NHS Ayrshire & Arran



Meeting: Ayrshire and Arran NHS Board

Meeting date: Monday 9 October 2023

Title: National COVID19 Inquiries

Responsible Director: Dr Crawford McGuffie, Executive Medical Director

Report Author: Professor Hazel Borland, Clinical Lead, COVID19 Inquiries

1. Purpose

This is presented to the Board for:

Decision

This paper relates to:

Legal requirement

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The UK COVID19 Inquiry Chair was appointed in December 2021 with the final Terms of Reference received by Parliament in June 2022.

The current Scottish COVID19 Inquiry Chair was appointed in October 2022 with the Inquiry's Terms of Reference also published at this time, after being amended to make explicit reference to a human rights-based approach.

NHS Ayrshire & Arran is legally required to respond in a timely manner to all Statutory Public Inquiries.

This report provides assurance to Board members that NHS Ayrshire & Arran is in a position to comply with the requirements for both Inquiries, and ask whether the Board wishes to delegate this work to the Healthcare Governance Committee for oversight or continue to receive reports direct to Board when required (see recommendations below).

2.2 Background

In order to facilitate responding to Public Inquiries a co-ordinated approach is required locally to work closely with:

- Central Legal Office (CLO) with regard to national requirements and deadlines
- Local colleagues across Ayrshire and Arran to co-ordinate information requests (which may at times be very tight), witness statements, witness attendances, appropriate governance scrutiny for information being shared, and other elements which will arise during the course of the Inquiries.

2.3 Assessment

2.3.1 UK Inquiry:

Terms of reference and progress of the Inquiry are on the public website <u>UK Covid-19</u> <u>Inquiry (covid19.public-inquiry.uk)</u>

- <u>Module 1:</u> (pre pandemic planning) has now completed public hearings and took evidence from all 4 UK countries.
- Module 2: (decision making) will commence in autumn 2023, with module 2A specifically covering Scotland decision making. Hearings for Scotland will be held in Edinburgh January February 2024.
- Module 3: (impact on health and care across UK) Hearings will be in Autumn 2024. Scope for this module in the link below:

https://covid19.public-inquiry.uk/wp-content/uploads/2023/05/Module-3-Provisional-Outline-of-Scope-in-English.pdf

- Module 4: (vaccines; anti-viral treatments etc) Scottish Boards have been approved for Core Participant status this cannot be made public until the Inquiry publishes this information. Hearings will be in Summer 2024. Scope for this module in the link below:
- Module 4 Provisional Outline of Scope.docx (covid19.public-inquiry.uk)
- Module 5: (procurement) opens on 24 October 2023 with hearings planned for 2025
- <u>Module 6:</u> (impact on care sector) commences December 2023; care sector across UK. Hearings Summer 2025

2.3.2 Scottish Inquiry:

Terms of reference and progress with the Inquiry are on the public website <u>Scottish</u> <u>Covid-19 Inquiry (covid19inquiry.scot)</u>

The Scottish Inquiry started with a two day scene setting presentation on 26 and 27 July 23 on the epidemiology of Covid19 by Dr Croft, expert Epidemiologist and Consultant in Public Health.

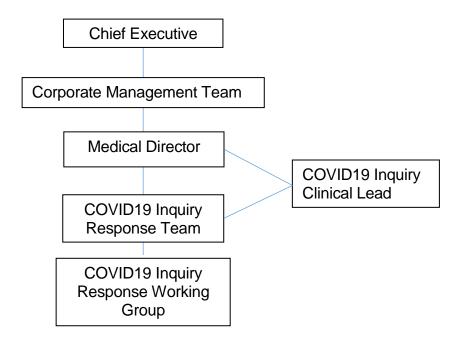
A Preliminary Hearing took place on Monday 28 of August 2023 at Murrayfield Stadium in Edinburgh. The Hearing was attended by representatives together with CLO Counsel, and a number of clients which included a Medical Director, Executive Nurse Director, Director of Public Health and Deputy Chief Executive.

Impact Hearings to hear from patients, families, charities and representative groups will commence on 24 October 2023 and run continuously until 8 December 2023. Hearings will pause during Module 2A of the UK Inquiry and recommence in February 2024.

2.3.3 NHS Ayrshire & Arran (NHSAA)

- Dr Crawford McGuffie, Executive Medical Director is the Lead Director for both Inquiries and a part time Clinical Lead has been appointed to oversee preparation and NHSAA responses on his behalf.
- A small co-ordination / response team has been established with weekly meetings in place (this team all have substantive day jobs which are seen as critical to this work).
- Approval has been given to recruit a Public Inquiries Co-ordinator post and this is in advanced progress.
- An organisation wide Working Group has also been established with representation from each Directorate and Health and Social Care Partnership. This will ensure involvement from across the organisation in a timely manner when required.
- Monthly reports are provided to Corporate Management Team with regard to Inquiry progress and our responses / participation.
- All deadlines for information thus far have been met.

Governance Structure:



2.3.4 Quality/patient care

There is no current expectation that the inquiries will impact on the quality of patient care whilst they are running.

2.3.5 Workforce

As described above a small team has been formed (in addition to their substantive roles) to ensure the organisation responds as required.

A new post of Public Inquiries Co-ordinator is under recruitment to programme manage our responses, provide reports and ensure we meet any required deadlines.

Discussions have taken place with Staff Care and Occupational Health with regard to the provision of wellbeing support for any staff who are required to give evidence as witnesses or provide statements. It is recognised that this activity could be triggering for staff in terms of trauma and accessing wellbeing support will be critical for some staff.

Offers have been made to Area Clinical Forum and Area Partnership Forum to discuss the Inquiries with their members.

2.3.6 Financial

None at this time.

2.3.7 Risk assessment/management

No additional risks identified at this time. Responding to the Inquiries is business as usual.

2.3.8 Equality and diversity, including health inequalities

It is a legal requirement for the NHS Board to respond to and comply with both national COVID19 Inquiries. Any equality, diversity and health inequality issues are being addressed by each Inquiry.

2.3.9 Other impacts

- Best value:
 - Vision and Leadership
 - Effective Partnerships
 - Governance and accountability
 - Use of resources
 - Performance management

It is anticipated that there will be potential national learning within each of these elements across the UK for all public services, including health and care systems as a result of these Public Inquiries.

2.3.10 Communication, involvement, engagement and consultation

It is a legal requirement for the NHS Board to respond to and comply with both national COVID19 Inquiries. Any national communication, involvement and engagement issues are being addressed by each Inquiry.

Key messages from the Inquiries have been shared with staff and the public when made available by the Inquiries. Staff have been encouraged to engage with the Storytelling and Listening projects for both Inquiries to share their experiences.

The Corporate Management Team has received monthly update reports from the Clinical Lead throughout 2023.

2.3.11 Route to the meeting

The information contained within this paper has been previously considered by the Corporate Management Team.

2.4 Recommendation

For Decision. Members are asked to consider:

- Whether the Board is assured that the required systems are in place with regard to responding to and complying with both national COVID19 Inquiries.
- Whether the Healthcare Governance Committee should have oversight of future updates with regard to the Inquiries on behalf of the Board?