UK COVID-19 INQUIRY

MODULE 7 – TEST TRACE AND ISOLATE

CLOSING SUBMISSIONS FOR PUBLIC HEALTH SCOTLAND

Introduction

1. Public Health Scotland (PHS) is pleased to have been designated as one of the Module 7 Core Participants, on a joint basis with NHS National Services Scotland (NHS NSS). It provided a detailed corporate statement and was represented throughout Module 7. In addition, PHS' Head of Health Protection Infection Services Division (and former Strategic Incident Director), Professor Jim McMenamin, gave oral evidence. PHS fully adopts the evidence he gave.

2. The purpose of this written closing submission is to add to what has already been said on behalf of the organisation by its corporate statement, its opening written statement, and in Professor McMenamin's oral evidence. PHS seeks to add its further reflections having benefited from having had the opportunity to listen to all the evidence in this module.

3. What follows focuses on what PHS considers are some of the more important points (at least from this organisation's perspective) arising out of the evidence.

The Module 1 report recommendations

4. PHS is mindful that the Inquiry has already issued its Module 1 report and has recommended the creation of a UK-wide independent statutory body for whole system civil emergency preparedness, resilience and response. PHS proceeds on the assumption that this recommendation will be enacted, and that the new statutory body will in due course assume responsibility for civil emergency preparedness.

5. PHS is committed to continuing to work on pandemic preparedness. In the witness session for Professor McMenamin, progress in relation to the proposed Scottish Pandemic Sciences Partnership – hosted by PHS - was noted. Specifically, Professor McMenamin advised that plans to appoint a Director for the Partnership were proceeding. PHS is pleased to confirm that Co-Directors were appointed after Professor

McMenamin gave evidence and will take up their posts later this summer. Work will therefore now continue on this vital building block of pandemic preparedness and planning in Scotland.

Matters arising from Professor McMenamin's oral evidence

6. During Professor McMenamin's oral evidence on 29 May 2025, he offered to provide further information to the inquiry in relation to certain matters. PHS is able to update the Inquiry and, in addition, wishes to highlight certain matters from Professor McMenamin's oral evidence as follows.

6.1. **Test and Protect App interoperability:** In relation to consideration given into making sure that the Scottish App would work with the app used in England and Wales, given the open border with England, Professor McMenamin explained that the matter was considered, but advised that questions about how that worked on the ground may have to be deferred to some of his other colleagues. PHS wishes to refer to paragraphs 5.9 and 5.10 of its corporate statement. PHS was not involved in the development of the app and, therefore, is unable to offer any detail in relation to this matter. PHS suggests that, should the Inquiry seek further information on this matter, that they liaise with the Scottish Government and NHS NSS.

6.2. **Analysis in PHS Hospital Discharges Report:** Professor McMenamin explained the correspondence between PHS and Ed Humpherson on confidence intervals used in the report. This is discussed at paragraph 12.2.8 of PHS' corporate statement for Module 6. Further, this matter is indirectly related to the point that Scott Heald, Director of Data and Digital Innovation and Head of Profession for statistics at PHS made during the Module 2A hearings in which he stated that Ed Humpherson's letter was:

> "*more about the communication of the results rather than the results per se. And we did take that on board and we did an update to the report the following April where we went into a lot more detail with a lot more visuals to help people understand what we were saying*" (Module 2A transcript, 17/1/24, page 143, from line 3).

In addition, PHS notes the references in the Scottish Covid Bereaved's oral closing statement on the impact of hospital discharges in care homes during the pandemic. PHS suggests that it might be helpful to the Inquiry if it provides further information to

provide clarity on this point. While PHS fully acknowledges that every death in a care home death was regrettable, its analysis [INQ000101020] did not find a statistically significant association between hospital discharge of any type and the occurrence of a care home outbreak, but could not rule out a small effect. What was found was that the risk of an outbreak was more strongly associated with increased care home size. The conclusions of the PHS report are in line with other studies in the UK which found that the great majority of care home cases were found in individuals without a link to hospital discharge, i.e. cases infected from contact within the community, for example from either direct import in residents with access to the community or from their contact with other residents, staff, relatives or other visitors to the care home. The Inquiry has heard evidence a number of times and across different modules (including from Professor Nicholas Phin, formerly of PHS, in his evidence in Module 2A (Module 2A transcript, 19/1/24, page 212 onwards) – and also in Module 6 from Professor Laura Shallcross (paragraph [43] of her witness statement [INQ000613177]) - to the effect that hospital discharges were not the main driver of infection in care homes. This matter will no doubt be addressed in more detail during Module 6.

6.3. **Use of translation service:** Professor McMenamin was asked to explain why a quote from a translation service was sought whereas, ultimately, that particular avenue was not pursued. PHS wishes to draw to the Inquiry's attention paragraph 7.3.8 of PHS' corporate statement for Module 7. In response to its paper "Monitoring ethnic health inequalities in Scotland during Covid-19 data and evidence" dated 8 March 2022 [INQ000147479], PHS recommended that Test and Protect automated emails and test messages should be translated into other languages. The quote was requested, but it was not implemented mainly due to a change in translation provider, changing guidance and support information, a focus on vaccination and the emergence of the Omicron variant.

6.4. **Employer engagement.** Professor McMenamin was asked by the Scottish Covid Bereaved Families for Justice what steps PHS took to support employees to fully engage with Test and Protect. PHS understands the interest in this matter but confirms that Professor McMenamin was in substance correct in his response: the role of PHS in this context was to advise the Scottish Government, and it was for the Scottish Government to set policy. It is also important for the Inquiry to be aware that PHS had no role in advising about amounts in the context of financial support, that

being an issue that governments (with access to financial information) are uniquely well-placed to consider.

Lessons learned

7. The Inquiry has always been clear that in examining, preparing and reporting on preparations for, and the response to, the pandemic, it is interested in what went well during the pandemic. PHS agrees with this approach; lessons learned can include learning what went well, to attempt to ensure that similar steps are taken in future pandemics.

8. PHS has already set out in its evidence statement how substantial learning has already been acted upon, thus building the substantial legacy put in place since the pandemic. Such legacy includes the ability to scale up testing backed up by better laboratory and whole genomic testing capacity and readily available test data; an approach to contact tracing based upon local delivery supported by a national approach including a national contact tracing centre; a respiratory surveillance plan; and a model IT infrastructure of support and logistics.

9. PHS has also heard much evidence during the hearing attesting to the real consequences for certain groups where more work would need to be undertaken in any future pandemic. In its written evidence statement (Section 11.7), PHS notes it is focused on harnessing a whole system way of working to galvanise partners in shared action towards reducing health inequalities and improving health and wellbeing. A healthier population going into a pandemic would result in less pressure on the health and social care system in responding. This needs to be a core part of the legacy of the pandemic.

10. PHS is ready to further develop this legacy with conclusions and lessons learned from this module of the Inquiry.

Recommendations

11. PHS does not seek to propose any recommendations at this time and, instead, will await the Inquiry's conclusions, which will be considered fully in due course.

Closing remarks

12. The Module 7 hearings have provided much valuable evidence which PHS has, and will continue, to reflect upon. PHS awaits the Inquiry's conclusions and recommendations, which it looks forward to giving its full and careful consideration.

13. As in previous modules, PHS once again offers its condolences to all those bereaved as a result of COVID-19 and its sympathy to the wider public who suffered and still suffer the far-ranging effects of the pandemic and COVID-19.

14. At the end of his evidence to Counsel to the Inquiry, Professor McMenamin placed on record his thanks to the Scottish population for their self-isolation and adherence to the Test and Protect programme. It is important for the Inquiry to be aware that in offering that thanks Professor McMenamin was not simply being appropriately polite or grateful. He was also mindful that there will be a future pandemic, and that public adherence to Non-Pharmaceutical Interventions (NPIs) will probably be important in that pandemic. It is therefore appropriate that, even during what has been referred to in this module as 'peacetime', public confidence in the efficacy of NPIs is maintained. It is hoped that placing on record gratitude to the population might, at a small level, assist in maintaining that public confidence. The Inquiry's reports are likely to be impactful in that regard.

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