

## THE UK COVID-19 INQUIRY

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### TRADES UNION CONGRESS SUBMISSIONS FOR THE SECOND PRELIMINARY HEARING IN MODULE 8

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#### **Introduction**

1. These are the submissions of the Trades Union Congress (**'the TUC'**) in advance of the second preliminary hearing in Module 8 of the UK Covid-19 Inquiry.
2. The TUC brings together over 5 million working people who make up its 48 affiliated unions. In this Inquiry, the TUC is working in partnership with TUC Cymru (formerly the Wales TUC), the Scottish TUC, and the Northern Ireland Committee of the Irish Congress of Trade Unions. Those affiliated unions with a particular interest in Module 8 were set out in submissions for the first preliminary hearing.
3. This submission focuses on the provisional list of issues and evidence.
4. The module appears set to give significant consideration to the issue of restricting attendance at schools. The impact of restricted attendance is of importance, but there is a danger of the issue eclipsing from sight what is another important issue: how best in a pandemic to safely keep schools open to all pupils? That requires examining how effective were the measures (short of restricting attendance) in the Covid-19 pandemic, and what lessons are to be learned for the next. It is on that issue that this submission focuses.

#### **The terminology of 'school closures'**

5. As a preliminary observation, the TUC affiliated unions generally refer to 'restricted attendance' rather than 'closures'. Schools were never closed to the children of critical workers, or to certain vulnerable children. Indeed, in the second wave the number of children attending during 'closures' was significant. For example, following the start of restrictions in January 2021, attendance continued at 14% in state-funded schools.

On 13 January 2021, 820,000 children of critical workers were in attendance, on-site.<sup>1</sup> That is not to underestimate that schools were ‘closed’ to a great many children.

### **The focus on restricted attendance**

6. As to the focus on restricted attendance, we note that much in the list of issues is framed around the decision-making on and effects of those restrictions. Issue 1 – planning and preparedness – asks whether pre-pandemic plans considered *“the potential for long term closure of schools to most children.”* There is reference to plans *“for keeping schools open”*, but it is unclear what is envisaged by that shortly stated issue. On issue 3 – the impact of the pandemic on education – the issues are framed around *“decisions to close and open schools”*, and *“provision of education during periods of closures”*. In Counsel to the Inquiry’s Note, it is said that *“the oral evidence in Module 8 will be structured in a way that enables consideration of how the decisions to close schools were made and other decisions relates to the consequences of school closures and lockdowns...”* and *“much of the focus will be on the decisions to close schools to most children in both March 2020 and between December 2020 and January 2021...”* (paragraphs 17-18).
7. We also discern in the disclosure a focus on the issue, particularly through the lens of asking whether school closures during Covid-19 were justified.

### **The merits of restricted school attendance: preparing for the last pandemic**

8. In the next pandemic, the question of whether to restrict attendance at schools cannot be considered as a self-standing question, or one that has been answered by an earlier public inquiry. To the contrary, it will inevitably be a multi-factorial decision, taken as part of overall strategy, and will be influenced (or even, for all practical purposes, determined) by the characteristics of the virus. For example:

- (a) Though terrible to contemplate given the horrors of the Covid-19 pandemic, the next pandemic may be caused by a virus that is more contagious, and/or of higher lethality (or other physical consequences) for children as well as adults. The virus may be such that unrestricted school attendance carries such a risk to

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<sup>1</sup> <https://explore-education-statistics.service.gov.uk/find-statistics/attendance-in-education-and-early-years-settings-during-the-coronavirus-covid-19-outbreak/2021-week-4>

pupils and/or staff that it is not even a realistic question to ask. Unrestricted school attendance will not always or invariably be within the meaningful control of government; the nature of a particular virus and progression of a pandemic may, for all practical purposes, take that decision away.

- (b) The nuance to the multi-factorial decision is underlined by some of the impacts upon children of not suppressing transmission of the virus. In the Covid-19 pandemic, joint work by a number of institutions including the University of Oxford suggests, as minimum estimates, that 13,000 children were orphaned by the pandemic, 13,500 lost a primary caregiver, and 15,700 lost a primary and/or secondary caregiver.<sup>2</sup> And that may have a particular impact for Black and Minority Ethnic households who are more likely to be intergenerational.<sup>3</sup>
- (c) A strategy that may be appropriate is a 'hard', short national lockdown with the aim of quickly suppressing a virus such that society can then continue. Depending upon the state of the pandemic and characteristics of the virus, that may be an effective strategy towards limiting the longer-term impact on children. Consider, for example, the approach in a country such as New Zealand which acted with an early lockdown and ultimately had far less resulting disruption in its schools.
- (d) Conversely, the pandemic may be one of such consequence that it requires a national response, but not of such consequence that restrictions on school attendance need be considered at all. But issues will still arise as to how to operate a school so as to maximise the safety of pupils and staff, and lessons will need to have been learned from the Covid-19 pandemic.
- (e) Ultimately, though the Inquiry has seen that preparedness and planning is fundamental, it has also heard that what is needed is a well-equipped toolbox of options to respond rapidly and effectively to the next pandemic as it arises

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<sup>2</sup> *Children: The Hidden Pandemic – Orphanhood and Caregiver Loss Based on Excess Covid-19 Death Estimates* (September 2022).

<sup>3</sup> E.g. Public Health England, *Understanding the impact of Covid 19 on BAME groups* (June 2020) pages 6 and 21.

with its inevitably unique characteristics. The real relevance of understanding and giving voice to the impact on children of restricting school attendance – at least in respect of responding to the next pandemic – is as a matter to be taken into account by decision makers as relevant to the overall objectives of and strategy for the pandemic response; it cannot be any more than that. A desire for unrestricted school attendance may require national strategy (opening or closing retail and other sectors, supporting test and trace, and so on) in order to retain sufficient ‘headroom’ in the R rate that schools can be attended unrestricted. But, that requires broader judgments balancing a number of issues. Restricting school attendance cannot be taken out of the toolbox.

9. Anxious consideration of the justification of restricting school attendance in Covid-19 is consideration of doing so in a specific and historic set of circumstances. In that respect, too narrow a focus on the question will be of far more use in preparing for the last pandemic, rather than the next.
10. Moreover, a simplistic steer that restrictions on school attendance should be avoided risks being positively harmful. In the Covid-19 pandemic the seeds of chaos in schools were sown with a ‘keep schools open at all costs’ approach of the then Prime Minister going into the Autumn term of 2020. As we explain in our submissions in Module 2, that resulted in the adoption of a ‘no plan B’ approach and, ultimately, a series of late, chaotic, and ultimately ineffective and counter-productive decisions in relation to schools over the following year. Indeed, what the Covid-19 pandemic showed was the dangers of setting one’s face against restricting school attendance, rather than mature, careful, and informed planning as to how best to serve society, including pupils, in the medium as well as the immediate term.

### **Considering how to keep schools open safely**

11. A valuable lens (arguably the most valuable) is to consider the different question of the extent to which safety within school and management of infection rates was optimised, and can be optimised in a future pandemic. In other words, how to keep schools fully open, as safely as possible. It is through answering that question that safety of pupils

(and staff) is protected to the greatest extent possible, and the prospect of avoiding restricted school attendance is maximised. As safely as possible means not only in terms of community transmission and deaths across the community, but also the safety of children who faced physical consequences of the virus (which were often underestimated<sup>4</sup>), and of staff.

12. A number of questions might be considered:

- (a) How effective was ventilation in schools? Was adequate consideration given to HEPA filters? What planned arrangements should there be in respect of air filters for the next pandemic?
- (b) What means of social distancing were or could be effective, considering the use of ‘bubbles’, rotas of attendance, obtaining use of larger spaces, and so on? That is a question that can be stated briefly, but is vexed in the context of managing a large number of children, of varying ages and needs, in relatively closed spaces.
- (c) How did, and should, infection prevention and control (IPC) operate in schools?
- (d) What use should be made in schools of PPE such as masks?
- (e) How effective was the test, trace and isolate system in schools, and how can it be improved? Is it effective to seek to operate mass testing systems within schools, or would it be better done from pupils’ homes?
- (f) Where NPIs necessitate restrictions on some groups of students but not others, how is that done effectively whilst minimising the impact on children (considering, for example, the differing impacts on vulnerable children, on early years, on pupils in exam years)?
- (g) How effective are the arrangements between the Department for Education, local education authorities, local public health, and education staff (including unions) in working together to operate schools as safely as possible?

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<sup>4</sup> E.g. Deepti Gurdasani and others, *Covid-19 in the UK: police on children and schools*, BMJ (2022).

13. It may be that with adequate ventilation, effective use of test and trace in schools, effective infection prevention control, and other non-pharmaceutical interventions, a need for restricting school attendance that might otherwise arise can be avoided.
14. It is for all of these reasons that the TUC wrote with three other Core Participants<sup>5</sup> (letter of 27 March 2025) expressing concern that *“the safety of educational institutions, and how to make them safer for future pandemics, will not be addressed in sufficient detail in Module 8”* which would *“risk preventing the Chair making meaningful and impactful recommendations that would ultimately help mitigate the impact of any future pandemic upon the education of children and young people and the safety of children and young people in educational settings, and the risk of transmission to those in their families and wider communities.”* The letter invited the Module 8 team to instruct an IPC expert to comment on these issues, in particular, the safety of educational institutions and how they can be improved; how safe school buildings were/are and how to make them safer; and to address the barriers to any IPC measures needed to ensure safe and continued access to education for children and young people in spite of a pandemic. These matters are of huge importance and, in the next pandemic, may be of critical.
15. The Inquiry is invited to shift its course in Module 8 and ensure it includes in its consideration how to maximise safety of schools in a pandemic (including the matters at paragraphs 12(a) to (g) above) and obtain the necessary evidence to do so.

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<sup>5</sup> Clinically Vulnerable Families, Long Covid Kids and Long Covid Kids Scotland.