

WITNESS STATEMENT OF NAOMI LONG MLA

I, Naomi Long MLA, will say as follows:-

Part 1: Role and Background

1. I am a Civil Engineer by profession, having graduated from Queen's University Belfast in 1994 with MEng (Dist.) and practiced in a variety of consultancy and research roles in the 10 years prior to entering full-time politics. I have been an elected representative for the Alliance Party since May 2001, when I was first elected to Belfast City Council, where I served until June 2010, including a term as Lord Mayor in 2009/2010. I was first elected as a Member of the Legislative Assembly (MLA) in November 2003, during a lengthy suspension of the institutions. I became Alliance Party Deputy Leader in 2006, and was re-elected to the NI Assembly in 2007, when an Assembly and Executive was formed. I served as Vice Chair of what was then known as the OFMdFM Committee, now The Executive Office (TEO) Committee.
2. I resigned from Council and the NI Assembly on being elected a Westminster Member of Parliament (MP) in 2010, where I served one term. I was then re-elected to the Assembly in 2016 and served as a member of the Communities Committee until the collapse of the institutions. I was elected as Alliance Party Leader later that same year. I was re-elected to the Assembly in 2017, in snap elections triggered by that collapse; however, an Executive was unable to be formed. I resigned to take a seat in the European Parliament in 2019 after successfully contesting the European Elections, my term as an MEP ending with Brexit in January 2020. I was co-opted back into my Assembly seat on 9th January 2020 and was elected as Minister of Justice on 11th January 2020, when the Executive and Assembly were restored. Whilst the Executive collapsed on 5th February 2022, I remained in office as Minister. I was re-elected as an MLA in May

2022 and continued to serve as Justice Minister until 28th October 2022, in a caretaker capacity after the elections.

3. As Minister of Justice, I was responsible for a department comprising the core department and its five executive agencies: Northern Ireland Courts and Tribunals Service, Northern Ireland Prison Service, Youth Justice Agency, Legal Services Agency Northern Ireland and Forensic Science Northern Ireland. The Department also sponsors a number of Non-Departmental Public Bodies (NDPB) affiliated with policing and justice. The core department is organised into four directorates: Access to Justice, Safer Communities, Justice Delivery and Reducing Offending. The Department's functions are set out in the Northern Ireland Act 1998 (Devolution of Policing and Justice Functions) Order 2010.
4. As a department, we were responsible for the COVID-19 response within the department and, in particular, within Northern Ireland Prison Service, NI Courts and Tribunals Service, and other public facing services, with a view to ensuring we could minimise transmission of COVID whilst ensuring insofar as was possible business continuity. Furthermore, the department has responsibility for planning and delivering a facility for the management of excess deaths, a contingency particularly important in light of the vulnerability of Northern Ireland's only crematorium and the risk of death management systems becoming overwhelmed.
5. We were also responsible for liaison with the various operationally independent parts of the Justice family (e.g. Judiciary NI, Police Service of Northern Ireland (PSNI), Office of the Police Ombudsman for Northern Ireland (OPONI), Probation Board for Northern Ireland, The Law Society of Northern Ireland, Bar Council, Public Prosecution Service for Northern Ireland) who, whilst either completely or operationally independent of the Department, contribute directly to the resilience and delivery of justice. Our role in that regard was to liaise, identify issues and support where possible and appropriate resolution of those issues in a timely manner.
6. In the initial phases, we also liaised with the PSNI on behalf of the Executive to ensure that expectations regarding proportionality and practicality of restrictions and their enforcement was informed by operational input and advice from the PSNI. When the Taskforce was formed that role gradually passed to them.

7. As a Minister in the Executive, both I and Department Officials responded to proposals from The Executive Office (TEO), Health and other Ministers, to provide both justice and general feedback.
8. Finally, towards the end of the period our focus shifted to COVID-19 recovery and the need for additional resources for the justice system to clear the backlog in both the magistrates and crown courts and aid recovery of the other justice functions.
9. The following table sets out the list of Senior Civil Service (SCS) staff with whom I worked in my capacity as Justice Minister between January 2020 and March 2022 in discharging my responsibilities in response to COVID-19.

Name of SCS official	Job Title	Dates
Peter May	Permanent Secretary	January 2020 – March 2022
Deborah Brown	Director - Justice Delivery	January 2020 – March 2022
Ronnie Armour	Director - Reducing Offending & Director General of Northern Ireland Prison Service	January 2020 – March 2022
Anthony Harbinson	Director, Access to Justice Chief of Staff to the NI COVID-19 hub (seconded to The Executive Office) Director, Access to Justice	January 2020 - February 2020 March 2020 - August 2020 August 2020 – July 2021 <i>(subsequently left the Department on Temporary promotion to Permanent Secretary, DAERA)</i>
Julie Harrison	Director of Safer Communities	January 2020 – March 2022
Glyn Capper	Deputy Director, Justice Performance Acting Director, Access to Justice	January 2020 – May 2020 May 2020 – August 2020

Name of SCS official	Job Title	Dates
	<p>Deputy Director, Justice Performance</p> <p>Acting Director, Access to Justice and Northern Ireland Courts and Tribunals Service</p>	<p>August 2020 – July 2021</p> <p>July 2021 – March 2022</p>
Mark Goodfellow	<p>Head of Covid Co-ordination</p> <p>Chief Operating Officer, Northern Ireland Courts and Tribunal Service</p>	<p>October 2020 – May 2021</p> <p>May 2021 – March 2022</p>
Gillian Morton	Chief Executive, Forensic Science Agency	January 2020 – March 2022
Stephen Martin	<p>Covid Business Continuity Lead</p> <p>Deputy Director, Enabling Access to Justice Division</p> <p>Chief Executive, Youth Justice Agency</p>	<p>March 2020 – June 2020</p> <p>June 2020 – May 2021</p> <p>May 2021 – March 2022</p>
Peter Luney	Chief Operating Officer, Northern Ireland Courts and Tribunal Service	January 2020 – April 2021
David Lennox	Deputy Director, Corporate Engagement and Communications Division	May 2020 – March 2022
Maura Campbell	<p>Deputy Director, Policing Policy and Strategy Division</p> <p>Deputy Director, Criminal Justice Policy and Legislation Division</p>	<p>January 2020 – November 2021</p> <p>November 2021 – March 2022</p>

Name of SCS official	Job Title	Dates
Katie Taylor	Deputy Director, Community Safety Division	January 2020 – March 2022
Cathy Galway	Deputy Director, Protection and Organised Crime Division	April 2020 – March 2022
Lisa Rocks	Deputy Director, Financial Services Division	January 2020 – February 2021 <i>(sick absence between Feb – Sept 2021)</i>
	Deputy Director, Justice Performance	September 2021 – March 2022
Paul Doran	Director of Rehabilitation	January 2020 – December 2021 <i>(subsequently on long term sick absence)</i>
Sinead Simpson	Acting Deputy Director, Corporate Engagement and Communications Division	January 2020 – April 2020
Paul Andrews	Chief Executive, Legal Services Agency	January 2020 – March 2022
Brian Grzymek	Deputy Director, Criminal Justice Policy and Legislation Division	January 2020 – October 2021
	Deputy Director, Head of Legislative Programme	October 2021 – March 2022
Steven McCourt	Acting Deputy Director, Reducing Offending Division and Head of Covid Co-ordination	May 2021 – March 2022
	Acting Director of Rehabilitation	From December 2021 – March 2022
Lorraine Montgomery	Acting Deputy Director, Policing Policy and Strategy Division	December 2021 – March 2022

Name of SCS official	Job Title	Dates
Declan McGeown	Chief Executive, Youth Justice Agency	January 2020 – May 2021
Julie Wilson	Acting Deputy Director, Protection and Organised Crime Division	January 2020 – March 2020
	Acting Deputy Director, Victim Support and Judicial Policy Division	March 2021 – March 2022
Louise Cooper (now Watson)	Acting Deputy Director, Justice Performance	July 2021 – September 2021
Eamonn O'Connor	Acting Deputy Director, Enabling Access to Justice Division	May 2021 – March 2022

10. Ms Claire Johnson was my Special Adviser between January 2020 and October 2022, save a period of Maternity Leave (Monday 19th April 2021 – Sunday 24th October 2021). Maternity Cover was provided by Dr Patricia O'Lynn. Both were political appointments, made in line with the relevant legislation and guidance.

Part 2: Chronological consideration of how the pandemic developed and the response to it

Impact of absence of power-sharing

11. The Executive was reformed on 11th January 2020 and whilst there was a genuine attempt to make things work more smoothly than had previously been the case, there remained significant political tensions, especially in relation but not limited to Brexit, within the Executive and a lack of trust between some Ministers. As someone who was not a member of the Executive prior to 2020, it is difficult to comment on whether this was significantly worse than had been the case previously, or the degree to which it impacted the operations of the Executive beyond previous incarnations. However, relationships were strained and Executive meetings were often tense and exchanges terse from the outset.

12. Furthermore, as a result of suspension, each Minister was also coming into office facing a full inbox of issues which had been building up over the previous 3 years, some of which were urgently in need of resolution and others which were of significant public interest. In respect of the latter, there was significant pressure to prove that the Executive was capable of delivering progress for the public in light of the lack of delivery in the immediately preceding period.
13. The New Decade, New Approach Agreement had endeavoured to resolve some outstanding and vexed political issues and outline commitments that the Executive would deliver during the two and a half years left of the mandate; however, with a change in Secretary of State, the resources and actions anticipated from the UK Government (UKG) never materialised, placing significant pressure on Ministers.
14. Finally, many Ministers, myself included, were in their first term as a Minister and those with previous Ministerial experience were in new departments.
15. In summary, the bedding in process which one would expect in any new government was, therefore, considerably more challenging for the new Executive and directly coincided with the emergence of COVID 19.
16. The Health Service, in particular, suffered from the lack of political leadership and decision-making during suspension. On 25 October 2016, the then Health Minister had given undertakings in the Assembly to implement health reforms based on the Bengoa Review recommendations; however, the institutions failed in early 2017 before significant progress could be made. **[NLO/1 – INQ000409322]**
17. A legacy of underfunding of frontline health services coupled with higher demand in Northern Ireland (due to poorer levels of physical and mental health than in other UK regions) and a lack of political stability had created a perfect storm within the health sector.
18. Indeed, at the point when the Executive was being reformed, there was a live dispute during which healthcare staff were striking due to poor pay and unsafe working conditions. One of the priorities in restoring the Executive was to resolve that industrial dispute **[NLO/2 - INQ000391422]**.

19. It was clearly the view of the Health Minister that those factors - lack of funding and health reform delivery - were an impediment to the health response to the pandemic and that seemed to me to be a completely rational and logical view.

The outset of the pandemic

20. At the time of the Executive being reformed, I was not sighted on internal TEO analysis, such as that provided to the TEO Board, with regards pandemic preparedness, nor was I aware either of their view that EU exit preparations meant that Northern Ireland was 18 months behind the UK in terms of ensuring sector resilience to any pandemic flu outbreak, or the evidence upon which that conclusion was reached. In my role as Justice Minister, I would not routinely be sighted on such information relating either to internal communications within another Department or those communications at Board level. As far as I am aware, the Departmental Boards are concerned with the governance of the Department and engage directly with the Permanent Secretary in his role as Chief Accounting Officer, rather than with Ministers who have not oversight function with respect to the Board.
21. However, it would be fair to say that it was a widely held view that the predominant threat to Northern Ireland's resilience, both political and sectoral, in the years since 2016 and in the early part of the Executive's term was the uncertainty around exit from the European Union and future arrangements. For example, a separate Brexit Sub-Committee of the Executive was established early in the mandate to specifically address the issues arising as a result.
22. The Minister of Health raised the watching brief that he and the Department of Health were maintaining with respect to the emerging threat from COVID-19 globally at the first meeting of the Executive on 3rd February 2020, under AOB. **[NLO/3 - INQ000065432]**
23. The Executive was briefed by DoH at an early stage that it was "a case of when not if" COVID-19 would arrive in Northern Ireland; however, I have no record of when exactly that statement was made. I am aware that a review of non-health sectoral impacts was undertaken during this period, as it was presented to the Executive during March.

24. I cannot speak to what considerations were given within TEO or within the Department of Health to the nature of COVID-19 as a Coronavirus rather than influenza, as I would not have been party to such internal deliberations in my role as Justice Minister; however, in a memo circulated by the Health Minister to Executive members dated 15th February 2020 [NLO/4 - INQ000390947], in which the NI specific clauses to the UK-wide Coronavirus Bill were set out, it was stated at para 4 that “*The four UK Chief Medical Officers agreed that, given the potential health and social consequences of a major pandemic, it was appropriate to plan and prepare for the reasonable worst case scenario (RWCS) of COVID-19 pandemic moderate severity, without a vaccine. Existing pandemic flu guidance was therefore used to plan for the potential impact on health and society while The Cabinet Office collated information in order to devise an RWCS for the 2019-nCoV outbreak.*”
25. It was, therefore, apparent that the NI response was following the UK-wide approach of using flu planning as a proxy for COVID until further detailed information on the novel coronavirus was available. It also, however, implicitly acknowledged the difference between the two.
26. The decision as to the point at which NI Civil Contingencies Management Arrangements (NICCMA) and other civil contingency measures should be triggered in response to any pandemic or other emergency in Northern Ireland is not one on which I was briefed or sighted at this point. Neither would I have been sighted on TEO Board papers or other internal memos as Justice Minister, as they are internal to TEO. I am not aware of any work to prepare the people of Northern Ireland for a pandemic.
27. Under the NI Executive structures, civil contingencies are the statutory responsibility of TEO: the management of excess deaths was the only element of civil contingencies planning within the statutory responsibility of DoJ and was progressing in Feb/March 2020, alongside wider justice preparedness.
28. Whilst aware of the World Health Organisation (WHO) announcements throughout the period, I cannot recall at what point I became aware of individual announcements or specific actions which were triggered by them; again, TEO and Health as lead departments for civil contingencies and health, respectively, would

have been responsible for formally monitoring such advice to inform any action and/or reports or recommendations to Executive.

29. By the point the Executive held its first substantive discussion about COVID-19 on 2nd March 2020, my understanding of the urgency of the situation was informed not only by Executive briefings but also by news reports of significant fatalities in other countries and I regarded the threat as incredibly serious. My own department was already advancing plans for the NI Temporary Resting Place (NITRP) to address any issues with any excess fatalities above the capabilities of the existing death management systems arising from the pandemic. I was, therefore, acutely aware of the potentially serious nature of the crisis. The work of my department in respect of management of excess deaths was advancing as was preparedness within NI Prison Service.

30. I was unable to attend the meeting of 10th March 2020, as I was ill, having been admitted to ED with chest pain and breathing difficulties, due a partially collapsed lung: this was later retrospectively diagnosed as Covid-19. I cannot, therefore, provide any further clarity on the context of nor the response to comments at that meeting. However, it is clear from my correspondence to Executive colleagues dated 13th March 2020 [NLO/5 - INQ000409337] that I was already concerned about “conflicting messaging emerging from the Executive” and “confusion or perceived conflict between Ministers and the advice of the Chief Medical Officer” at this point. This correspondence was written in response to media comments made by the then deputy First Minister, which was contrary to the agreed position of the Executive, in line with advice of the CMO, in relation to school closures; namely, that they were not required at that time. In response to increased public concern following the decision by the Irish Government to close all schools with immediate effect, described elsewhere in this statement, Ms O’Neill publicly stated that it was her view “the time for action is now” and that Northern Ireland’s schools should also close.

31. On 16th March 2020, Executive Ministers were briefed that, due to COVID-19 continuing to escalate globally, the WHO assessed that the outbreak now had the characteristics of a pandemic on the 11th March 2020, triggering a move from Contain to Delay phase on the same date [NLO/6a - INQ00023224 , NLO/6b - INQ000409339]. After discussion of potential impacts and associated mitigations of measures aimed at slowing the spread of the virus, which were likely

to result in noticeable disruption to normal life, Ministers agreed the phased activation of the NICCMA arrangements and phased stand up of the NI Hub. We did so as soon as advised that this was necessary by TEO, NICS and HOCS who were responsible for this element of response. It is difficult to know whether it would have been helpful to the Executive had this happened sooner. A Ministerial-level meeting of the Civil Contingencies Group (CCG) was held on Thursday 12th March with a further meeting scheduled for Wednesday 18th March.

32. Throughout the pandemic there was a tension between the desire of some to align with the UKG response to the pandemic and the desire of others to align more closely with the Irish Government to deliver a “whole Island” approach. That tension broadly, though not entirely, mirrored the unionist/nationalist divide; however, it was also driven by a lack of confidence in UKG leadership at that time, with the view that the Prime Minister and some of his cabinet colleagues were untrustworthy and unreliable being widely held.
33. There were, however, practical as well as political considerations at play in that debate.
34. Firstly, our advice and scientific guidance came from UK SAGE and via the four UK Chief Medical Officers (CMOs) and, therefore, aligned with the UKG advice, which did not recommend any action at that time. Whilst animal health is not an entirely appropriate comparator, given public behaviours are also impacted by, for example, media and news broadcasts, cultural differences and attitudes, large numbers of NI diaspora in GB, my very basic understanding of epidemiology suggested that there might be benefits to implementing an all-island approach, as we had for previous animal health crises, such as foot-and-mouth disease and Bovine Spongiform Encephalopathy. The sanitary and phytosanitary firewall provided by the Irish Sea and the relative ease with which movements could be controlled at that interface, coupled with closer alignment between the Executive and Irish Government’s approach on the coherence of regulations applying to populations living and working along the very permeable land border, I felt may have offered some benefits in combating a population-driven transmissible disease. However, all of our medical and scientific advice was very much aligned to and reliant upon UK SAGE.

35. Secondly, not all the actions required to align with the Irish Government response or adopt an all-island approach, lie within the devolved space, or are those which we would have had the capacity to implement. Control of air traffic and air space is one such matter that is not devolved.
36. Thirdly, our budget for dealing with COVID-19 was essentially set by the spending of the UKG via Barnett consequential, so if we wished to do more or go further, we would have to find the additional resource to do so from within our own already strained budgets.
37. Fourthly, we were conscious that, for those living in border communities in particular, the differences in approach north and south created challenges and a degree of public confusion, frustration and anxiety. This was especially the case around school closures, where people could see schools, some less than a mile apart, taking fundamentally contradictory approaches (a point made in my letter of 13th March 2020 [NLO/5 - INQ000409337]).
38. Fifthly, to the best of my knowledge, and despite the mechanisms in place, it was my strong perception that the Irish Government and UKG did not liaise proactively either with each other or with the Executive in advance of announcing their respective responses, and so there was no collective consideration of the problems that would create for a region with a land border and for the Executive in rationalising any conflicts that may arise from differing approaches. This was particularly evident at the time of announcement of the first lockdowns, as I have stated elsewhere.
39. With respect to the approach of the Irish Government, I cannot comment on how they reached their decisions or what the evidentiary basis either for that or the comments attributed to the Head of the Civil Service (HOCS) that there was *“no medical/scientific evidence to support the measures announced by the Taoiseach”* on 12th March 2020 [INQ000232525] may have been, nor was I party to the discussion between HOCS, the First and deputy First Minister, and the Minister of Health and Permanent Secretary.
40. There was no evidence that his announcement had caused panic in Ireland: my recollection from this time is that the measures were largely well received and adhered to by the general public. However, as described in my letter of March 13,

the difference in approach north and south, particularly with regards to schools, did cause anxiety in Northern Ireland [NLO/5 - INQ000409337].

41. As the scientific and medical experts available to the Executive, heavy reliance was of necessity placed on the advice and guidance of the CMO and Chief Scientific Adviser (CSA) throughout the COVID-response. Much of the evidence presented to the Executive on which we were basing decisions came via them from SAGE. They were the sole source of medical and scientific advice regarding COVID-19 on which I relied during the pandemic.
42. I am unaware of the full extent of engagement officials had or sought with their counterparts in Ireland with respect specifically to their modelling or scientific advice, though we were advised that our modelling was being shared with the Irish Government.
43. The issue of the need for more cross-border co-ordination and collaboration, however, was raised at the Executive on a number of occasions even at this early stage and more frequently as the approach of Ireland and England increasingly diverged. This was despite the existence of Quad meetings, in which I was not directly involved.
44. With respect to NI Executive response, on 16th March, we were advised of three key things: firstly, that it was too early to introduce government restrictions, but that people should act to minimise contact voluntarily; secondly, that anyone who thought they might have COVID-19 should self-isolate, but testing would only be used for those with symptoms; and, thirdly, that we would continue to follow the wider UKG approach.
45. The Health Minister also stated that the limited resources available within DoH should be focused on treating COVID-19, rather than testing for it on 16th March 2021 [INQ000065689, page 2]. The Health Minister further stated that the approach was based on advice of the CMO.
46. My primary concerns were that Public Health England appeared to be undertaking a more proactive “test, trace and isolate” programme and that disagreements within the Executive were increasingly becoming public, which risked undermining confidence in any advice issued.

47. In my letter of 1st April 2020 [NLO/7 - INQ000409340], I noted that we had been briefed at the Executive meeting of 30th March by the CMO that testing was suspended due to “*a global shortage of the chemical reagents required for testing*”, a message reinforced by UKG Ministers in the media. However, the Chemical Industries Association disputed the existence of this shortage in the press and so I had written to the Health Minister to seek clarity on the reasons for testing being halted. I remain unclear as to the actual rationale.
48. It was not my understanding that test and trace was suspended for clinical or scientific reasons, nor was I of the view that test and trace had reached the end of its efficacy at that point.
49. By 16th March it was my perception that some Ministers were expressing opinions based on alternative views and/or advice, though they never explicitly stated that this was the case; whether those views/opinions could be considered “expert” is not something on which I could comment, as I am unaware of the sources and this information was never proffered or discussed at Executive. I can think of no reason why such sources of information would not have been shared with Executive colleagues. Views may also have been influenced by contact with or lobbying by constituents and even other party colleagues rather than alternative sources.
50. Further, there was also widespread discussion and debate on the approach of the Executive and other governments, particularly the Irish Government, in the media and the scientific basis for those choices, so it was impossible as a Minister not to be aware of the differences in approach being adopted globally, and those discussions often emerged during the Executive in the context of the rationale for our decision-making.
51. I sought to rely on the advice of the CMO, CSA and other officials and, where I had questions or concerns in relation to either the advice or the decisions arising from it, I raised those with the CMO and CSA via the Health Minister and circulated those to the whole Executive, or did so with them directly at the Executive itself, as I considered it their role to advise Executive collectively. I cannot comment on the degree to which this was the case for other Ministers.
52. Furthermore, whilst important to properly interrogate the advice of officials and ensure that advice is robust, or to highlight any inconsistencies, as a Minister, I did

not feel that someone who was not an experienced epidemiologist or virologist was in a position to proffer alternative theories or science in such a specialist area.

53. As announcements were made in London and Dublin, mostly without the Executive being sighted on the precise nature of those announcements in advance, there was enormous pressure for us to clarify the situation in NI immediately. That pressure from the public and particularly from the media made it feel as though we were entirely reactive to events elsewhere rather than making timely decisions based upon the best evidence in Northern Ireland.
54. In particular, with relation to closure of schools, anecdotally parents were already removing their children from schools in significant numbers before the Executive took a decision, again, appearing to be reactive and indecisive.
55. I found the decision-making process at times opaque and frustrating. The degree to which others concurred with that view is harder to quantify: certainly, Minister Mallon and I were both in a similar position, both in terms of party numerical strength in the Executive and in relation to the extent we were engaged in the decision-making process, as the only Ministers who had no party representation in TEO or DoH, when the discussions were taking place about what would and would not be tabled at Executive. We both expressed considerable frustration and concern at the opacity of the process.
56. The First Minister (Democratic Unionist Party (DUP)) and deputy First Minister (Sinn Féin (SF)), plus the Health Minister (Ulster Unionist Party (UUP)), with their officials and advisers, were directly engaged in a pre-Executive process, as the First and deputy First Minister were required to jointly approve every paper to be tabled at the Executive, and so had complete control of the Agenda and could influence the tabling and content of papers.
57. Over time, I became concerned that had become what appeared to be a pre-negotiation around the recommendations which would be put to the Executive for agreement, with four main consequences. Firstly, the Executive was often delayed whilst agreement was sought on what would be tabled and consequently papers were circulated at the last moment, impeding our ability to take advice. Secondly, both Minister Mallon and I would regularly hear via media rather than through Executive papers the options which would be coming to Executive for decision. Thirdly, I had the general impression that the advice being given to Executive by

officials was, on some occasions, especially in the latter stages of the pandemic, being influenced by what was judged politically possible rather than driven purely by the evidence and science. An example of this would be the modification of the Christmas “bubbling arrangements”. Fourthly, it at times felt as though decisions had already been taken by the point my input was sought given the extent of pre-engagement of some Ministers prior to Executive meetings. Due to the political make-up of the Executive, where an agreed position was reached between the DUP and SF on any matter, the views of other Ministers could simply be discounted.

58. At the Executive Committee meeting of 19 March 2020, Sir David Sterling outlined how the Executive Committee would function to respond to the pandemic [INQ000065737, pages 13 to 14].
59. The administration and operation of the Executive including the scheduling of meetings, chairing and agenda, is the joint responsibility of FM and dFM and all of the Machinery of Government are the responsibility of TEO, as was the operation of NICCMA and the NI Hub.
60. With respect to contingency plans for the operation of the Executive, this rested entirely with TEO and I would not have been sighted on their plans, thresholds for implementation of different features; or why decisions were taken internally at any particular juncture.
61. At that meeting on 19th March 2020, the Health Minister advised Ministers of the worst-case scenario for Covid-19 in Northern Ireland, of 32,000 new cases per day with 9,500 deaths. With intervention, he advised the number of new cases per day would be reduced to 10,000. My Department and I had already been briefed in relation to the potential worst-case scenario due to our statutory function with respect to death management arrangements in the context of a serious incident/civil emergency such as a pandemic. I am not aware of whether other Ministers were similarly aware of the potential scale prior to that meeting.
62. During that meeting, the Minister for the Department of Agriculture, Environment and Rural Affairs (DAERA) expressed concern that “*as an Exec, we are behind the curve. Need to get ahead*” [INQ000065737, page 25]. I cannot comment on what Minister Poots meant by his comments, or to whom, if anyone, they were addressed; however, they seem to echo my own concerns in that meeting that we

appeared to be reacting rather than leading this this situation. Similar sentiments were expressed by the Health Minister in correspondence of 29th March 2020 [NLO/8 - INQ00023229] when he stated “...I do feel that we – as a system – have largely been in reactive mode. That is not meant as a criticism, but rather a recognition of the inherent speed and uncertainty with which events have been unfolding.”

63. With respect to my own Departmental responsibilities, in the areas for which I had direct responsibility, including the delivery of the NITRP, I believe that we acted in a timely manner and our preparations were set out in a Written Ministerial Statement to the Assembly on 16th March 2020 [NLO/9 - INQ000409342], an Oral Ministerial Statement to the Assembly on 23rd March 2020 [NLO/10 - INQ000409323] and an update to the Executive Committee on 30th March 2020 [NLO/11 - INQ000409324]. I then continued to update the Executive, Assembly and Justice Committee on a regular basis.
64. In these early stages of the pandemic, in Northern Ireland our response was guided almost entirely by the UKG and the scientific advice provided to them and disseminated to the Executive by the Health Minister, CMO and CSA.
65. As a result, the view of the House of Commons Health and Social Care and Science and Technology Committee’s report titled “Coronavirus: lessons learned to date”, published on 12th October 2021, that the slow and gradualist approach adopted by the UKG and its advisers was the wrong policy and “led to a higher initial death toll than would have resulted from a more emphatic early policy” is as applicable to Northern Ireland as the rest of the UK, and mirrors some of the frustrations and concerns which a number of Executive Ministers, including myself, felt at the time. However, in the absence of any alternative scientific advice it was hard to provide a rationale for deviation from that policy.

Herd immunity

66. To the best of my knowledge, herd immunity did not form any part of the plans for NI and it was never formally considered by the Executive as a viable approach to the pandemic. I was not present in the meetings between The Executive Office and Health Ministers and their officials, so cannot speculate as to what discussion may have taken place during those sessions.

67. However, in our Executive meeting of 16th March 2020 [INQ000065689 , page 10], when challenged about the UKG approach, the Health Minister said, “*That [herd immunity] is not our strategy.*” I stated that we needed to get the message out publicly that “*Herd Immunity – not our policy*”, to reassure a nervous population that we were not adopting such an approach, as there was increasing unease that the UKG may be doing so.

The first lockdown in Northern Ireland

68. I cannot recall precisely when we became aware that UKG intended to announce some form of lockdown: however, I do recall watching the announcement by the Prime Minister was the point at which I first became aware of the detail.
69. Regarding the timing of the first lock down in Northern Ireland, I would broadly concur with the views of Baroness Foster, in her submission to Module 1 of the inquiry, in the respect that we were following the lead of the UKG and their medical advisers, and that the levels of COVID in NI remained significantly lower than in England in particular.
70. Whilst we had not been advised that a lockdown should commence prior to that in the rest of the UK, we were made aware that such a significant intervention may be necessary at some point.
71. With respect to the consideration of the impact on disadvantaged groups, including those covered by s75 of the Northern Ireland Act 1998, one of the main reasons for introducing the lockdown was because we were so concerned that those with underlying health conditions, clinically vulnerable or otherwise immunocompromised, including older people, those with disabilities and certain ethnic groups, would be at higher risk of serious illness and death from rising community transmission.
72. It was also clear to me, qualitatively, that the impact on areas such as social isolation, routine and preventative healthcare, education and early years socialisation, and on the economy and public services, would be significant and require sustained government intervention, both during and post lockdown, to ameliorate this.

73. Furthermore, it was recognised in the Department of Health's COVID-19 Emergency Response Strategy [NLO/12 - INQ000023185], Strategic Aim 7: *"Understand the wider health / economic impact of control measures: Work should be undertaken to understand the long-term impacts of the control measures on the health of the population, and on the NI economy, to include the relative impacts on the most and least deprived"* and in FINAL EXECUTIVE PAPER: EMERGENCY RESPONSE TO COVID-19, MEMORANDUM E (20) 34, including Annex B [NLO/6a - INQ000023224 , para 7, NLO/6b INQ000409339] when the wider impacts, including non-health impacts and mitigations were outlined for discussion at Executive, for example.
74. It was not, therefore, a decision which I entered into lightly and, whilst not all of the consequences or their extent, could be fully anticipated at the outset, consideration was given at the time to how we could support those impacted most negatively by the lockdown itself.
75. Even with the benefit of hindsight and my belief that we should have acted earlier, more decisively and coherently to curb community transmission, I do not believe that would have prevented the need for a period of lockdown and the evidence from other countries would tend to support that view.
76. All of the health protection regulations throughout this period were made by the Department of Health (DoH) and laid by them before the Assembly under section 25Q (Emergency Procedure) of the Public Health Act (NI) 1967. My department and I played no particular role in the enactment of the regulations of 28th March 2020: the Regulations were not brought to the Executive for discussion, but were agreed by Urgent Procedure, the use of which was justified on this occasion, due to the necessity for swift action to be taken.

Amendment of Regulations

77. The approach taken regarding the relaxation of the restrictions in the early phases of easing was almost exclusively driven by individual Ministers making requests and each being considered by Health officials in terms of what impact it might have on transmission. Some requests were a response of informal lobbying of Ministers, whether by constituents, local businesses or others.

78. In my view, this led to inconsistencies and anomalies, for example, between the messaging that people should only leave home for essential purposes and yet being told there were other places they could go; with similar enclosed spaces being subject to different rules at the same point in time, depending on their use and whether or not alcohol was served; people being able to visit a grave in a churchyard but not a Council cemetery; or being able to meet strangers in a retail setting, but not close family at home.
79. Those inconsistencies intensified criticism of the decision-making and risked undermining confidence in the scientific advice and rationale which underpinned it in the media and general public. I feared that would lead to reduced compliance.
80. Whilst a mechanism was introduced after the Executive meeting of 7th May 2020, to try to better manage the easing of restrictions, it continued to be a vexed area and the opacity of decisions and the rationale remained a source of continuing frustration and stress throughout the pandemic.
81. I believe that the “Point in Time Review of the Executive’s COVID 19 Strategy” was a helpful document in identifying the totality of actions being undertaken and areas for future action and attention. However, some of the issues identified were never fully resolved. Examples and their impact on the response to the pandemic are outlined in paragraphs 78-79 of this statement.

Civil contingency arrangements in the first part of the pandemic

82. My interaction with the NI hub during this period was limited to data which was fed into the NI Hub by my officials and receipt of the Situation Report (SitRep) and other monitoring output via the Executive, so I would not be able to comment usefully as to the degree to which it was able to meet the objectives set out in **INQ000145786**, page 11. I did find the information and data presented to the Executive useful in helping inform our decision-making.
83. As Justice Minister, I was also not party to the decision-making of Civil Contingencies Group (CCG), which was as stated previously, the responsibility of TEO, and so have nothing to add to the findings of the Lessons Learned Review. Similarly, any changes implemented after the Review would have fallen entirely within the Departmental remit of TEO and as such would have been progressed

by TEO and NI Hub officials and HOCS, under the scrutiny of FM and dFM. I do not recall being briefed on this matter at the Executive.

84. The Executive was advised at our meeting on 21st May 2020, that CCG had completed all the tasks remitted to it, and so would be stood down and that the NI Hub would be scaled down; however, SitRep would continue to be produced. I was not involved in management arrangements which were the responsibility of TEO Ministers, and am not aware what structures if any replaced the NI Hub when it was scaled down.
85. I note the comments made by Baroness Foster in her submission that a “balance” needs to be struck between what officials do and do not share with Ministers to aid with decision-making; however, I do not concur with this view. Interactions between and the respective roles of Ministers and officials are set out clearly in the Civil Service code of conduct, including that they have a duty to impartially inform their Ministers of all relevant information affecting the department and necessary for the making of decisions.
86. Within my own department, I expected and believe I received full candour from officials when making decisions. We operated on a basis of respect, openness and transparency.
87. However, as I have stated earlier, I had a strong perception that decisions were increasingly being shaped by political ideology and lobbying, rather than a solely evidence-based approach. This was a concern for me particularly as we began to relax restrictions. Issues would be raised often with a priority which seemed to reflect the latest public criticism or Ministerial engagement with a sector, rather than in a manner that reflected their significance in managing the pandemic. Examples would include what was in my view, the disproportionate emphasis on garden centres and coffee shops reopening.
88. In general, in such circumstances, it is perhaps more difficult for officials to give advice to Ministers, particularly where they answer to two Ministers from different parties and who are diametrically opposed. There were occasions when my perception was that advice was presented in such a manner as to avoid direct conflict.

Overarching view

89. In general, I believe that despite the challenges I have highlighted elsewhere in this statement, the Executive did our best to respond to the advice which we received in a timely way and to maintain as coherent a position as is possible in a mandatory coalition, encompassing such a diversity of political opinion and philosophy. The impact of joint press conferences, for example, involving Ministers from all the Executive Parties throughout this period, which may be taken for granted elsewhere, were in the context of Northern Ireland a very powerful demonstration of the collective desire to act cohesively in the interests of the public, even if that cohesion was not always fully maintained under pressure.
90. As with every other Government, as the pandemic began, we were responding to rapidly unfolding events, without any previous experience of managing a pandemic, and in response to a novel virus about which scientific and medical knowledge was still evolving. I believe that the Executive did the best it could to protect people's health and avoid the already pressured healthcare system becoming overwhelmed, given the information and advice to which we had access at that point in time, which is the only fair basis on which to assess performance.
91. The easing of restrictions was, in my view, the least cohesive part of the response, as there was no overarching strategy as to how and when different relaxations would be implemented and so the public saw some of the decisions as arbitrary and inconsistent. I think that this may have impacted negatively both on how the public viewed the competence of the Executive during later waves of the pandemic and, alongside high-profile breaches by politicians and public figures (described elsewhere), on compliance with the Regulations.
92. I cannot recall any formal overarching review of the pandemic response or its differential impact on vulnerable or differentially impacted groups by the Executive: however, these were matters that were discussed at Executive frequently and were covered in papers from individual departments, in terms of the additional financial and other support needed for various groups and the need for investment in recovery.
93. In my own department, no single document was developed by way of a review across the Department of Justice: however, areas impacted and vulnerable groups were identified throughout the pandemic and mitigations were designed to address

those issues. For example, prisoners were affected by the ending of in-person visits and prison education provision. In response, we increased other activity and moved quickly to remote visits to ensure prisoners and their families were able to maintain relationships and to provide reassurance. Similarly, as waiting times in courts were inevitably going to be impacted, we were conscious of the impact on victims and provided additional support in that area. We also significantly increased the use of remote access to courts to address access to justice for vulnerable groups, such as in the family courts.

94. Learning from the first phase certainly helped us greatly in our response to the later stages of the pandemic, by which time physical modifications to buildings, the use of technology and new working practices had become more settled and normalised.

Decision-making after March 2020

95. As contingency planning was managed by TEO and CCG in collaboration with DoH, I would not have been sighted on what preparations were being made: however, within DoJ we continued to prepare on the basis that a further surge was likely. Executive would be briefed on such matters only where a paper was initiated by the responsible department/s or where an Executive-level decision was required: in other circumstances this programme of work would fall within the scope of Departmental autonomy.
96. With respect to relaxations, Executive Ministers held different views as to whether indicative dates should be offered in the initial phase of the pandemic.
97. Whilst offering potential dates for relaxations offered people some hope of moving back towards normality and time to prepare for reopening and restarting activities, I felt that public messaging should equally place emphasis on the conditions necessary for easing each set of restrictions, rather than offering essentially arbitrary dates to which we would then be held.
98. Even when offered on a purely indicative basis, people invested in those dates both financially and emotionally, leading to anger if the prevailing conditions at the time were not conducive to further relaxations proceeding as planned.

99. The desire to meet people's demand for certainty during a period of unpredictability was understandable, but unhelpful in assuring people that we were trying to respond to risk rather than behaving in an arbitrary manner.
100. I think it also became apparent that individual Ministers had different levels of understanding and expectations of the statistical analysis and science behind the modelling and of the degree to which any model can accurately and reliably "predict" what might happen in future.
101. At a time of complexity and uncertainty there was an understandable, though in my view unreasonable, desire to have simplicity and certainty, which was often a factor not only of media and public discourse but of Executive discussions, themselves.
102. Also, the understanding of the Coronavirus itself (including its variants) was constantly evolving in light of research and experience: the discovery of new information about the morbidity and transmission vectors is a factor of any novel virus and does not render previous science wrong, but merely our understanding incomplete at that time.
103. I understood from the outset that our understanding and response would of necessity have to evolve as we gained more insight into COVID-19. I also consistently stressed the importance of communicating the rationale for our decisions as well as the decisions.
104. As restrictions were relaxed, especially regarding hospitality, the public also relaxed adherence to the guidance issued in respect of Non-Pharmaceutical Interventions (NPIs), as people became more complacent. Fatigue, pressure to return to work, the need for family support and pressure of isolation were all factors in lower levels of adherence and increased rates of infection.
105. Resistance to mask wearing, in particular, was an increasing factor in managing the pandemic via NPIs. Adherence to social distancing was also beginning to erode as people started to drop their guard and reassume more normal patterns of behaviour as relaxations progressed.
106. Whilst relaxations of the restrictions were anticipated to lead to an increase in transmission, it would be fair to say that the impact of reopening on people's adherence to the basic NPIs was possibly not fully appreciated or factored into

those considerations and the advice which we received. Those behavioural impacts were, in all likelihood, underestimated. The Executive was also increasingly divided on issues around the issue of restrictions to control the pandemic, making coherent messaging very challenging.

107. After a challenging summer period, at the Executive Committee meeting on 1st October 2020, the First Minister: *“advised that an appropriate point had been reached to consider and implement a reset of the Executive’s approach to the management of the Covid-19 pandemic. FM outlined Exec may wish to consider, including other issues, reference to the Framework for Decision Making and inclusion of family impacts in the decision-making process”* [INQ000048491].
108. This appeared to be an attempt by the First and deputy First Minister to reset strained relationships and improve engagement within the Executive, acknowledging the need for a more structured process for decision-making and the need for the impact of NPIs on personal and family life to be better accounted for in that process, alongside economic and health concerns. In my view this was only partially successful: there were clearer mechanisms set out by which to escalate concerns and raise issues, however they were sometimes ignored and the rationale for choices remained somewhat opaque.
109. I cannot speak as to how other Ministers anticipated things would develop over the Autumn; however, as we entered the autumn/winter period when other respiratory infections and viruses tend to be more prevalent, and particularly as people’s behaviours change (spending more time indoors, less ventilation and so on), it seemed logical that COVID rates may also rise, given similar transmission pathways.
110. A further and potentially more significant wave of COVID-19 had also been predicted from the Spring and we were aware due to briefings at each Executive meeting of the rates of transmission of COVID-19 across Northern Ireland at each stage.
111. With respect to modelling, it was also repeatedly reinforced by the CMO and CSA that modelling could not predict the future but only provide some indication as to what may happen in response to a range of assumptions. I am not sure that this was always fully appreciated either by other Ministers or the public. As someone familiar with using modelling in my previous work as an engineer, I know that the

outputs from even a good model are only as reliable as the inputs; however, I don't have sufficient expertise in epidemiology, or virology, nor was I sufficiently close to the modelling to hold an informed view on how well the model replicated the spread of the virus. Questions about the reliability of the modelling and how that changed over the course of the pandemic response are questions that I believe are the preserve of expert witnesses.

112. By the 8th October, when the CMO expressed significant concern about the spread of COVID-19, there were a wide range of factors impacting transmission: house parties, the reopening of retail and hospitality, and Eat Out to Help Out in particular, plus a relaxation in public focus on NPIs as people became complacent/fed-up with restrictions.
113. I had raised concerns on 27th September about the planned easing of restrictions in relation to arenas and large-scale events, which appeared to have been agreed with DoH, only days before these comments by the CMO. The two appeared not to be consistent.
114. I also noted that, with the introduction of masks, there appeared to be a significant relaxation in other NPIs, such as queue management, trolley sanitisation, and social distancing, particularly visible in retail settings but not confined to that environment. Whilst masks were thought to have a small but positive impact on reducing transmission, I was increasingly concerned that they were being treated as an alternative rather than supplement to other more significant NPIs by the public. Having raised this at Executive verbally for a number of weeks, I put my concern in writing on 8th October 2020, as I saw little evidence of it being addressed. **[NLO/13 - INQ000409326]**
115. My further concern was that at least some of the differentials geographically were due to factors outside the control of individuals. For example, in more affluent areas, where people had more opportunity and space to work from home and more access to private outdoor space, transmission rates were lower, whilst in areas of higher deprivation, where those things were less available, they were higher. Cross-border transmission was also a factor in different directions at different points in the pandemic.
116. I felt strongly that we needed not to demonise or alienate people, but instead encourage and support them to implement the NPIs as effectively as possible, as

people were feeling demoralised and overwhelmed by the constant stream of negative news stories and were in danger of believing that their individual actions would have no impact. Such a fatalistic view would be incredibly dangerous. I believed our emphasis should be on the 80% who were complying and trying to increase that percentage by, firstly, giving people some hope and sense of agency in a very stressful situation and, secondly, targeting communications to those groups less likely to comply.

117. The emphasis with respect to enforcement focused on the “4 Es”: Engage, Explain, Encourage, Enforce, with enforce being the last resort. That was the approach also adopted by the PSNI, in line with the National Police Chiefs’ Council (NPCC).
118. I believe that decision of 18th October 2020 to implement a “circuit-breaker” was necessary and should have been implemented earlier, when the trajectory of spread was already clear.

Executive Meeting of 9 November 2020

119. At the time when the circuit breaker was originally introduced, it was hoped that it would only be in place for two weeks and this was communicated to the public; however, at the end of that two weeks, the CMO and CSA advised that a further extension would be required, and two further weeks was agreed. There was an increasing level of resistance within the DUP in particular to agree to any further lockdown/extension. Anti-lockdown protests had taken place and there was increasing opposition to what was viewed by a small but vocal minority as an abuse of human rights as opposed to a proportionate and necessary public health intervention.
120. When the Executive met on the 9th November 2020, it was in that context and so tensions were already high. We met on Monday aware that the regulations and guidance for the circuit breaker would automatically fall at midnight on Thursday unless an extension or alternative proposal was agreed.
121. Furthermore, it was my perception that there was increasing tension over recent weeks between the Health Minister and TEO as to their respective roles in bringing forward recommendations. The Health Minister was of the view that his role was to bring forward health advice: if recommendations were to take account of matters

other than health, such as the economy, community or financial impact, it was a matter for TEO to bring them forward, based on the advice of the Ministers responsible. TEO took the view they needed the CSA and CMO to approve any proposal, and so recommendations were a matter for the Health Minister, as these were fundamentally health regulations. I believe that, as the recommendations became more politically controversial, the Health Minister felt that responsibility should be shared with TEO Ministers, and in particular the DUP Leader, to stave off criticism from DUP MLAs that the measures he was recommending were draconian.

122. The DUP were already making clear their opposition to any further extension of the circuit breaker, despite the recommendation of the CMO and CSA. They indicated that they would deploy a so-called “cross-community” vote on the health paper recommendations, essentially operating a veto. This mechanism effectively discounts my vote and sectarianises the issue: as such, I had made clear when I entered the Executive in January 2020 that use and abuse of the mechanism would lead me to reconsider my position. Their decision to do so on an issue which had no differential impact on those with different constitutional positions was an abuse of process and escalated already heightened tensions further.
123. Given that they could not be persuaded to accept the recommendations from DoH, attempts were then made to find a compromise short of allowing all of the measures to fall; however, the Health Minister maintained that the advice remained unchanged as did his recommendations, so any compromise proposal would have to come from elsewhere. The CMO also stated during the course of the meeting that any alternative approach would lead to additional excess deaths, which further raised the stakes in the meeting, as those seeking compromise were in fact trying to minimise the impact of the DUP’s refusal to agree the health recommendations, but risked being on record as having supported something contrary to the CMO’s advice and which caused unnecessary loss of life.
124. In the absence of any written proposals to the contrary, the Health paper was put to a vote and blocked by a DUP veto. At that point, a series of verbal proposals were put to and by Ministers, in an attempt to reach a compromise and avoid all circuit breaker regulations falling, in what could only be described as a series of chaotic and often ill-tempered exchanges that were not helped by the fact that what was taking place was being leaked to the press in live time.

125. The proposals made by various Ministers, whilst well intentioned, lacked clarity and specificity on issues as basic as the difference between a café and a restaurant, whether enhanced restrictions for licenced premises would also apply to unlicensed premises which allowed people to bring their own alcohol, and whether allowing hotel stays would conflict with the guidance that one should travel for essential purposes only. There was no way that Ministers could agree such important issues in the absence of detail, an assessment by the CMO and CSA of the proposals, and without having them in written form.
126. We then had a series of adjournments to allow papers to be developed and eventually a vote to be taken to get a decision in place ahead of the circuit breaker regulations falling: as I noted at the time, I voted for the final compromise as the least-worst option which could command a majority and not be vetoed, but remained convinced that we should have rolled over the circuit breaker as recommended by DoH.
127. In trying to reach a compromise proposal which would not be blocked by the DUP, there was a desire from other Ministers to understand how relaxing different sub-sectors of the economy would impact on the transmission of COVID; however, the CMO and CSA said that the modelling was not capable of accommodating the level of granularity requested, such as the contribution of different elements of close contact services or hospitality, but could only look at sectors as a whole, making this intra-sectoral analysis impossible.
128. It was clear that the atmosphere was febrile and tensions high. It was also clear that no progress could be made in such an environment. It seemed to me wise to seek to adjourn what had been a very lengthy, stressful and increasingly heated meeting in order to regroup, produce written proposals and, hopefully, avoid anyone saying something which would fatally damage working relationships within the Executive and potentially lead to collapse of Government at a time when leadership was essential for our community.
129. The desire for families to be able to spend even limited time together at Christmas was also a significant concern, given the importance of Christmas as a family time and the well documented impact of loneliness and isolation on people's mental and physical health and wellbeing, especially during the darker winter months.

130. The focus on Christmas was also, in part, to offer people some hope at a very bleak juncture, and one which we hoped would encourage them to redouble their efforts with regards adherence to NPIs over the next few weeks. We were clear that it was very much conditional on lowering transmission, but hoped that by offering people a positive incentive, we would increase the likelihood of doing so.
131. After the events of 9th November, the Health Minister did not provide recommendations to Executive, instead simply offering advice and inviting the Executive to decide on a way forward. Whilst perhaps an understandable reaction to previous recommendations being rejected, it left those of us who had supported the recommendations brought by the Department of Health consistently, now without any clarity as to what the DoH was indicating as the best course of action to manage the pandemic. My view as to the reason for the change in approach is covered elsewhere in this statement, specifically paragraph 121.
132. I believe that we endeavoured to follow the advice of the CMO and CSA throughout this phase of the pandemic as in earlier stages; however, the ability to do so was compromised significantly by the conflict between a lack of alternatives to lockdown and the growing opposition to it in parts of the community and specifically within the DUP.
133. There was also a degree of community fatigue and so there was a need for some pragmatism, in that we had to consider public behaviour and the impact that would have on adherence to regulations and advice. Whilst a more draconian approach might deliver better results in theory, if it was unsustainable in reality and led to lower levels of adherence, it would fail.
134. I was also concerned that increasingly the concerns of business interests, which were of huge importance to the economy, were being given precedence over the needs of individuals and families, who were struggling with issues such as informal childcare, isolation, grief and lack of emotional and practical support.
135. As we moved into the Christmas period, and almost 9 months into the pandemic, we recognised that whatever decisions were made by the Executive people were going to make their own decisions, particularly around Christmas. It felt very much like a “pressure cooker” and we were endeavouring, as best we could, to manage the degree of mixing to offer as much protection as possible whilst allowing some mixing to relieve that pressure in a controlled manner.

136. In our messaging we were clear that mixing should be minimised as far as possible and many people took the decision not to meet over Christmas but, where people were going to spend some time with family, we set down parameters within which to minimise the impact on transmission.
137. As the pandemic progressed, we needed increasingly to rely on people to follow the advice and self-police their behaviours rather than rely on enforcement, especially in issues of family contact and home life, which were almost impossible to police without significant and potentially unacceptable intrusion into people's personal lives.
138. As we approached Christmas, I do not recall being aware that the UKG had proposed a joint approach including all the Devolved Administrations, nor do I recall this being explicitly discussed at the Executive at the time. As Ministers, I have no recollection of being briefed on the proposal for a Joint Statement, its rejection by dFM or the reasons she did so. I believe we ought to have been made aware of this background, but have no recollection of this happening.
139. I was, however, sufficiently concerned about the divergence of approach adopted in the days prior to Christmas, that I wrote to the FM and dFM on 20th December 2020 [NLO/14 - INQ000409327], asking that they convene an emergency meeting of the Executive to consider what if any refinement of our advice and guidance for the Christmas period was required in light of the new strain of COVID-19 which was emerging and the changes announced over the previous 48 hours by UKG, other UK DAs and the Irish Government.
140. A significant concern in the approach to Christmas was the extent of pre-Christmas travel to Northern Ireland from GB in particular, as students and workers returned home for the season. It was the prevailing view that NI Executive did not have the levers required to halt travel beyond what was implemented by UKG and that, had we sought to do so, there would have been considerable financial risk which, if not underwritten by Treasury, the Executive could not have covered.
141. The Executive COVID Taskforce (ECT) was also introduced in December 2020. I understood that it was introduced by Jenny Pyper, in her role as Interim HOCS, to streamline consultation with stakeholders, and co-ordinate actions across

departments with a view to producing a coherent, joined-up approach. I was not aware of any corresponding changes to the UKG model at this juncture.

142. All Ministers welcomed the proposal for an ECT to co-ordinate and monitor the COVID-19 response. From recollection, a number of Ministers expressed the need for clarity as to the specific role of ECT, in order to avoid any risk of duplication of work already underway and ensure that the new structure did not cut across the lines of accountability between Departmental officials and their respective Minister.
143. I think that the ECT was effective in its role of co-ordination and oversight. In particular by ensuring earlier engagement with other departments and stakeholders ahead of recommendations being brought to Executive, the tensions within the Executive and between the Executive and stakeholders regarding the non-health impacts of health-based restrictions and relaxations across wider society were better managed and reduced. At a very practical level, the timing of circulation of draft and final Executive papers to Ministers ahead of Executive meetings was significantly improved as a result of its influence.

2021 and beyond

144. "Moving forward: The Executive's pathway out of restrictions" was an attempt to put structure on the Executive's deliberations and to refine the consideration of the various issues within a framework, in order to assist both the Executive decision-making and the public understanding of it and avoid a repeat of the events of November 2020.
145. A considerable amount of the document was focused on those groups which we believed were impacted negatively and disproportionately throughout the pandemic by restrictions. I believe that the Executive, with community and voluntary sector partners, went to considerable lengths to try to ameliorate the impact on such groups where possible; however, the impact of such an extended period of uncertainty, upheaval and fundamental change impacting almost all aspects of life, was nevertheless going to be incredibly significant, even with extensive interventions.
146. Sadly, despite those aspirations, within hours of the pathway being published, some members of the Executive had publicly criticised its contents, significantly

undermining its usefulness as a public education tool and further damaging relationships within the Executive.

147. I believe that the public criticism of the pathway by Ministers was damaging to our being able to promote it publicly as a cohesive and clear approach. Any media interest in the pathway from that point on would mainly focus on the position of the DUP Ministers and their criticism of the document. I did not, therefore, feel able to promote it actively as coverage would simply amplify in public the divisions within the Executive. That damaged our collective ability to show leadership.
148. All Ministers were extremely concerned about the impact of the restrictions on the economy; however, we were also extremely concerned about the impact on rates of transmission, in particular, on clinically vulnerable groups. We were also alert to the wider implications for society (e.g., mental health, domestic abuse, isolation, early years development) of continued restrictions. There were some obvious differences in emphasis, partly due to Ministerial portfolios and partly due to political ideology.
149. In August 2021, the Executive published its "*Building Forward – Consolidated Covid Recovery Plan*" [INQ000101002] (**Building Forward Plan**), to guide recovery over the next 24 months; however, whilst the plans as set out were entirely reasonable there were three main weaknesses in the implementation of the proposals.
150. Firstly, there appeared to be no formal implementation plan and structure to address monitoring and reporting of progress particularly on cross-cutting issues affecting two or more departments. Given the very devolved nature of power within the Executive, this is an area which requires particular focus in any Executive-wide strategy.
151. Secondly, the degree to which recovery measures could be implemented was highly dependent on the availability of additional funding, given the already stressed nature of Northern Ireland's Finances.
152. Thirdly, and crucially, by February 2022, only 6 months into a 24 month plan the Executive collapsed, with the resignation of the First Minister. While Ministers remained in office until October 2022, the ability to monitor and co-ordinate cross-

Executive activity or reallocate funding through monitoring rounds to support the recovery plan was entirely removed, as both required an Executive to be in place.

Part 3: Overarching and thematic issues

Retirement of Sir David Sterling

153. The role of HOCS in co-ordinating and driving forward delivery of Executive decisions and ensuring that the machinery of government is functioning efficiently cannot be overstated. The retirement of Sir David Sterling was, therefore, a significant challenge both to NICS and to the Executive at an extraordinarily challenging time, particularly one in which cross-department co-operation and co-ordination was so essential and with a relatively new Executive.

154. I was not involved in the recruitment of interim HOCS and so cannot comment on the reasons for the delay in her taking up the role or what led to a replacement not being sought sooner: in Ministerial terms, only FM and dFM have any involvement in the appointment of HOCS.

Scientific and medical advice to Ministers

155. There was a shared desire in the NI Executive to follow the best advice and guidance of those who were experts or had access to expert opinion on managing a major pandemic. At that early point, that meant the advice of SAGE and, in the case of the NI Executive, the advice of the CMO and CSA. However, from the outset, there was also a recognition that the impacts were much wider than the spread of COVID-19. I am unable to comment on the process for the provision of information and advice from SAGE as I was not involved. SAGE advice reached the Executive via DoH Minister, CMO, CSA and other officials. Concerns about the advice provided by SAGE were not a particular focus of Executive discussions, though its focus was naturally on England, due to the relative population sizes.

156. Whilst the Executive sought to mitigate the worst effects of the restrictions recommended for the control of COVID-19, there was no similarly compelling expert opinion guiding us collectively as to how to most effectively identify the wider societal impacts and best mitigate them.

157. Some were relatively straightforward to identify, measure and partially mitigate (e.g. direct economic impacts); however, others were not. The impact on issues including but not limited to: poverty; loneliness; child development; family and personal support; levels of domestic and sexual abuse and violence; levels of anxiety, stress, and depression; grieving processes; and, physical activity levels, whilst recognised as serious were much harder to quantify. Crucially, they were also harder to mitigate meaningfully without directly conflicting with COVID-19 control measures.
158. That was a key weakness in our approach and one that I think needs to be addressed in planning for any future pandemic or other similar emergency.
159. Regular circulation of briefings from the Health Minister were supplemented by a weekly paper on the reproduction number (R) and modelling paper to provide an indication of the current trajectory of the pandemic. The CMO and CSA attended Executive to present the detail and answer questions and provide clarification. When specific interventions or relaxations were under consideration, the CMO and CSA provided advice to the Health Minister directly and this was included within the papers; again, they were present at Executive meetings to provide further verbal briefing and advice.
160. The R number was used by the Executive during the second wave of COVID-19 to provide an estimate of the ability of the virus to reproduce in the population and how this compared with the estimated R_0 of the predominant variant at any time. This allowed us to gain some sense of how impactful any interventions had been in controlling spread between individuals and reducing transmission.
161. Due to the smaller population and data set available in Northern Ireland, statistically the confidence of the R number estimated for this smaller geographical area would have been lower than that calculated using a larger, more complete dataset for the entire UK, for example; however, that has to be weighed against the fact that the regional R number could account for local factors, such as local restrictions or relaxations.
162. The R number was, however, only one of the factors that we needed to consider in relation to the pandemic development. We also considered the doubling rate - as an indication as to how quickly the disease was spreading; the number of new cases identified via positive tests; the seriousness of the infection including

number of hospital and ICU admissions and number of deaths; and overall numbers of people infected as a percentage of the population to inform our discussions.

163. I understood what the R number represented and the types of data which were used to estimate it for any period; we were not involved in the actual calculation, nor were the specific datasets used for its calculation discussed at the Executive.
164. We were advised that, as the level of infection changed in the community, so did the importance of the R number in our considerations of the range of factors to which I have referred above. We were not advised that the R number calculation was previously unsatisfactory or that the basis for the calculation was being changed; rather, that the R number was potentially less reliable if certain data used to calculate it was absent or at a very low level.
165. Modelling also played a key role in informing the Executive, throughout the pandemic, providing some idea as to how the pandemic may develop over time and what impact various interventions may have on that trajectory.
166. Behavioural science was also used more as the pandemic progressed, look to how we could increase compliance with advice and regulations, encouraging uptake of the vaccine, and target our communications to best effect.
167. This work was, as I understand it, informed by the work of the Strategic Intelligence Group (SIG), which was established in April 2020; however, I had no direct engagement with SIG and cannot recall any specific briefings to the Executive on its work or findings.
168. Late arrival of papers and agendas was a frequent frustration throughout this period. Staff in the DoJ Private Office and Assembly Section often received papers until the early hours of the morning, which was an unnecessary imposition.
169. Not only was circulation to officials to get formal advice often very constrained as a result, but there were multiple occasions where significant papers arrived at or shortly after the start of the meeting, forcing Ministers to request an adjournment simply to read the paper/s. Ministers frequently had very limited time to consider the issues being put to them for decision. In turn, this limited the ability of the issuing Minister to respond to issues raised by colleagues.

170. A further consequence was that the official starting time of Executive meetings was frequently delayed, often by hours, with little or no warning or explanation, while TEO agreed what would and would not be on the agenda. This impacted significantly on our other Ministerial commitments and those of officials at a time when both were under particular pressure.
171. A combination of these factors fed a perception that outcomes were being pre-negotiated with TEO leading to significant mistrust. Whilst we all understood the pressures departments were facing, the repeated nature of the delays, led to unnecessary tension at meetings.
172. The advice we received was generally clear and well-presented, as a mixture of graphs, infographics and text. Whilst the subject matter was complex, the information was accessible and clear. Given my background in science and engineering, I was broadly comfortable with the scientific and mathematical concepts underpinning the advice offered, and with interpreting and reading the methods of presentation.
173. We did not have direct access to the UK medical and/or scientific advice, but instead the information was disseminated to us via the CMO and CSA. As such, we had no opportunity to interrogate the epidemiological advice and guidance first hand, but were reliant on this being conveyed to us in suitable detail by those officials. We also had a log in to a Cabinet Office site on which daily statistics were collated for internal government use.

Relationship with the United Kingdom

174. I have addressed the relationship between the NI Executive and UKG elsewhere in this statement, in terms of the degree to which their decisions influenced our approach, particularly in the early stages of the pandemic and the overall state of relationships at the start of the pandemic.
175. I was not particularly aware of the Secretary of State for Northern Ireland, Northern Ireland Office or Minister for Intergovernmental Relations playing an active role during the pandemic, beyond the feedback offered to the Executive from QUAD meetings. Intergovernmental Relations are the responsibility of TEO Ministers and so I was not routinely engaged in any of the structures in which they were involved so could not comment on their effectiveness during that period.

176. With respect to relations in general between the devolved administrations and UKG, there were differences in approach, with the devolved administrations generally favouring a more cautious approach. There may have been party political tensions between Westminster and the Scottish Government or Welsh Assembly Government, but one would expect such matters to be set aside at a time of national crisis, and the degree to which that impacted on co-ordination is not something on which I can comment.
177. That dynamic would not have been an issue to the same extent with the NI Executive, given the very different party-political make-up of NI Assembly and Executive; however, other tensions existed, outlined elsewhere, which may have affected co-ordination between Stormont and Westminster at some stages.
178. I did feel that at times there was a general lack of sensitivity to or awareness of Northern Ireland's unique challenges in having a land border with another State. It certainly seemed as though NI was somewhat peripheral at the small number COBR X/MIG meetings which I attended; however, on the occasions on which I attended these meetings on behalf of the NI Executive, I did not detect particular tensions: the tone was respectful and collaborative, if the meetings somewhat perfunctory.
179. I was not aware until this Inquiry that certain individuals within the UKG did not trust the devolved administrations to provide truthful and accurate information and I cannot, therefore, comment on whether this affected the dynamic between the Northern Ireland Executive and UKG.
180. My direct dealings with the UKG were mainly in relation to the NITRP, which was ultimately located on a Ministry of Defence (MOD) site at Kinnegar, Holywood, County Down, for which a Military Assistance to the Civil Authority (MACA) request was required. The Department enjoyed a collaborative, flexible and cordial working relationship both with MOD officials and the Joint Regional Liaison Officer on behalf of 38th (Irish) Brigade, which aided the speedy delivery of the NITRP, as well as its scaling down and the planning for its long-term future.

Relationship with Ireland

181. Relationships between the British and Irish Governments, and with Executive Ministers were very strained due to Brexit. Previously close working relationships had been damaged over the period immediately preceding COVID-19 and, under Boris Johnson's Prime Ministership, were perhaps at their lowest point since the signing of the Anglo-Irish Agreement in 1985. It is difficult to imagine that this did not impact on co-ordination during COVID-19. It is hard to judge the degree to which these poor relationships impacted on communication and co-operation in relation to the pandemic response.
182. During the pandemic, engagement with the Irish Government was governed by a high-level Memorandum of Understanding (MOU). As with the engagement with the UKG, engagement with the Irish Government was led primarily by TEO and, due to the nature of the crisis, the Minister of Health.
183. As I was not directly involved in its operations, it would not be possible for me to comment on how effective the MOU and the engagement was in delivering on its objectives. I am not aware that a review of the MOU or of its effectiveness was undertaken at any stage during the pandemic. I have noted elsewhere in this statement my concerns regarding the lack of co-ordination north and south and the impact which this had on the efforts of the Executive.
184. As Justice Minister, I have no direct experience of the operations of the North-South Ministerial Council (NSMC), as North-South co-operation in the Justice sphere is outside of the NSMC structures and governed by a separate Inter-Governmental Agreement (IGA). I am aware, however, that the NSMC structures are quite bureaucratic; however, they do not preclude other informal engagement between Ministers and officials on matters of urgency.
185. Whilst my officials maintained routine contact with their counterparts in Ireland throughout, I was not, therefore, involved in the Executive structures for formal engagement with the Irish Government. With the exception of policing, for which I had no operational responsibility, my department had no responsibilities which impinged on North-South co-operation.
186. We continued to progress those areas covered by the Justice IGA throughout this time, which included areas such as domestic abuse and cross-border crime, some of which were impacted by COVID-19 and sought to share learning throughout the

period. At an operational level, the PSNI and An Garda Síochána (AGS) did maintain close contact and co-ordinate to enforce COVID-19 regulations.

187. With regards the impact of party-political concerns impacting the ability to offer better advance warning or co-ordination across the island, one can appreciate why the Irish Government may have been concerned that, if the dFM knew of their plans in advance, the leader of the Opposition would potentially also know before announcements could be made to Dáil Eireann, in line with parliamentary convention; however, as previously stated with regards to potential similar tensions between UKG and SNP and Welsh Labour, I cannot state whether such considerations were actually an impediment to better co-ordination or co-operation. I also recognise that it was difficult for either Government to take a preliminary decision and then wait to announce publicly, while consulting other jurisdictions, as it was almost inevitable that it would leak to the media ahead of a formal release.
188. Overall, it was my general impression that the Irish Government handled the COVID response better than the UK Government, based on the number of deaths per capita. With respect to other metrics, including those specific to Northern Ireland, I was not aware whether they were produced in a manner that would have enabled direct comparison.

Legislation and regulations: their proportionality and enforcement

189. The police had a range of options for the enforcement of the Regulations at their disposal, of which criminal sanctions, via the use of Fixed Penalty Notices (FPNs) and prosecutions for more serious breaches were only a small part. They adopted the approach taken by the NPCC, of the “4 Es”, with enforcement seen as the last option. The emphasis was very much on the engage, explain, and encourage phases rather than escalation straight to enforcement.
190. The use of COVID Marshals/Wardens/Ambassadors was also introduced during the pandemic to engage people and offer advice and guidance: these schemes were operated and managed by local councils, after some initial reluctance to become involved in this space. First announced by the Executive in November 2020, £10 million of funding was provided to local government by the Department for Communities for their deployment to help relieve pressure on the PSNI and Environmental Health Officers.

191. In addition, there was a degree of self-regulation by businesses, who would enforce the regulations and guidance through their own processes and procedures, for example, to record names of each party dining. Ultimately, people who refused to comply could be refused entry to a facility or asked to leave.
192. This was a sensitive issue, however, as some frontline staff in key sectors such as retail, hospitality and other public-facing services, were subject to unacceptable abuse as a result of their work to ensure compliance and protect the public: in such circumstances, police intervention was both necessary and proportionate.
193. There was a frustration both among the general public and within the Executive, that compliance was suboptimal over the summer period after the main restrictions had been relaxed. This was attributed to a mixture of complacency within some cohorts (18-35 year olds in particular, where social mixing, house parties and gatherings were becoming problematic) and a degree of “gaming of the system” by some rogue elements in the hospitality sector, to deliberately avoid the intent of the regulations (e.g. serving a main meal in a pub early in the evening, but allowing people to stay and drink long after the meal was consumed) [INQ000065790]. The majority of responsible businesses and people, however, continued to comply with the guidance and Regulations.
194. Until that point the issue of enforcement/compliance/adherence had not been a significant concern at Executive, with broad general support for the approach adopted. However, over the course of the summer, as transmission started to rise and with the added pressures of the return of schools and colleges, the view that levels of enforcement and penalties were insufficient to deter breaches started to gain traction with some Ministers, largely in my view as a result of frustration that the NPIs were not as impactful as had been hoped for reasons set out elsewhere in the statement. I, therefore, agreed to review the offences and penalties available in September/October 2020 [NLO/15 - INQ000409328]. Further, a working group on compliance and enforcement was established to monitor and respond to issues in this area going forward.
195. Whilst recognising the important role which police enforcement can play in compliance, I was (and remain) unconvinced that enforcement of criminal penalties by the police was the most effective or only means to achieve better adherence. It was and is my view that adherence would be achieved more readily

by providing clarity and consistency of messaging, explaining clearly why the measures were required, how they worked together to lower transmission, the impact individuals' choices had on health service pressures and the likelihood of another lockdown, and encouraging people to work with us with enforcement only when that failed. This was particularly important, as many of the NPIs were in guidance rather than in regulations and so could not be directly enforced.

196. The policing of the regulations was a complex and sensitive matter and had the potential to impact on public confidence in the police more widely, something hard won and easily lost, particularly in a post-conflict society.
197. The context for enforcement and nature of the regulations was also very different to that more usually addressed by police. The regulatory framework was constantly evolving and changing in real time and the regulations on occasion lacked the clarity and specificity required to avoid legal ambiguity and challenge. Whilst ignorance of the law may not normally be a defence, to a degree given these factors it was possible for people to inadvertently breach guidance, making the 4Es approach, crucial in terms of proportionality.
198. It was an unprecedented ask of police officers and staff in an unprecedented time. I believe that, overall, the PSNI endeavoured to enforce the regulations fairly, sensitively, and proportionately; advise the Executive of the limitations of their powers and of the regulations and/or guidance; and work in a collaborative manner throughout. Their actions were also subjected to a higher level of scrutiny during the pandemic than almost any other body, by the public, media, politicians, NI Policing Board (NIPB), OPONI and Her Majesty's (now His Majesty's) Inspectorate of Constabulary, Fire and Rescue Service (HMICFRS). Whilst a matter of record that they received criticism in relation to their handling of a number of high-profile incidents, I believe that they were, at times, placed in a nigh on impossible position.
199. As set out in the Chief Constable's correspondence with the Health Minister of 17th April 2020 [INQ000272708], there had already been considerable challenge, including from the NIPB and the Attorney General for NI (AGNI), regarding the legality and proportionality of police enforcement of the Regulations in the early stages of the pandemic. These were health regulations and, as such, there was a question as to whether the police were appropriately commissioned to undertake this enforcement task, and whether it might be more properly assigned to other bodies. There was also a significant challenge in relation to police resources,

particularly as relaxations started to take effect and regular crime returned to more normal levels.

200. I had, therefore, requested on behalf of the PSNI that other bodies be designated to enforce the Regulations in addition to the police to ensure that the burden was spread more fairly and that we could demonstrate proportionality of approach. Despite the urgency and specificity of that request, it was considerably delayed in implementation, and police were understandably expressing considerable frustration at being left as the sole enforcement body and potentially without sufficient legal cover for that role, not least given the intense scrutiny to which they were being subjected. I raised this at the Executive Meeting of 11th May 2020, and conveyed strongly the need to work with the police to address such key issues in a more urgent manner to maintain good working relationships [INQ000065731, page 9].
201. With the relaxation of other regulations, it became increasingly difficult to enforce Regulation 5 relating to travel only for essential purposes, as the number of accepted purposes was now significantly expanded. People were legitimately traveling to work, to restaurants, to retail and for exercise and so enforcement approaches needed to shift in line with that change. As a result, the PSNI indicated that they would no longer be enforcing Regulation 5 in the same manner as they had earlier in the pandemic via vehicle checkpoints, but would instead focus on addressing behaviours at key destinations where problems were emerging, such as coastal locations, to disperse large gatherings, as this was a more effective use of resources [INQ000065778, Page 2].
202. This approach by PSNI contrasted with the approach of AGS, who from recollection continued to operate vehicle checkpoints at that time, a point highlighted by the FM, who lived in a border constituency [INQ000116294]. However, this was due to a fundamental difference in the Regulations operating in the two jurisdictions, rather than merely a different approach to enforcement. In Ireland, for much of the pandemic, restrictions were based on distance travelled from one's home, save in specified exceptional circumstances; however, in Northern Ireland no distance limitation was in place, but rather the purpose of the journey was restricted.
203. This made enforcement more complex in a number of ways. If someone claimed to be making an essential journey, without evidence to the contrary, the police

could not prosecute in NI. Further, as society opened up, the legitimate reasons for travel outside the immediate vicinity of one's home also expanded, hence the change in policing approach referenced above.

204. Crucially, the AGNI as early as in his letter of 16th April 2020 to the Chief Constable, offered his legal opinion that, despite some ambiguity in the regulations, travel ancillary to any essential/approved activity could not reasonably be considered to be constrained by Regulation 5 **[NLO/16 - INQ000409329]**. On that basis the PSNI would have to prove that the travel was not ancillary to a permitted purpose to charge someone with breach of the Regulations.
205. The Executive could have altered the approach to travel restrictions to mirror the approach of the Irish Government (that is distance-based approach), or some combination of the two approaches, in light of the AGNI advice to the Chief Constable; however, to the best of my knowledge, no distance restriction was ever included. The reasons for this, including the proportionality and human rights impact, are discussed in the following paragraphs of this statement; however, the impact of that choice was not without consequences for enforcement.
206. Throughout the pandemic we were very conscious of the need to balance necessary health restrictions with human rights and to consider both their proportionality and any differential impact on various sections of the population. With regards travel restrictions, in highly rural areas, for example, one might reasonably need to travel further for essential purposes, such as food shopping to ensure product range and affordability. Similarly, some people, such as women, children, those with disabilities and rural dwellers, may not be able to take daily exercise in the immediate vicinity of their home for valid safety or health reasons (e.g. along unlit, isolated or hilly roads) and so might reasonably need to travel to an alternative location. Provided people adhered to all the other rules at that destination, it may have been judged disproportionate to interfere with that freedom as it may not significantly impact the level of transmission; however, it did make the policing of travel more nuanced and complex.
207. The issue of enforcing self-isolation for those who had tested positive and quarantine for those who had travelled abroad was also a complex and sensitive area for enforcement. Firstly, with increasing numbers of people, DoH were no longer maintaining contact with the individuals throughout this period **[INQ000065790, Page 8]**. Secondly, significant questions had been raised as to

the proportionality, legality, human rights impact and resource implications of police being drawn further into this space. The PSNI were reluctant to allow a situation to evolve in which they were in effect monitoring self-isolation or quarantine, rather than responding to specific alleged breaches of the regulations. [INQ000065741, Page 22]

Scrutiny by the Assembly

208. The scrutiny of COVID regulations was the primary responsibility of the Health Committee, who have a statutory duty under Section 29(1)(a) of the Northern Ireland Act (1998) and set out in Standing Orders, to advise and assist Northern Ireland Health Minister in the formulation of policy with respect to matters within his/her responsibilities as a Minister. This includes the consideration of relevant secondary legislation and to consider and advise on matters brought to the Committee by its Minister.
209. All of the health protection regulations were made by the DoH and laid by them before the Assembly under section 25Q (Emergency Procedure) of the Public Health Act (NI) 1967. Whilst the Executive made the decisions about the nature of the restrictions and relaxations we wished to effect which, in turn, informed the drafting instructions issued to the legislative drafting team, Ministers other than the Health Minister had no sight of the regulations prior to them being laid before the Assembly and published due to the tight time-scales.
210. Under the emergency provisions, amendments to the regulations had to be brought forward for approval to the NI Assembly no later than 28 days from the date on which they were made; this was known as the confirmatory debate. The Health Committee Chair generally led the response to this debate, reflecting the Committee's statutory role.
211. In the spirit of collegiality, I led the confirmatory debate in the Assembly on a small set of amendments to the regulations in December 2020 arising from the review of offences and penalties and in February 2021, further agreed to lead the confirmatory debate in the Assembly on a further set of amendments; these were SR 2021, No.3 The Health Protection (Coronavirus, Restrictions) (No.2) Amendment Regulations (NI) 2021.

212. The debates being retrospective did not allow the degree of Assembly scrutiny which would normally attend such significant and impactful legislation, neither was there meaningful opportunity for line-by-line consideration of the amendments and updated Regulations prior to them becoming operational. As a result, there were on occasion conflicts or omissions within the Regulations or difficulties with implementation which were only identified after they had been in place for some time, and which might otherwise have been identified through the scrutiny process.
213. Further, by the time the confirmatory debate took place, there had often been a series of subsequent amendments made, which were being debated at the same time: the debate was consequently often about a situation which had been superseded. The difficulty for Assembly Members having navigate and scrutinise the legislation and amendments without a clean copy of the current form of the regulations did at times lead to confusion and frustration.
214. Finally, the lack of a consolidated, up-to-date copy of the current version of the amended regulations was a source of added confusion, as each set of amendments had to be read in conjunction with the original regulations and all subsequent amendments. This made them fairly impenetrable not only for MLAs tasked with scrutiny but particularly for the public and, indeed, those charged with compliance and enforcement. It also explains why potential drafting errors were not easily identified. Whilst such a consolidated working copy of the regulations would not have any legal standing, I believe that it would have been good practice to have it available both to Ministers and the public as a reference document. I raised this issue a number of times at Executive, but it was not acted upon until much later in the pandemic.
215. The debates did, however, allow an open and transparent exchange between Assembly Members and the sponsoring Minister about the principles of the restrictions as well as the intent of the regulations. That two-way communication was important both to explain the regulations and inform the DoH of issues of concern albeit after the event, which was useful in preparing future regulations.
216. Whilst far from ideal as a process for scrutinising legislation under normal circumstances, I believe that in a global pandemic, there was little alternative.
217. Throughout this period, I also kept the Assembly and Executive apprised of progress with the NITRP; COVID-19 activity in NI Prison Service, NI Courts and

Tribunal Service and the wider justice system; and latterly recovery of the Justice system, through a combination of written and oral statements, Ad-Hoc and Justice Committee appearances, answers to oral and written questions, and memos and correspondence to Executive colleagues, in addition to general correspondence with MLAs. Whilst the volume of written questions to DoJ was significant, they did not exceed the Department or my capacity to answer within the time limits provided. As such, I believe that the Assembly and the Justice Committee had adequate opportunity to scrutinise the wider work of the Department of Justice, and our response to Covid-19.

Funding the response to the pandemic

218. The Executive was generally well resourced to address the pandemic; however, there were elements of handling which, with additional funding, may have been taken forward differently. One such example was the potential liability for compensation payable to airlines for any losses incurred if the Executive had chosen to unilaterally stop passenger travel to NI, whether international or national, without similar restrictions being imposed by the UK Government. This would have been a significant and unaffordable pressure for the devolved administration.
219. Also, until the UK as a whole decided to introduce financial packages to support people during lockdowns and after it decided to end such schemes, NI would not have had access to the resources from within the Block Grant to adopt a different course of action. Whilst we did not receive advice that we needed to move to lockdown in either scenario, we did have concerns as to what would happen were that position to change.
220. Indeed, even while such schemes were in operation, there were concerns that without assistance from Treasury we would not be able to afford to implement more stringent measures than were being implemented in England at that time. At the Executive Committee meeting on 17 December 2020, for example, the First Minister herself indicated that finances were a concern, saying *“terrible position - asking business to close - 4 weeks, review for 2 further weeks - but don’t know how we can pay - need to reflect on that”*. [INQ000116295]
221. It would, therefore, be incorrect to suggest that cost of measures was not a significant consideration in our approach.

Controlling Northern Ireland's borders

222. The issues relating to travel within the Common Travel Area and internationally were out with my Ministerial responsibilities and, as such, I was not involved in meetings with the UK or Irish governments at which these matters were discussed in detail. As such, I can only give my general perception of the key issues based on discussion at Executive.
223. While public health matters relating to entry into Northern Ireland were all transferred matters, immigration and international relations are reserved to Westminster: however, I had the impression that the degree to which the NI Executive could practically control the flow of people across our own borders, internal and external, appeared to be quite limited.
224. In the case of international passengers, the decision as to which countries were red, amber or green rated for travel was a decision of the UKG: in theory, we may have been able to diverge from that, but it would have been costly and caused significant confusion, not least as a significant proportion of international passengers travel via a UK hub airport or via Dublin Airport.
225. Within regards the CTA, it would have been politically sensitive to place a restriction on flights from GB while not simultaneously restricting cross-border travel (and potentially ineffective, as people could have diverted via Irish ports or airports and driven to Northern Ireland). The latter was also difficult to implement, as reasons for essential travel in border areas often necessitate crossing the border more than once in a single journey.
226. With respect to implementing health restrictions in relation to those arriving in Northern Ireland, whilst practically straightforward in the case of passengers arriving via main ports and airports, it was again more complex at the Irish border, which is extremely permeable. Those arriving via Irish ports and airports were requested to fill in an additional passenger landing form if they intended onward travel to Northern Ireland; however, many did not do so and we had no means to enforce it. We, therefore, became reliant on the Irish Government sharing passenger information and, as described elsewhere, this proved incredibly difficult due to concerns about GDPR and information sharing.

227. I do not believe that the UKG sufficiently consulted or considered with NI Executive Ministers, the issues of border controls and travel restrictions on NI. I also think that more proactive co-ordination between the Irish and UK Governments could have avoided some of the issues and significantly simplified the situation, especially in NI, by aligning more closely. By treating the CTA as one regarding international travel, many of the complexities we faced could have been avoided. Issues with data sharing from the passenger landing forms for those arriving in Ireland who intended to travel onwards to Northern Ireland was a particular issue which took months to resolve.
228. The red/amber/green categorisation of countries for travel was not complicated to understand conceptually; however, in practice, different regions had different risk appetite which led to some considerable confusion, with Scotland listing some countries as unsafe which Westminster felt were safe, but based upon the same information. The difference in approved countries between Ireland and GB also caused confusion and anxiety, given they were both major routes into NI for international travellers and also major routes for outbound travel from NI.

Care homes

229. Ministers were acutely aware of the high risk of transmission in multiple occupancy residential settings and the particular vulnerability of those who were older, frail or had underlying health conditions to more severe illness, hospitalisation and death. As a result, care homes were a priority area of concern from the outset. I had similar concerns with regards to prisons, particularly those areas of the prisons' estate housing older or more vulnerable people in our care at that time.
230. Whilst the Executive took an active interest in the work being done by the DoH to protect residents and staff in care homes, the responsibility for policy and practice resided solely within the DoH. Ministers were briefed regularly by the MOH and contributed to general discussion, but had no formal role in operational decision-making or monitoring of transmission within care homes or other parts of the healthcare system. In the same way, whilst I briefed Ministers and the Assembly regularly on COVID-19 in Prisons, the decisions in relation to how we would approach COVID-19 control measures to protect staff and people in our care were a matter for NIPS and DoJ: other Ministers would have had no direct role in that process.

231. A number of Executive Ministers had family who resided or worked in care homes and in the wider healthcare system, and this provided useful intelligence as to how things were operating in practice, particularly where this diverged from the official briefing. On a number of occasions, for example, Minister Poots raised significant concerns regarding the availability of PPE and other infection protection measures in care homes based on his daughter's experiences in various care homes in which she worked.

Inequalities

232. With respect to the impact of NPIs on various groups, to my knowledge no formal assessments of the impact on groups specified under Section 75 of the Northern Ireland Act 1998 was made on behalf of the Executive Committee collectively prior to the introduction of the various NPIs.

233. Such an assessment is, however, routinely conducted and recorded in departmental advice to Ministers by departmental officials. Whilst I was not sighted on the advice to other Ministers, I presume that the same considerations were made in the formulation of proposals by the DoH and TEO during this period.

234. Similarly, mitigations and support proposals brought forward by each department and, in particular, the Department for Communities, the lead department for tackling inequalities, would have been subjected to that routine Section 75 Assessment.

235. The differential impact of NPIs on various sections of society was an issue which was regularly discussed by the Executive. I have given some examples of that consideration and how it shaped the response, elsewhere in this statement (e.g. paragraphs 71-74, 109-110, 199-200). It also shaped mitigations throughout, as we endeavoured insofar as was possible to mitigate the financial and emotional hardship caused by the various lockdowns, using data we already had on vulnerability and input from partners organisations.

236. Whilst I have acknowledged elsewhere that I do not believe the balance between business and family/personal needs was always correctly achieved and the reasons for that, I do believe that significant efforts were made to mitigate the impact of the measures deemed necessary for disease control.

237. The mitigations and response were informed by existing data held throughout departments on Section 75 and other at risk or vulnerable groups and was further aided hugely, in identification, design and delivery, by a very active and engaged community and voluntary sector in Northern Ireland. Without their insight, co-operation and support, it would have been much more difficult not only to identify particular areas of need but to deliver, at speed, support to those most affected.
238. Nevertheless, given the duration of the pandemic and the extended period over which restrictions were required to normal life, even with these efforts there is still considerable scarring in the community as a result, which is a matter of huge concern and of deep regret.

Public health communications, behavioural management and maintaining public confidence

239. Each department has its own media team which answers to the Minister in question. In addition, the Executive Information Service issued statements on behalf of the Executive under the authority of the FM and dFM, who were required to jointly agree any statement issued.
240. In terms of how this applied to the health messaging, there was a determined effort by officials to maintain a consistent approach across all departments with respect to COVID-19 and, whilst not always entirely successful, deviation from that tended to be driven by individual Ministers speaking in a party-political capacity, rather than dissonance within departmental communications.
241. I expressed my concern about conflicts and/or mixed messaging from Ministers in the public domain early in the pandemic potentially undermining public confidence. That continued throughout the pandemic and became increasingly a barrier to effective communication with the public at almost every critical juncture.
242. Given that people in Northern Ireland routinely see both UK and Irish national news broadcasts and government press conferences, it was particularly important that the NI Executive effectively communicated our specific position, as otherwise there was a significant risk of confusion and/or mixed messaging.

243. The health messaging itself generally followed the UKG messaging in the early stages with simple slogans such as “Stay Home to Save Lives” and “Hands, Face, Space” being widely disseminated and understood.
244. As the relaxations took hold and UKG messaging began to change, the Executive opted not to follow that change, as we felt that the messaging already in place was more effective and the change would dilute and confuse rather than assist.
245. At various stages the Executive Information Service (EIS) provided feedback on how the message was reaching the general population and how effective it was at encouraging compliance within different cohorts. Through that and other data collated by officials, in terms of behaviours and compliance, we could also see groups that we were not reaching as effectively. One particular group was young people.
246. Whilst the guidance and restrictions applied as much to young people as any other group, there were a number of reasons why it may have been less effective in my view.
247. Firstly, in our efforts to ensure that as little education as possible was missed, children and young people returned to and remained in school at an earlier stage and for longer than applied to most other relaxations. It was hard, therefore, to explain to young people who were in school together all day, why they should not socialise together at weekends or in the evenings.
248. Secondly, from early in the pandemic, it was widely stated that those most at risk were older people, with the result that some people assumed that children and young people were not at any significant risk from COVID-19. There was uncertainty, however, as to whether children were vectors for spread of COVID-19 or whether they risked any long-term harm as a result of exposure to the virus.
249. Thirdly, the communications channels used such as Twitter, Facebook, and mainstream media, are generally less used by young people than Instagram, TikTok and other platforms.
250. Finally, in my view the language and style of information sharing was less geared toward young people than a more mature audience.

251. A combination of these factors and the natural tendency of young people to assume their own invincibility made the messaging for children and young people simultaneously more complex and nuanced yet also less effectively transmitted.
252. I raised the issue of having a specific press conference for young people at the Executive Meeting of the 18th June 2020, as I felt that the impact on children and young people was particularly profound and that we should engage directly with their concerns and fears. [INQ000048474, Page 6, Item 21]. I was advised by the First Minister that EIS were developing proposals for this following consultation with a range of youth organisations. Despite this, no such action was ever implemented by TEO: I have no knowledge as to why this was not progressed as stated.
253. Throughout the pandemic, there was also significant misinformation circulating online. While this was not unique to Northern Ireland in terms of content, there were points where it particularly impacted here. One such example was around links between vaccines and the use of tissue from aborted foetuses. In a society which remains very religious, there was significant concern that this would suppress uptake of the vaccination programme.
254. Other examples included the false premise that, if the vaccine was effective, boosters would not have been necessary, despite multiple other examples of either multi-stage vaccines or annual boosters and also that the vaccine was unsafe for young people and during pregnancy.
255. Some of that misinformation also led to abuse of those involved in the COVID-19 interventions. In some of the most extreme cases, the CMO, Dr Michael McBride, The Head of the COVID-19 Vaccination Programme, Dr Patricia Donnelly, and the Health Minister, Robin Swann, were subjected to death threats directly related to their role in the COVID-19 response in Northern Ireland.
256. I also received and continue to receive a considerable volume of trolling, abuse and occasional threats in relation to the handling of the pandemic. Some of the most persistent and aggressive abuse is in relation to my support of lockdowns, mask mandates, the vaccination programme and vaccines in general and so-called vaccination passports. I have also been subject to a number of vexatious legal challenges which were eventually dismissed by the courts.

257. At the milder end of the spectrum, I received some abuse from individuals who felt that the clinically extremely vulnerable and those in care homes had been abandoned as we began to relax restrictions, with accusations that we were happy to let people die and were sacrificing their loved ones. Whilst completely understandable given the enormous level of stress and anxiety people who were shielding were experiencing at that time, it was distressing to be falsely accused of such callousness and lack of compassion. I was particularly affected by this as my father-in-law was shielding throughout COVID-19, due to lymphoma treatment, and so the suggestion that as Ministers, we were oblivious or, worse still, unconcerned about those impacted was completely unfounded.
258. There was also a sectarian tone to some of the online abuse and trolling. Nationalist and republican trolls accused me of “slavishly” following the UKG because I was secretly a unionist; conversely, unionists and loyalists accused me of being a closet republican, for suggesting that better co-ordination with the rest of the island may be useful in combatting the pandemic. This element was somewhat predictable, if depressing, as it is a factor of almost every debate in Northern Ireland politics.
259. More unsettling was the confluence of various conspiracy theorists, particularly online, into quite cohesive communities, bringing together disparate groups such as COVID deniers, those who believed COVID was deliberately released by Government, anti-vaxxers, anti-globalists, far right activists and even anti-Semites, who found common purpose in opposing all of the pandemic interventions and abusing those who were in decision-making or advisory roles. I was and am regularly accused of being a “shill for big pharma”, deliberately trying to destroy businesses, deprive people of their liberty, and implement mind control as part of “The Great Reset”, allegedly on behalf of people ranging from Bill Gates, to the World Economic Forum, to pharmaceutical companies, to George Soros.
260. Latterly, the abuse and trolling has been primarily linked to those who oppose mRNA vaccinations and vaccinations more generally and those who have linked their use to alleged increases in sudden death since COVID-19 and a range of other, as yet unverified vaccine injuries.
261. Whilst I fully acknowledge that any vaccine can cause a reaction, ranging from moderate to severe (including death), and do not in any way dismiss the impact

that will have on any affected individual or family, I also recognise the low incidence of severe reactions and the overwhelming evidence in favour of vaccination in combatting, and in some cases eliminating, transmissible diseases.

262. At least some of this is driven by misinformation which I have referenced earlier in this statement. Sadly, some was amplified and promoted by other politicians, journalists and public figures who in my view stretched the boundaries of libertarianism and individualism to the extreme in their approach and engaged in smears, innuendo, online bullying, and instigating twitter pile-ones and vile personal abuse. Whilst much of this took place online, it also crossed into real life with verbal abuse and harassment on occasion.

Executive Committee decision-making

263. The structures created by the NI Act 1998 give individual Ministers a high degree of autonomy within their own department and limit the reach of the Executive into their area of responsibility, so cabinet-style government such as operates in Westminster and in the other Devolved Administrations does not exist in the NI Executive.
264. The existence of vetoes, via the parallel consent mechanisms which operate both in the Executive and Assembly, gift to the largest party of each of the two largest designations the ability to block proposals at the Executive or in the Assembly. Whilst as a result of the election results in 2017 the operation of these vetoes was somewhat refined in respect of the Assembly, in that neither party could operate it without the support of at least one or two other MLAs, within the Executive the DUP retained the ability to unilaterally block any proposal.
265. Finally, FM and dFM have joint responsibility for convening, chairing and agreeing the agenda of the Executive. Essentially, via this mechanism, either can veto any item from appearing on the agenda until they are content with it or can even prevent the Executive from meeting or force it to adjourn by refusing to attend or leaving, respectively.
266. There is still a duty on Ministers to seek to achieve collective responsibility and on the FM and dFM to seek consensus within the Executive; however, there is no sanction if Ministers do not fulfil their obligations in this regard. Even where Ministers seek to do so, it is often difficult to achieve, given the multi-party,

mandatory nature of the coalition, bringing together a wide spectrum of political parties. It was particularly challenging in the context of restoration after an extended suspension, when relationships were strained and fragile, and good working practices had yet to be established.

267. Despite these clear challenges, I do believe that there was a genuine effort on behalf of most Ministers to maintain cohesion particularly but not exclusively in the early stages of the pandemic. This, however, broke down quite early in the process and was never fully restored.
268. I believe that Ministers from the DUP and SF did predetermine approaches, both within their own parties and in the early stages of the Executive, between the two parties, agreed at TEO level. Despite this, there was still, on occasion, an opportunity to persuade for change or challenge with new information during the course of a meeting.
269. SF were the most disciplined in terms of acting and speaking collectively: by contrast, at times tensions were apparent between the First Minister and her party colleagues, though this did not extend to voting in different ways.
270. The degree to which each Minister could consult their party colleagues was also differed significantly. Where colleagues were members of the Executive, they had full access to all the documentation and could discuss it freely. For those without colleagues in the Executive, confidentiality rules limited the extent to and frankness with which we could discuss upcoming issues with colleagues in advance. Furthermore, whilst FM and dFM could control what was on the agenda and would receive papers first, affording them time to discuss with Ministerial colleagues, others did not have that opportunity or notice to even sound out party colleagues in the general terms permissible.
271. I do not believe that the parallel consent mechanism should be used at all within the Executive as it creates, in effect, a two-tier system: the DUP and/or SF are able to veto decisions, but other parties do not have that same power. Furthermore, my vote as Minister in such circumstances counted for less than others, which I believe is unjust and unjustifiable: that the only truly cross-community party is excluded from so-called cross-community votes remains a major issue of contention for the Alliance Party.

272. With relation specifically to its use in the context of a pandemic, it is worth noting that if the Health Minister was not designated unionist or nationalist, their vote on their own proposals would count for less than others.
273. In addition, the voting mechanism was designed to protect minority interests in the context of the constitutional divisions in Northern Ireland; however, the pandemic did not discriminate on the basis on constitutional position and nor did our regulations. The Health Minister was a unionist and yet his proposals were vetoed not only by other unionists, but also by what was the largest party in the Assembly and Executive. Whilst I believe the mechanism is fundamentally flawed, its use in this way was an egregious abuse of process.
274. Alliance has proposed a number of reforms which would prevent such abuse. Most straightforwardly, and our preference would be that the use of the cross-community vote mechanism within the Executive would be abolished entirely, with decisions made by simple majority. Alternatively, the parallel consent mechanism could be replaced with a weighted majority vote when such votes are demanded. In that case, that the conditions for triggering such a vote should also be restricted to matters impacting on the constitutional position of NI, matters of culture and/or identity, or issues pertaining to the Troubles and its legacy.
275. The effect of deploying the cross-community mechanism was to sectarianise the issue of COVID-19 regulations and to exclude my vote and influence further at Executive level. Given that the DUP and SF also controlled whether papers would be placed on the agenda, the use of the veto further compounded the inequity between Ministers.
276. As stated above, I had made clear when I entered the Executive that abuse of the mechanism would lead me to reconsider my position. As a result of its deployment during the Executive meeting of 9th November 2020 and the chaos which ensued over the next three days as a result, it is a matter of record that I considered resigning as a Minister [**NLO/17 - INQ000409330**]. On balance, having reflected on the situation, I felt that my significant contribution to negotiating a resolution to that impasse, and potential to contribute constructively in my Department and to the Executive, coupled with the need for political stability at a time of unprecedented crisis in society, outweighed what were valid concerns as to the abuse of process.

277. It is worth noting that, had simple majority voting applied on the 9th November 2020, the decision to extend the circuit breaker would have been made with demonstrable cross-community support (UUP, Alliance, SDLP, SF) and the meeting could have concluded on the same day, reducing pressure on Ministers and officials at what was a key juncture.
278. Servicing the Executive's need for information and advice to inform decisions and forward planning, undoubtedly placed additional pressures on DoH officials who were also responsible at departmental level for directly managing the health impacts of the pandemic, which occasionally created some tensions. While aware of the particular pressure which DoH was under, we often found it difficult to get clarity as to what other Ministers, Departments or NICS could do to assist with alleviating some of those pressures without being seen to encroach on the Minister of Health's statutory responsibilities. Despite the obvious pressures, offers of practical assistance were often not taken up by DoH.
279. I believe all of the Executive Ministers were acutely aware that the Minister of Health was under extraordinary pressure during this time and, whilst not always supporting recommendations from DoH, most Ministers sought to support him in practical ways insofar as was possible. I do believe that Ministers engaging in public criticism of the Health Minister and the NPIs did increase the pressure on both him and his officials.
280. My Department sought to offer such support as we could to the Minister and Department of Health: a member of our legislative team in was seconded to DoH to assist with preparation of regulations and my Permanent Secretary led the Adherence Working Group. Other examples of cross-departmental co-operation included the DfI Minister offering MOT testing centres for COVID testing and DAERA Minister suggesting use of his department's laboratory capacity to assist.
281. Recognising the extreme and consistent pressure under which the Health Minister and his Department were operating, I agreed that DoJ would carry out a review of offences and penalties in relation to health regulations breaches. Again, in the spirit of collegiality, I volunteered to lead the confirmatory debate in the Assembly on a small set of amendments to the health regulations in December 2020 arising from that review.

282. Whilst a majority of the confirmatory debates on regulations in the Assembly were led by the Health Minister, from memory both Junior Ministers in TEO also led a number of the debates and, in addition to the instance above, in February 2021, I agreed to lead the confirmatory debate in the Assembly on one further set of amendments.
283. Outside of the Executive, as a Party Leader, I asked my colleagues to suspend tabling of further COVID-19 related written questions to the Minister when the DoH was clearly becoming overwhelmed. The Assembly also suspended oral questions in April 2020, and they were replaced by the Ad Hoc Committee. **[NLO/18 - INQ000220262]**
284. Finally, in the later stages of the pandemic when public criticism, threats and abuse were being directed towards the Health Minister, I offered my support for him both publicly and privately. I have continued to do so to this day, particularly on social media: whilst we all are hugely burdened by the negative impact on our community of what were at the time necessary public health interventions, the suggestion that those decisions were taken by him or other Ministers with the intent of causing harm are completely unfounded and deeply offensive.
285. From my perspective there were obvious and I would argue largely unavoidable tensions between our collective desire to protect lives and livelihoods which emerged early in the pandemic and remained throughout. We were all aware that action to protect one would almost certainly endanger or damage the other, at least until vaccination offered an alternative route out of the pandemic.
286. As this tension became more acute, the risk that our response was being driven by a binary argument framed as health versus the economy became a significant concern for me. Firstly, it is a false construct: a good economy is good for health and wellbeing and vice versa; they have a symbiotic relationship. Secondly, the prioritisation of economic concerns in our discussions over less tangible but arguably as if not more important issues of personal/family support when prioritising relaxations, was a constant theme.
287. In addition, there was a lack of clarity for the rationale behind our decision-making at various stages, which led to a lack of internal consistency and coherence of

decisions, which was often a barrier to successful communication, implementation and enforcement.

288. Lack of transparency about the decision-making process itself, late arrival of papers and information, and leaks to the press further fuelled a lack of trust within the Executive and contributed to public disagreements between Ministers, which were not merely embarrassing, but hindered our ability to effectively communicate with the public at key points.
289. Finally, lack of strong intergovernmental co-ordination across these islands created a constant tension along East-West and North-South lines which was a further pressure on a fragile Executive.
290. A further source of tension was the fact that some who were sighted as to the content of Executive papers and/or in attendance at Executive meetings or briefings were involved in the leaking of information to the press on a regular basis. I cannot be certain of their motivation. At its most benign, it may simply have been a desire to appear relevant to the media: at its least benign, at times it appeared motivated by a desire to undermine political opponents. Somewhere between those extremes, it may have been to test public opinion and/or create external pressure on Ministerial colleagues to change their position.
291. It was not a policy of the Executive to do so: in fact, it was contrary to the commitment to confidentiality surrounding all Executive business and communications. It further increased internal tensions within the Executive and exacerbated the lack of trust between parties.
292. Had an Executive not been restored in January 2020, the only alternative democratic structure for decision-making was via some form of direct rule from Westminster: despite its clear limitations and challenges, the NI Executive was the better option in my view for a number of reasons, which I have set out below.
293. All departments and sections of the community were impacted by COVID-19. Many of the decisions required during that time were policy-led rather than merely operational, and so it was essential that elected Ministers had input into the response, not just departmental officials. Democratic accountability to the local populace when making such significant and impactful decisions is essential to protect the public interest and maintain public support. As those living and working

as part of the local community, we were also sensitive to shifts in public behaviour and opinion, as well as to the specific challenges of our region, in a way that Westminster is not. I would also argue that, whilst the differing political ideologies around the Executive table did lead to at times heated disagreements, it also led to robust scrutiny of and challenge to advice and recommendations and made the Executive both less prone to “group think” and also more attuned to the real world debates that were taking place in wider society than perhaps would have been the case in a single party government.

294. In terms of public confidence in the Executive and its decision-making, and wider Government decision-making, various examples of politicians, civil servants and advisers, both in local and national politics, breaking or bending the rules was extremely undermining of public confidence in the advice provided by government nationally and locally. It was not only disrespectful of the sacrifices made by members of the public in adhering to both the letter and spirit of the law, compounding their hurt, grief and in some cases, anger, but it also fed conspiracy theories that COVID was a hoax and that those “in the know” weren’t concerned about breaking the rules.
295. Reports of alcohol-fuelled Christmas, leaving and birthday parties across Whitehall and especially in No 10 Downing Street, compounded by Dominic Cummings’ trip County Durham and Barnard Castle, followed as they were by increasingly hollow (and at times bizarre) excuses and attempted justifications did huge harm to public confidence in politics and politicians at a time when we were facing a national health emergency.
296. Similarly, the widely-reported scandal surrounding the Oireachtas Golf Society outing and dinner in Clifden, Co Galway, on 19th August 2020, commonly referred to as “Golf-gate” and which led to the resignations of the Irish EU Trade Commissioner, Deputy Leader of Fianna Fáil and the Leas-Chathaoirleach of Seanad Éireann, shook public confidence in politicians and their commitment to uphold the law and take COVID-19 as seriously themselves as they demanded the public should. Even though the Irish courts eventually ruled that the event was not in breach of the rules, the perception of exceptionalism of the political class and resulting mistrust continued.

297. This was further compounded by the revelations in 2021 that Matt Hancock, then Health Secretary had been engaged in an extra-marital affair during that period.
298. Coverage of Scotland's CMO, Dr Calderwood, who visited her second home at a time when that breached the advice she helped formulate, was similarly undermining of those who were offering medical advice: while her resignation at least indicated that both she and the Scottish Government took the matter seriously, the damage was already done.
299. Locally, there were a number of examples which also had a negative impact. Former UUP leader and party colleague of the Health Minister, Mr Mike Nesbitt MLA, resigned as Deputy Chair of the TEO Committee after admitting he broke the rules in May 2020, by travelling to visit a friend.
300. However, by far the most impactful local incident was the attendance of the deputy First Minister and SF colleagues at the funeral of high-profile republican, Bobby Storey. Not only did it trigger a series of lengthy, high-profile investigations, including of the PSNI and Belfast City Council officials, but it also led to extensive and protracted media coverage.
301. It also heightened tensions and created genuine hurt across the community and within the Executive itself: when Minister Poots' father, a former Councillor and Mayor, passed away during the pandemic, only six family members could pay their respects at the graveside. Having made such a massive personal sacrifice at a time of profound loss, I could appreciate entirely why he and so many other bereaved families who had done the same were not just angry but extremely hurt by the scenes on that day. It undoubtedly strained relationships in the Executive and there was a notable change in public adherence afterwards.
302. Many people were not only disillusioned in the wake of these events but also felt huge guilt that, in abiding by the rules when senior politicians didn't, they had in some way failed their deceased loved one on their final chance to honour their memory and say their goodbyes. Given the particular culture and traditions which surround death, grieving and the paying of respects in Northern Irish society, this was extremely impactful.
303. Whilst the PPS ultimately reached the conclusion that the Test for Prosecution was not met, as "*...whether considered alone or in combination, the two*

excuses... in relation to: (i) the lack of clarity and coherence within the Regulations; and (ii) the prior engagement with the organisers and the policing approach on the day, would pose an insurmountable difficulty if any of the reported individuals were prosecuted”, [NLO/19 - INQ000409332] it was then and remains my view that no person could have reasonably believed that the scenes witnessed on 30th June 2020 were in line with the intent of the regulations. That was particularly the case for those of us who were responsible for formulating and communicating that intent within the Executive.

304. As a result of the fall-out from this event, the joint press conferences held by the First and deputy First Minister in the early stages of the pandemic, which were a particularly powerful communication tool, in that they represented a rare show of public unity between parties, ceased to occur. As a result, I believe that our ability to influence public behaviours at a key juncture was doubly undermined.

Communications with Ministers, advisers, political party officials and civil servants via electronic device(s)

305. I was issued with an iPad, iPhone and Dell Laptop by the Department of Justice in January 2020 and returned them to the department within two weeks of ceasing to be a Minister in October 2022. Due to the particular security sensitivities surrounding the Department of Justice, all of my official devices operated a BlackBerry Secure Software system. I also had a personal android phone throughout the specified period.
306. During this time, I used both text messaging and WhatsApp on both my Departmental and personal phone. As a rule, I sought to avoid the use of my personal mobile for Departmental business; however, on occasion, when unable to get a signal on my DoJ device in Parliament Buildings, I did use it to communicate with officials. Given the additional security settings on my Departmental devices, much of the material on those devices was not accessible via my personal device (e.g. emails, documents) and so the overwhelming majority of communications were on my official devices.
307. I would occasionally text or WhatsApp officials and other Ministers from my personal device. This would not have been conducting Government business, all of which was undertaken either in person in the presence of civil servants, to minute the exchanges, or via departmental email, but would have been informal

conversation to clarify, for example, whether specific papers had been submitted or the timings of meetings.

308. I cannot recall all of the instances, circumstances or issues when messaging platforms such as WhatsApp would have been used between Ministers, special advisers and officials during this period on my Ministerial device, though they would have been similar to those described above with respect to my personal device. They would have taken the form of casual conversation, with clarification and any significant issues instead addressed via email/letter or in person-to-person meetings which always included a civil servant to minute the exchange.
309. The only formal business I recall conducting via WhatsApp, would have been to allow officials to send me notes during Assembly debates: the Officials' Box was at the opposite end of the Assembly chamber to my allocated seat, making it impossible to exchange physical notes during debates in the usual way, especially given the rules on social distancing in the Chamber. I mainly used my departmental phone for such purposes, subject to the signal issues referenced above. I also uploaded video clips via my iPhone for use by the Department on its social media channels, for press releases and for pre-recorded speeches for events during the period when we were working from home.
310. There were, to my knowledge, no specific attempts to retain such exchanges; however, all matters of importance were routinely committed to email and minutes, to ensure a full and complete record was retained throughout my tenure as Minister.
311. Informal messages were not, to my knowledge or belief, used as an alternative to formal minuted meetings or communications. I certainly did not personally use them in such a manner.
312. I performed a factory reset on both of my official devices prior to returning them to the Department, as the devices were to be re-allocated. This was in line with the extant advice and guidance. I understand that the Department has been seeking to recover any cloud-based records of messages and WhatsApps from my Departmental phone and I have shared my Apple ID and log in with them to assist with that process; however, I understand that thus far it has not been possible to recover any such messages.

313. I no longer hold the personal phone I had during the specified period. I upgraded my phone in December 2022, at which time my handset was factory reset and returned to the contract supplier. My replacement was then significantly damaged in an accident in May 2023, and had to be factory reset and refurbished for sale. I have, however, been able to obtain a list of WhatsApp groups of which I was a member during that period from my current phone and have summarised those in the spreadsheet accompanying this submission [NLO/20 - INQ000409334].
314. Finally, during remote meetings of the Executive Committee, I also occasionally used the chat function on Zoom, primarily to indicate when I wished to speak and on which item or, to a lesser extent, to clarify particular pieces of factual or numerical information. I am unaware of how other Ministers may have utilised such functionality beyond this. The Zoom Meetings were hosted by TEO officials and I am not aware whether any of those messages would have been retained.

Personal notebooks

315. I did not keep any informal or personal diaries, notes or journals during this period. All notes made of decisions were either recorded via email or, where they were in hard copy, were returned to the Department for filing or destruction with my Meeting Packs in line with the standard procedures for Executive Ministers. I did not retain any Executive or Departmental papers on leaving the Department of Justice, in line with good practice. I have requested that any such relevant materials still held by the Department be released to the Inquiry.

Lessons learned

316. I have throughout this statement provided as candid and honest assessment of the pandemic response by the Northern Ireland Executive as possible at this distance from the events and have indicated throughout where I believe improvements could be made in future.
317. However, there are three high level issues which I would wish to highlight specifically which impacted negatively upon the Executive's response to COVID-19.
318. Firstly, lack of continuity of government is a significant threat to preparedness, resilience, and recovery in Northern Ireland. We have had no devolved

government for 5 of the last 7 years: the impact on public services, and especially on our health service, and on the routine functions of government, such as planning for public health or other emergencies, is clear and profound.

319. Secondly, the structures of Government in Northern Ireland not only enable this instability, but are also a barrier to efficient and effective decision-making when the Executive is in place, as demonstrated elsewhere in this document. Mutual vetoes are a disincentive to co-operation, compromise and cohesion.
320. Institutional reform, such as that which my party has proposed would remove these vetoes in favour of weighted majority voting and restrict the use of such cross-community votes to issues specifically related to NI's special circumstances and, crucially, would prevent any single party collapsing the institutions.
321. Thirdly, given the unique position of Northern Ireland as a part of the UK with a land border with another jurisdiction, and the historical and current ties between Ireland and the UK through the CTA, I believe that future planning for such emergencies should be more closely aligned across the CTA and better co-ordinated at a five nations level. This would not only ease tensions within the NI Executive, but would allow both GB and Ireland to fully benefit from their island status in terms of disease control.
322. Those issues notwithstanding, there were areas where the response of the Executive was not just good, but exemplary.
323. The roll out of the vaccination programme in Northern Ireland was an example of excellence, and the speed and efficiency of delivery was incredibly impressive. I believe that the work undertaken by the PHA and in particular Dr Patricia Donnelly, who returned to work from retirement as part of the call for support for the health service at the outset of the pandemic, was essential in co-ordinating and driving the roll-out. It was also, however, indicative of the level of commitment and dedication of local healthcare staff, past and present, to both the health service and their patients.
324. In addition, the management of COVID-19 within the prison estate, was also an exemplar. Under the careful and dedicated management of the Director General of NIPS, Ronnie Armour, and Prison Service staff, Northern Ireland avoided any COVID-19 outbreak and any related fatalities within the prison system, in contrast

to most other jurisdictions. The degree to which officers were able to maintain the support and co-operation of prisoners and their families, through good communication, the introduction of virtual visits when in-person visits were suspended, and a range of other measures, led to prisons being safe and stable throughout. In addition, the work undertaken by prisoners and staff to support the COVID-19 efforts by, for example, stitching scrubs for local hospitals, meant that prisoners felt part of the wider community efforts as well as protected during the pandemic.

325. I also believe that as a relatively small and tightly knit community, our ability to capture the concerns of and work collaboratively with retail, hospitality, business, religious, community and voluntary sector partners was an asset. Whilst at times those relationships were placed under enormous strain, it is testament to their strength that we continued to enjoy that close partnership throughout the pandemic and into recovery.

326. Finally, in terms of lessons learned, I feel that the contribution made to our community by front-line and essential workers, deserved greater recognition, especially in times of crisis. During the pandemic, whilst many were able to work from home, many other people were required to continue to attend their workplace. In addition to health service staff, police officers and prison officers – which I have referenced elsewhere in this statement - a vast array of often low-paid workers continued to provide essential services to the public, from street cleansing and refuse collection operatives to shop assistants and delivery drivers, from school cleaners and catering staff to transport and agri-food sector workers. We owe them a huge debt of gratitude for their dedication and service during an incredibly stressful period for them and their families.

Statement of Truth

I believe that the facts stated in this witness statement are true and accurate to the best of my knowledge and belief. I understand that proceedings maybe 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: 12 March 2024