(f) Proposals were under development to provide some degree of financial compensation for businesses (across different sectors) affected by the new package of restrictions. For businesses in the hospitality sector, decisions on allocation should be based principally on rateable value. However, without further support from the UK Government, the total amount available would undoubtedly not be sufficient to meet the needs of those affected;

(g) The First Minister's encouragement to all to 'stay local' would be especially important, as would efforts to increase the degree of compliance with restrictions in the retail sector. In parallel with this, added impetus should be given to work already under way to increase testing capacity and maximise its use as a tool to arrest the spread of the virus;

(h) Although the new restrictions were intended to remain in force from 10 to 25 October, the reality was that Ministers must be ready to respond to the situation as it developed, so firm promises could not be made – there were also no fixed criteria for relaxing restrictions, and much would depend on how the pandemic progressed, both nationally and in other parts of the world;

(i) In case of detailed questions from representatives of the sectors most affected, such as tourism and hospitality, it would be helpful if the Chief Medical Officer, the National Clinical Director and others could be made available to provide an expert perspective;

[Ms Forbes left the meeting.]

(j) In applying the new restrictions, it would be helpful if clearer distinctions could be drawn among the different contexts in which activities took place: for example, drinking in a pub or at a house party was much more likely to involve risky behaviour than, say, a drink to accompany a hotel meal in a managed environment. If risk-based distinctions could be drawn, this would also allow better targeting – both of restrictions and of any compensation for businesses affected by loss of custom;

(k) Although consideration should be given to options such as this, it was important that any exceptions should be able to be applied consistently and in line with the best available evidence. Causative evidence was, however, generally lacking in relation to COVID-19, and prudence demanded that measures should be designed having regard to the characteristics of different settings, such as bars and restaurants, and the presence of disinhibiting factors such as alcohol, which tended to increase the risk of transmission, and it was an unfortunate fact that not all restrictions would appear fair in their application;

(l) The text included in the evidence paper on the need for compliance was quite extensive, and it might be helpful to consider whether this might usefully be shortened: over-emphasis on compliance might actually be counter-productive among those who were already tiring of restrictions. It would, therefore, be helpful to review the wording of the evidence paper from a behavioural point of view before publication;

(m) It would be very helpful if, following the First Minister's statement, the Interim Chief Medical Officer, the Chief Nursing Officer and the National Clinical Adviser could be made available to answer MSPs' questions on the evidence paper;

(n) On the question of enforcement, police and prosecutors should give further consideration to questions such as the need for new powers for warranted entry to premises where illegal house parties were suspected to be occurring;

(o) It would also be worth being clear, in advance, about questions regarding travel, which would undoubtedly be asked by many when the new advice was announced. In anticipation of this, the 'stay local' message for people in the Central Belt should be made clearer and expressed more strongly: people were not being asked to cancel pre-booked breaks but, apart from that, the advice was to travel as little as possible (and to take extra care in all settings);

(p) Given the role of Glasgow and Edinburgh as key transport hubs, the transport industry was also being invited to look at what advice might be given to travellers on their way through the Central Belt;

(q) Despite the high prevalence of the virus in parts of North-West England, there was as yet no noticeable 'ripple' effect in Dumfries and Galloway or the Scottish Borders, but if current levels went unchecked – both north and south of the border – this would undoubtedly be a risk to consider as time went on, and the English half-term holidays (which were generally later than those in Scotland) might have an effect in this regard.

15. Summing up, the First Minister thanked Cabinet members for their comments and invited officials to review the package of draft material once more over the course of the morning, in time for publication that afternoon, to coincide with her planned statement to the Parliament.

16. **Cabinet:**

- (a) Noted the proposed package of new measures and restrictions outlined by the First Minister, as described in paragraph 9 above, and as described in the papers supplied to Cabinet members in advance of that day's meeting;
- (b) Agreed that the package of new measures was necessary to address the recent sustained increase in the prevalence of COVID-19 in Scotland, and especially in the Central Belt;
- (c) Delegated to the First Minister the responsibility for finalising the package of measures, taking into account any final changes that might be required to take into account points made in discussion by Cabinet members;
- (d) Noted the First Minister's intention to announce the new package of measures in a statement to the Parliament that afternoon;
- (e) Noted the intention to publish the evidence paper produced jointly by the Chief Medical Officer, Chief Nursing Officer and National Clinical Director alongside the First Minister's announcement of the proposed new package of measures;
- (f) Agreed that all necessary actions should be put in hand to ensure that the necessary changes to regulations, guidance and advice were in place, so that the package of new measures could be announced, publicised, implemented, and enforced as soon as possible.

(Action: First Minister; Deputy First Minister and Cabinet Secretary for Education and Skills; DG Constitution and External Affairs; Interim Chief Medical Officer)

Any Other Business

17. None.

Cabinet Secretariat
October 2020