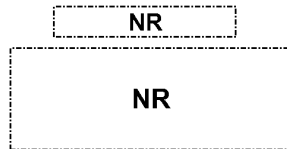


OFFICIAL-SENSITIVE



PS/First Minister (*)
Cabinet Secretariat (*)
Cabinet Secretariat (*)
Cabinet Secretariat (*)

(*) by tele-conference

Apologies

1. Apologies were received from Ms Hyslop and Mr Yousaf; they were represented, respectively, by Mr Hepburn and Ms Denham.

Minutes of Meeting held on 8 December 2020

2. The minutes of the meeting held on 8 December (SC(20)47th Conclusions) were approved.

Parliamentary Business (Paper SC(20)150)

3. Mr Dey outlined the planned business in the Parliament during the weeks commencing 14 and 21 December and 11 and 18 January, as set out in the tables in Annex A of paper SC(20)150. He noted that:

(a) Business for the week commencing 21 December remained subject to change, mainly because of the continuing uncertainty surrounding the outcome of UK-EU trade negotiations;

(b) A COVID-19 statement would need to be scheduled for the afternoon of Tuesday, 22 December, given the intention to hold a further weekly review of the allocation of protection levels before the Christmas recess (*see below*);

(c) Discussions were ongoing at Bureau about any arrangements that might be required, should Parliament need to be recalled during the forthcoming recess, for example, if a Legislative Consent Motion were required in relation to the terms of EU Exit, or in case of any material developments in response to the COVID-19 emergency.

4. **Cabinet agreed** the planned business in the Parliament for the weeks commencing 14 and 21 December and 11 January 2021, subject to any further changes that might be required.

(Action: Minister for Parliamentary Business and Veterans)

COVID-19: Coronavirus Update (*oral item*)

5. The First Minister invited the Interim Chief Medical Officer to provide Cabinet with an update on the progress of the COVID-19 pandemic and the work under way to counter its effects. As at 9 a.m. on Tuesday, 15 December, there had been 107,749 confirmed cases of COVID-19 infection in Scotland, an increase of 845 compared with the previous day. The proportion of new cases coming from former Level 4 areas was much less than previously, but a number of other NHS Board areas were showing a rising trend or had reached a relatively high plateau, including Grampian, Lothian, Fife, and Ayrshire.

COVID-19: Weekly Review of Protection Levels (Paper SC(20)151)

Briefing paper distributed to Ministers attending Cabinet:

- SC(20)48th Meeting - COVID-19: Review of Protection Levels - Daily Indicators Update as at 14 December 2020

6. Mr Swinney introduced paper SC(20)151, which invited Cabinet to consider the results of the weekly review of COVID-19 protection levels which the First Minister was due to announce in a statement to the Parliament that afternoon.

7. This was the sixth weekly review undertaken since the publication of *COVID-19: Scotland's Strategic Framework* on 23 October (SC(20)40th Conclusions refers), in line with the decision-making processes and governance arrangements set out in section 4 of the Framework: *Suppressing the virus*. The outcome of the weekly review had again been informed by expert advice from the National Incident Management Team (NIMT) and from the chief advisers and senior officials in the Four Harms Group.

8. In forming its conclusions, the NIMT had met the previous day to discuss a 'watch list' report (*Daily Indicators Update*) prepared by the COVID Modelling and Analysis Hub under the authority of the Chief Statistician, to provide information about level signals to inform the weekly review. The report showed the position of each local authority area in relation to five agreed indicators: daily figures for cases per 100,000 and test positivity rates (both updated on 14 December) and the latest weekly forecasts (made on 10 December) for cases per 100,000, hospital capacity and ICU capacity. Trends in the data had also been identified and taken into account, alongside more detailed data and analysis for each area supplied by the relevant Directors of Public Health. The final version of the report had been supplied to Ministers attending Cabinet to inform their decision-making and would be published that afternoon alongside the First Minister's statement to the Parliament.

9. Mr Swinney noted that the recommendations of the NIMT were set out at paragraph 11 of the paper. It had recommended that Aberdeen City, Aberdeenshire, Angus and Falkirk move up to Level 3, while confirming (as the previous week) that there was no reason that City of Edinburgh or Midlothian should move down from Level 3. While noting concern about the rising number of cases in East Lothian, the NIMT had not recommended that it should move up from Level 2.

10. The NIMT had also raised the question of whether consideration should be given to a planned, pre-emptive escalation to Level 4 nationwide on 28 December for a period of three weeks, although it had not presented any convincing argument as to why this should be a necessary or proportionate measure, especially given the current range of regional variation, as well as the fact that any rise in case numbers as a result of contacts over Christmas would take some time to manifest itself (during which time there would be an opportunity for at least one full review based on updated indicators), as discussed further at paragraph 34 of the paper.

11. As in previous weeks, Cabinet's decisions would also need to take into account the conclusions of the Four Harms Group, which had met to consider the NIMT's recommendations, as well as the outcome of the extensive Ministerial and official engagement with local government that had taken place over recent days (as summarised in the paper at Annex B).

(i) If it could be understood better why infection levels in some were not moving downwards as fast as expected, the content of individual levels could be tailored accordingly. Factors which might be important, aside from general compliance, were increased household gatherings and young people meeting up without paying heed to distancing requirements: both of these were difficult to control;

(j) A further general factor which might be causing infection levels to remain high in some parts of the country was travel between areas of higher or lower relative prevalence. There appeared to be significant passenger numbers on trains travelling between Glasgow and Edinburgh, and less sign of public messaging advising against unnecessary travel (and reminding them of the rules in place) compared with earlier in the year. In addition, it had been reported anecdotally, that, while some travellers to the Highlands from the central belt were aware that they might be contravening regulations, those from south of the border appeared to have little idea of the restrictions in place in Scotland;

(k) The same could be said for large shopping centres just inside local authority boundaries which attracted significant numbers of visitors (for example, shoppers at Straiton in Midlothian who lived in Edinburgh). In response, some further messaging to remind people of the risks (perhaps including a visible police presence) might be helpful;

(l) It would also be helpful for there to be dialogue with Transport Scotland, the ferry operators and Police Scotland about enforcement of the existing travel restrictions that should apply to visitors to the islands by ferry or by air. If the range of existing restrictions were not considered adequate, it would be helpful if proposals for any changes could be brought forward as soon as possible;

(m) The proposal to allow household visiting in the more distant Argyll islands was likely to be welcomed locally: it reflected the real problems of remoteness that existed in communities such as Coll and Tiree, which were at the farthest limits from the mainland, and could be permitted without significant public health risks, given very low levels of local prevalence;

(n) As far as the NIMT's suggestion of a pre-emptive decision to move to Level 4 on a national basis after the Christmas break was concerned, this ran contrary to the levels-based approach: it could undermine the principles of the *Strategic Framework* by causing restrictions to be imposed in areas where such a response would be disproportionate. The arguments set out in paragraph 34 of the paper therefore appeared sensible: any change in local restrictions would need to be guided by the evidence, including up-to-date data;

(o) It would be helpful to avoid too frequent changes between protection levels, if possible, because businesses required as much notice as possible – for the hospitality and tourism industry, it was very expensive to re-open only to close again;