



OFFICIAL REPORT
AITHISG OIFIGEIL

COVID-19 Committee

Thursday 28 May 2020

Session 5



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Pàrlamaid na h-Alba

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Thursday 28 May 2020

CONTENTS

Col.

“COVID-19—FRAMEWORK FOR DECISION MAKING: SCOTLAND’S ROUTE MAP THROUGH AND OUT OF THE CRISIS”	1
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COVID-19 COMMITTEE

7th Meeting 2020, Session 5

CONVENER

*Murdo Fraser (Mid Scotland and Fife) (Con)

DEPUTY CONVENER

*Monica Lennon (Central Scotland) (Lab)

COMMITTEE MEMBERS

Willie Coffey (Kilmarnock and Irvine Valley) (SNP)

*Annabelle Ewing (Cowdenbeath) (SNP)

*Ross Greer (West Scotland) (Green)

*Shona Robison (Dundee City East) (SNP)

*Stewart Stevenson (Banffshire and Buchan Coast) (SNP)

*Adam Tomkins (Glasgow) (Con)

*Beatrice Wishart (Shetland Islands) (LD)

*attended

THE FOLLOWING ALSO PARTICIPATED:

John Swinney (Deputy First Minister and Cabinet Secretary for Education and Skills)

CLERK TO THE COMMITTEE

James Johnston

LOCATION

Virtual Meeting

Scottish Parliament

COVID-19 Committee

Thursday 28 May 2020

[The Convener opened the meeting at 09:00]

“COVID-19—framework for decision making: Scotland’s route map through and out of the crisis”

The Convener (Murdo Fraser): Welcome to the seventh meeting of the COVID-19 Committee. We are joined for today’s only agenda item by John Swinney, Deputy First Minister and Cabinet Secretary for Education and Skills, who will be giving evidence on the Scottish Government’s paper “COVID-19—framework for decision making: Scotland’s route map through and out of the crisis”, which was published last week.

We have apologies from Willie Coffey, who is not able to join us. I welcome Mr Swinney to the meeting and invite him to make a short opening statement. We are expecting more information from the First Minister later today; I do not know whether Mr Swinney is able to share with us any details that are likely to be announced.

The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney): Thank you, convener. Last Thursday, the Government published “COVID-19—framework for decision making: Scotland’s route map through and out of the crisis”, and I welcome the opportunity to discuss it further with the committee today.

The route map sets out a path in which we will carefully and gradually seek to come out of lockdown by changing current restrictions. There is a clear need to take a phased approach so that we can balance the risks to health, the economy and society but also provide a sense of hope to the people of Scotland. The four phases that are outlined in the route map cover nine key aspects of our lives: seeing family and friends; travel and getting around; education and childcare; work, business and the economy; shopping and leisure; sport and culture; public gatherings and special occasions; communities and public services; and health and social care.

We have made clear that the phasing table, which is a crucial part of the route map, will continue to be updated in line with the three-weekly cycle of the lockdown regulations. Today marks the next three-weekly review deadline and,

by law, we will have a decision to make on the continued necessity of the regulations and what that means for moving from a lockdown phase into phase 1. That decision will build on the considerations that went into the creation of the route map.

I will outline the information that we are taking into consideration to inform our decision-making process. The Scottish Government regularly receives updates on Scotland’s R number. It is vital that we keep the R number below 1 and see the number of infectious people continue to fall. An increase beyond 1 would risk exponential growth in the number of cases, hospitalisation and deaths, causing very significant harm to Scotland’s health, society and economy. That is why the Government is exercising such care and caution.

The Scottish Government also monitors core national surveillance measures, which include the number of Covid-19 cases, hospitalisation levels, intensive care unit admissions and deaths. We will continue to monitor those core national measures to inform any future decisions.

To progress from our current lockdown phase to phase 1, we will need to have seen evidence of transmission being controlled. That will include the R number being below 1 for at least three weeks and the number of infectious cases starting to decline. Evidence of transmission being controlled would also include a sustained fall in the supplementary measures that were outlined earlier over at least three weeks.

Following the conclusion of this review, I will write to the committee later today to update it on the outcome and to outline the next steps. They will be set out by the First Minister later today. I am happy to answer questions from the committee on this and any other issues in connection with the route map.

The Convener: Thank you for that introduction, Mr Swinney. I will start by picking up the point that you made about the evidence base and the R number. Some committee members attended a briefing on the R number last week, which was very helpful in assisting us to understand it. The take away was that there is a level of imprecision around the R number, which is on a scale. It is therefore difficult to be exact about where the R number sits, now or at another point, or indeed where it sits internally, in different parts of Scotland, or in relation to the rest of the United Kingdom. To what extent will the Scottish Government’s decisions be based on the science as opposed to being political judgments? What is the balance between those two factors?

John Swinney: What I tried to cover in my opening is that the R number represents one element of the decision making that we will

undertake as we consider the evidence. All the observations that you have made about the R number are fair. It is set within a range. It can be difficult to be absolutely precise about it, and there will be variations around the country, although it is difficult for us to be confident about the more granular analysis in different geographies within Scotland.

The R number is one element of the decision-making process. As I said in my opening remarks, we need to see an R number of less than 1 for a sustained period of time before we can move from lockdown into phase 1. However, we also look at other indicators, such as the level of hospitalisation, the number of admissions to intensive care units, and the number of deaths. If I take the number of deaths, for example, the weekly, more comprehensive data provided by National Records of Scotland has shown a sustained reduction in the number of deaths on that broader measure for three weeks. That gives us confidence that the prevalence and the effect of Covid-19 is reducing in our society. When we look at those numbers alongside the detail of the R number being below 1, it gives us confidence that we are seeing a reduction in the prevalence of Covid.

Ultimately, there is no precision about all these decisions. An element of judgment has to be applied to all the data using a wide range of factors. The framework for decision making that the First Minister published a few weeks ago was designed to demonstrate and acknowledge that the Government recognises that the harm arising from Covid is not just the direct harm that it causes but the impact that it has on our health more widely and on social and economic issues. That is why a more nuanced judgment has to be made, rather than just saying, "The R number has reached a particular level so we will do this."

I hope that that has helped to explain the context of the Government's decision making.

The Convener: Indeed, and thank you. Some other members will explore those issues in a bit more detail later.

We have seen different approaches being taken in different parts of the United Kingdom. There was a relaxation of restrictions in England two weeks ago. We have also seen other countries in Europe, such as Germany, Sweden and France, take greater steps towards relaxing lockdown. What is the Scottish Government learning from the experience of elsewhere in the UK or other countries in Europe? How much are you analysing and getting information on what is happening there in response to their relaxation of restrictions?

John Swinney: We are looking carefully at the experience of other countries that have decided to

relax lockdown. We will, of course, look carefully at that evidence to determine what lessons it conveys to us about the steps that we take.

The modellers who work in the Scottish Government will use some of the scientific evidence that emerges about the impact on the level of infectiousness within countries and the spread of cases as a consequence of particular actions that they have taken. We will look at the effect of the changes in individual countries on the prevalence of Covid in those countries to determine whether there is anything of which we should be conscious and aware as we take particular decisions. We are looking at those lessons.

Another lesson that we have learned throughout the pandemic, and in all questions of resilience over many years, concerns the necessity of clarity in communication and in our message to members of the public. If we are asking the public to do certain things, we have to be very clear about what that involves so that they fully understand the message that we put across. We are certainly looking closely at the experience in other countries to determine the lessons that we should learn.

The Convener: Monica Lennon wants to come in with a follow-up question on the R number, but first I have a final specific question on easing lockdown.

I have had representations—as I am sure you have, cabinet secretary—from a lot of people in the tourism sector who are desperate for some clarity as to the likely way forward. They want to know whether they will have any sort of season at all this year, and whether they can take bookings.

I appreciate that it is very difficult to attach any dates to the different phases that have been set out in the road map, but I will highlight one concern that providers of self-catering accommodation have expressed on a number of occasions. They cannot understand why they are lumped together in phase 3 with providers of hotel and bed-and-breakfast accommodation, when it would seem that the issues in those sectors are quite different. It is quite possible for someone to book a holiday cottage, lodge or caravan and to be able to socially isolate there with members of their family in a way that would not be possible in hotel-type accommodation. Why has there been no differentiation between those two sectors, rather than putting them together in phase 3? Might the Scottish Government be prepared to reconsider that decision?

John Swinney: We have made clear that we will continue to look at the route map to determine whether all the components of individual phases are in precisely the correct position for the relaxation of lockdown. I understand exactly the

point that you raise; it has been raised not only with me, by businesses and individuals in my constituency, but very much with the Cabinet Secretary for Rural Economy and Tourism, Fergus Ewing. The Government is actively looking at all those questions to determine whether we have the timing correct in relation to phasing.

It is important to remember that, in seeking to open any sector, a certain amount of preparatory work will have to be undertaken to enable that to happen. With the phasing, we have tried to give individual sectors as much of a line of sight as possible as to when they may conceivably restart their activities. We want to give them a sense of what they may need to consider before they move into a particular phase, if we are in a position—and if the science is with us—to enable us to take that step.

In setting out in the provisions for phase 3 that we should consider enabling accommodation providers to open at that stage, we are taking an approach that recognises the need for appropriate staging of reopening in our society, because we have to watch out for the cumulative impact of the decisions that we take at different stages. That is one of the key elements of the phasing process. We have to recognise that, however valid the arguments for individual sectors to open of their own right in their own compartments, those actions will inevitably have a cumulative effect on the danger of infectiousness in our society. As a consequence, we have to be mindful of what sits alongside any further changes.

Our judgment was that the provisions on accommodation providers were correct in phase 3, because of those relative and cumulative factors. However, the Government will carefully consider all those questions as we move forward.

09:15

The Convener: Monica Lennon has a supplementary question on the R number.

Monica Lennon (Central Scotland) (Lab): Good morning, Deputy First Minister. You have given the convener a helpful explanation. Thank you, also, for arranging the committee's briefing with the chief statistician last week, which was very helpful.

You are saying that the R number is one element of decision making. We know that it is currently somewhere in a range between 0.7 and 1, and that it is difficult to be absolutely precise. I wanted to get some clarification. The framework document specifically says that, to move between phases, R needs to be below 1. What would happen in a situation where the range was believed to be between 0.8 and 1.1? For the

purposes of decision making, would a range of 0.8 to 1.1 be classed as over 1?

John Swinney: Monica Lennon will appreciate that her question is somewhat hypothetical, but it is not unreasonable. If I was undertaking a media interview, I would probably say, "I don't answer hypothetical questions," but I am speaking to the committee, and I accept the premise of the question.

I think that, if we saw the range moving from 0.7 to 1 up to 0.8 to 1.1, we would be exercising a bit more caution. To put it in the context of my response to the convener's first question, the R number is not the only factor that we are considering; we are also looking at the levels of ICU admissions, hospitalisations, deaths and cases.

If the R number went in the direction that Monica Lennon has put to me, but with every other indicator moving in the opposite direction, we would be looking at the situation with care, but we might not take an abrupt decision. If, however, some of the other indicators moved in the opposite direction in a subsequent week, there would be cumulative pressure to apply more measures—to apply further lockdown than we had been doing at that stage.

That would be a fine judgment to arrive at, but we are not considering R as the sole indicator; we are looking at a range of factors. We would have to be confident that there was sufficient evidence in the other range of factors to outweigh what would be a troubling change of direction if the R number moved in the fashion that Monica Lennon has put to me.

The Convener: Does that answer your question, Monica?

Monica Lennon: Thank you, yes.

Annabelle Ewing (Cowdenbeath) (SNP): Good morning, cabinet secretary, and colleagues. I have a substantive question regarding the route map. This issue has been raised with me as a constituency MSP. In the first phase—and perhaps the second phase—what would be the position of the vulnerable group? That is the group that falls outwith the definitions of the shielded group, but quite a bit of support has helpfully been made available to it. Some questions have come to me about the position for people in the vulnerable group if we move to the first phase.

John Swinney: We accept that, for people who are shielding and for the vulnerable groups that we have identified—if we use that terminology—on-going support will be needed when we move out of certain phases. Also, although I appreciate that this was not the question that Annabelle Ewing put to me, on-going support will need to be in place

when the formal period of shielding, as prescribed by the chief medical officer, comes to an end.

We will need to apply very sensitive judgment to the nature of the advice that is given to the people in the group that Annabelle Ewing asked about. I have seen correspondence and communication from members of the public who are in what I might call, for shorthand, the flu jab category—people who are over 70, who are entitled to get the flu jab and who we think need to take extra care to avoid contracting Covid. As we relax lockdown measures in society, those individuals will want to be part of that relaxation. I completely understand that. It is important to get the correct messaging to those individuals about how they should exercise the greatest degree of care and protection as they potentially participate in a more relaxed situation beyond lockdown.

A careful balance needs to be struck in relation to giving advice to individuals as opposed to giving them instructions. I accept that under lockdown, a very clear instruction has been given to people, whereas as we relax lockdown we will inevitably move into a phase in which people will have to exercise more individual judgment about what they want to do and how much protection they want to put in place according to their own circumstances. We need to inform that discussion actively to help members of the public. That is what Government communication is designed to do.

Annabelle Ewing: I thank the cabinet secretary for that answer. It is certainly helpful to know that that bit of extra support for people in the vulnerable group will still be there for them if they feel that they need it. It is equally good to know that people who feel that that is not for them can perhaps make other choices, mindful of the guidance that would then be in place.

I will take this opportunity to ask about the shielded group. I understand that the matter is under review, but when will people in that group have further clarity on the next step for them?

John Swinney: We will make further guidance available to people in the shielded group before the conclusion of the 12-week period that was set out by the chief medical officer, which falls on 18 June. Further guidance for that group will be made clear in advance of that date. We are actively looking at those questions, but I am not in a position today to confirm to the committee exactly what those arrangements will be. In the light of this exchange, I will, of course, inform the committee about the steps that we are taking to ensure that the committee has the opportunity to consider all the issues and their implications.

Annabelle Ewing: Picking up on a point that the cabinet secretary made in his first answer to me, I am now finding that a lot of people are

coming to me to be the judge, as a constituency MSP; they are asking me, “Can I now do this on X date?”. Not least because I am a lawyer by trade, I do not feel that that is my role in life and it raises an important point. The cabinet secretary talked about moving to guidance rather than instruction and the importance, therefore, of clear communication from the Government. I make the point that that is becoming crucially important, because people must recognise that they will have to look at the information and then make a judgment based on the particular facts and circumstances of their case. Can the cabinet secretary confirm that my understanding is correct?

John Swinney: I understand the dilemma and I see it each day in my mailbox. My own constituents, and members of the public from around the country, come to me with questions about what they should do in certain circumstances.

We are moving into a phase in which individuals will have to exercise a great deal more judgment about what is appropriate and about which steps they should take. The role of the Government is to be as clear as possible in every aspect of our communication. That might be through direct public information advertising, of which we have undertaken a significant amount; it might be through ministerial statements, such as the First Minister’s daily briefing, or in statements to Parliament and in other forums.

The clarity of our communication and messaging is very important. When we were producing the route map, we took great care to ensure that what we were setting out could be clearly understood by the public. There are issues to wrestle with as we move from lockdown to phase 1. The Government has provided headline information in the route map. I think that it is very clear and we have endeavoured to make it clear. As we begin to develop that in detail, a host of other issues will emerge and we will have to give clarity on those.

There is a significant amount of detail to communicate about particular changes. That means that members of the public must engage actively in making informed judgments about what they should do. I do not underestimate the challenge that that causes for individuals who want to get on with their lives. I encourage people to think carefully about the steps that they take, because they will have to take an approach that probably none of us has ever had to take before, but which we will have to keep following to maintain public health, and individual health as a consequence.

The Convener: I am sure that we have all had lots of questions from constituents asking us

precisely what they can do in certain circumstances.

Adam Tomkins (Glasgow) (Con): I will keep pursuing the theme that Annabelle Ewing began to explore: the relationship between rules and discretion as we begin to take tentative steps out of lockdown. That is the relationship between what we legislate for and what we leave to individual choice and judgment.

Cabinet secretary, you clearly said in response to Annabelle's questions that, as we went into lockdown, we legislated for almost everything, leaving very little up to individual judgment. We were very prescriptive about not leaving home without a reasonable excuse and we were very prescriptive about what those reasonable excuses were. They were all listed in the regulations that we, as a Parliament, made.

You have just confirmed what I was going to ask you about. As I read the various Government documents that were published this week and last week, it became clear that exiting lockdown would be more complicated than entering it. Rules and legislation will not be able to cover everything and there will be more room for individuals to exercise their own judgment.

Given that we now have that shared understanding of the landscape, what role will MSPs have if we move more of the key communications out of regulations, which Parliament makes, and put them into Government guidance, which Parliament has no role in making? Will that not inevitably cut Parliament out of the loop?

09:30

John Swinney: That is not the Government's intention. My ministerial colleagues and I are happy to engage in discussion on any issues with this committee and other parliamentary committees as well as in wider parliamentary debates to enable us to understand and reflect on the issues that are concerning members of Parliament. I assure the committee that the Government will listen carefully to any questions that are raised.

I found the parliamentary debate that took place a week past Tuesday in which we reflected on the framework for decision making to be enormously helpful to me in navigating my way through considering how we move out of lockdown to a more relaxed position. I freely concede that that has been the most complex analytical exercise that I have ever been involved in in my 13 years in government and as a minister. Mr Tomkins is absolutely correct that going into lockdown was pretty simple but coming out of it is incredibly complex.

I say openly to the committee that the debate that we had in Parliament a week past Tuesday was valuable in helping to inform our thinking at an absolutely critical moment in the design of the route map, which was launched last Thursday—we literally worked on it overnight on Tuesday and into Wednesday and it was finalised on Thursday morning. The debate enabled us to make judgments that reflected the breadth of parliamentary opinion and the concern that was expressed.

Inevitably, we have to ensure that, within the parliamentary agenda, we have the opportunity to engage with members of Parliament. Obviously, we will set out today, based on the evidence that we have in front of us and on what we published last Thursday, whether we can move to phase 1. Although we have advertised what phase 1 is likely to look like at a high level if we can proceed to it, as I said in my response to Annabelle Ewing, the minute that we leave that high level and go into more detail, we will inevitably come down on one side of the arguments or discussions about points of detail, and other individuals may take different views. We will get into territory that is much more difficult to determine, where there is no easy answer.

I certainly do not think that it is advisable for us to be as prescriptive about phase 1 as we have been about lockdown, and I doubt that Adam Tomkins thinks that that would be advisable, but we have to be open to a wide discussion about the issues and reflect on them as a consequence of the decisions that we take.

Although we are leaving lockdown, I reiterate that many aspects of the strategic requirements of lockdown will still be in place in phase 1. I accept that the further that we go through the process, the less that will be the case. However, certainly for phase 1, one key element is that we will still be saying to members of the public that, fundamentally, being at home is the best thing to do. There are likely to be a greater number of reasons why people can leave home, but staying at home will be the fundamental anchor of the messages in phase 1.

Adam Tomkins: I completely agree with the cabinet secretary about the value and quality of the parliamentary debate that we had. Was it only a week past Tuesday? It feels longer ago than that to me, but whenever it was, it was an extremely valuable debate and everybody who spoke in it was moved and affected by what they heard.

I do not want to make this too much like a jurisprudence tutorial about the limits of law and where rules run out and discretion starts, but I want to pursue the issue a little, because it is a problem that we will have to confront individually

as representatives of our constituents and collectively as a group of politicians.

Let us take as an example something that Michael Matheson talked about in his statement to Parliament this week: what public transport will look like in phase 1 and the idea that we will be encouraging people tentatively and cautiously to begin to go back to work if it is safe to do so. Of course we want people to walk, cycle or wheel to work if they can, but that will not always be possible; it will sometimes be necessary for people to use public transport. We all know that, no matter how hard we might try to avoid using public transport, there will be overcrowded trains, and we all know that there will be trains that will be able to run at only between 10 and 25 per cent of ordinary capacity—estimates vary—in order to enable safe social distancing. All of that is to be self-policed.

Yesterday, *The Sun* said in its leader editorial that the set of proposals is “perilously close to fantasy”. What I am really worrying about is how we can safely take steps forward that leave that much discretion to individual choice and behaviour when most people have very quickly got used to living their lives in the past two months with reference to a really clear and prescriptive set of rules. We need to think very carefully about suddenly releasing that degree of individual choice and autonomy back into society.

We can look at self-policing at railway stations as an example of how the Government thinks that we can navigate our way through this.

John Swinney: The starting point for the answer to what I acknowledge is a legitimate and complex question is where I closed my previous answer. As we move from lockdown to phase 1, we are most definitely not moving into a free-for-all. We will maintain some of the very strong elements of constraint that are in the lockdown. Fundamentally, the message is to stay at home, work from home and go out only if you have a really good reason to do so. We will still specify what those good reasons are, and there will be more good reasons for doing so than there were in the lockdown, but there will not be a free-for-all. I reassure Mr Tomkins that we are not moving from constraint into free activity in one bound. That is my first point.

My second point is that we cannot see examples such as the transport system in isolation. In the route map, we were at pains to ensure that, in each individual phase, we would be taking a set of reasonable and limited measures across a range of sectors that did not overload the system. Our judgment is that all the phase 1 measures cumulatively do not add significantly to the challenge that Mr Tomkins has put to me, which in essence is that of there being too much movement because we are enabling too much to

happen. We are setting out what we think is reasonable to happen in the circumstances and making it clear who can and cannot open. As the convener put it to me in his opening questions, lots of sectors of the economy are still being told that they cannot reopen in phase 1. We have tried to take a balanced and cumulative approach across all the areas of schools, businesses, getting around, hospitals and public services.

The third element is the relationship between public messaging and communication, and personal behaviour. That is a critical element for us and it is why the public messaging has to be crystal clear and the communication has to be consistent. We have to rely on members of the public to continue to co-operate with the direction of travel on which we are embarked. It is easier to secure public compliance with and adherence to the message, in lockdown, that people should leave home only if they have one of a small number of good reasons to do so, than it is to secure compliance with a message that enables more freedom for individuals.

However, at the heart of the Government's messaging is encouraging people to think about the implications for them of not complying with that direction of travel. As I said in answer to Monica Lennon, if people do not comply, we will be back here, reapplying more constraints and dealing with a deeper health crisis in our society than we have dealt with in the past 10 weeks.

Stewart Stevenson (Banffshire and Buchan Coast) (SNP): I will pick up briefly on the points that have been covered. Deputy First Minister, as we make individual decisions, we must recognise the leadership role that all elected representatives have, in all circumstances, in how we use the privileges that are returned to us in a responsible way. In particular, I wonder whether we should extend our briefings to the 1,200 or so local councillors that we have across Scotland, so that not just MSPs but all elected representatives who exercise leadership in local communities have the best possible opportunity to set good examples for the public and avoid setting bad examples. I do not say that because of what the press might say; I am indifferent to that. It is more about local personal examples. Can the Government help all elected representatives to understand that, when we consider the leadership role that we have all been given in our communities, not everything that the law might permit is wise?

John Swinney: I accept the importance of ensuring good-quality communication to a range of interested parties. The Government works closely with local authorities on how we take forward all the measures that have been part of the Covid response. We have involved the Convention of Scottish Local Authorities, the Society of Local

Authority Chief Executives and—from my portfolio perspective—the Association of Directors of Education in Scotland closely in our work. I hope that, through those networks, communication has been disseminated to elected members of local authorities, who have an influential local leadership role. I will reflect on the point that Mr Stevenson has put to me, as it is important that all elected members are briefed on the importance of the issues that we are addressing. If there is a way in which that could be strengthened, I will consider that.

The Convener: Before I bring in Shona Robison, I will briefly follow up Adam Tomkins's questions. Given that the lockdown arrangements are enshrined in regulation, if we get an announcement about relaxations today from the First Minister, will the Government bring forward amending regulations? If so, when can we expect to see them?

John Swinney: Amending regulations may well be required. That will depend on the contents of the First Minister's statement today.

09:45

Shona Robison (Dundee City East) (SNP): I want to continue with the theme of the clarity of the messaging to the public. If we assume that changes to the lockdown restrictions will be announced later today, that will be alongside the major change of today's launch of the test and protect approach, which contains a lot of complex information. The Government might be communicating a lot of complex information all at the same time. How will the Government distil that down to simple bite-sized pieces of information so that people do not feel overwhelmed by all the information coming out at the same time?

John Swinney: I have considerable sympathy with that question. Yesterday, I listened to a good and clear but inevitably complex explanation of how test and protect operates, which was given by Professor Jason Leitch on "Good Morning Scotland". It was a deep and well-constructed explanation, but it was still complicated, because contact tracing is complicated. My take-away from it is that I will continue to follow all the directions that are set out to me. I will maintain 2m physical distancing, I will follow the guidance on hand washing and cough etiquette and I will try everything possible to avoid coming into contact with Covid.

The implications of contact tracing are complex and difficult to navigate. The primary message that we must get across to people is that the virus is with us and it has not gone away. Therefore, for people to keep themselves and their family safe, they must judiciously follow the guidance about

personal hygiene and physical distancing. There are also wider issues in relation to the choices that people make about how frequently they leave the house and, when they do so, what preparations they make and what consideration they give to the situation that they might face.

In our messaging, we are saying to members of the public that they must think differently about how to go to the shops. If I go to the supermarket today, it is a fundamentally different experience from what it was before Covid. I have to think through the implications and how I will prepare. In the past, the limits of my preparations for a supermarket journey were to ask myself whether I had bags in the back of the car and whether I had my wallet. Things are much more complicated now, and we all have to think differently.

We have an advantage in that some of the messages about the primary issues have been communicated for quite a long time. We have had 10 weeks of sustained and intense Government communication, and I hope that many of those messages have now affected general behaviour among members of the public to enable their compliance with the sensible precautions that are being set out.

Shona Robison: In some ways, you are saying—this has been a theme throughout your answers—that, although the media will today inevitably focus on what is new and what people can do that they could not do before, almost more important than those changes is a reiteration of and focus on what stays the same: we should maintain social distancing and hand washing, people should remain at home unless they have to leave for specific reasons and people should work from home if they can.

For me, that is almost as important, if not more important, than what is new. Do you agree with that? Do you agree with the need to reiterate the consequences for us all of not depressing the R number? In among all the information, the reason why the public is being asked to do all this can sometimes get a bit lost. Is the strategy as much about a reiteration of the simple key messages and what remains the same as about what changes?

John Swinney: Yes, there is an absolute requirement for us to maintain the rigour of social distancing, hand washing, cough etiquette and considering whether the activities that we undertake outside our homes are absolutely required. We have to get that message across to people. That has been the core of the message for the past 10 weeks.

I agree with Shona Robison's characterisation of the wider discussion in that it will tend to look at what is new and what is changing. However,

underpinning Government communication will be the need to reiterate the fact that people need to continue to adhere to some fundamental elements, because without that we will see an increase in the prevalence of coronavirus and its negative impact on the health of individuals in our society. That is what we are trying to avoid in all that we are doing.

The reiteration of the on-going need to practise certain fundamental or core aspects of human behaviour will be essential. That is what is needed not just for another few weeks but for a prolonged period. The coronavirus is still very much in our community. It is less prevalent than it was previously, but it is still a real threat unless we all observe the type of regimes and routines that have become a hallmark of society for the past 10 weeks.

Shona Robison: Finally, the Scottish Government is trying to do all this against a backdrop of recent events and there is a high degree of palpable public anger about the flouting of rules by an individual who shall remain nameless. How do we ensure that we turn that anger into a desire to see this through? How can we reiterate that we are all in this together and maintain what has been an incredibly high level of public adherence and support for the measures so far? Polling shows that level of public adherence and that the public are cautious about moving out of lockdown too quickly, but also that there is anger. What will the Scottish Government do to maintain the high levels of public support that we have seen so far?

John Swinney: That is a real anxiety. The anger that people feel about the issues that have dominated the news headlines over the past week is potentially very damaging to public compliance. Members of the public may well think, "If one person can do that, why should I follow what the Government says?" I encourage members of the public to follow the guidance, because that is the best thing to do to protect families, individual health and general community public health. That is reiterated in all the Government's communications.

We must acknowledge that the issue is likely to be a factor in people's minds. We need to ensure that our communication is crystal clear both in what we are asking people to do and what we hope that they will do. That has to be set in the context of an appreciation of the fact that, to an absolutely extraordinary degree, members of the public have contributed to the public good as a consequence of how they have acted and how they have responded to the challenge. On a daily basis, the First Minister thanks members of the public for their compliance, because it has undoubtedly saved many thousands of lives in our

community. Other ministers do that regularly, too; I did it in my education statement to Parliament on Tuesday.

People have to understand that, however irritated and angry they might feel about that one case—I share that anger and irritation—it would be nothing compared with the heartbreak of losing individuals because we have not controlled coronavirus. We all have to make a contribution towards achieving that objective.

Beatrice Wishart (Shetland Islands) (LD): On Tuesday, the UK Secretary of State for Health and Social Care, Matt Hancock, said that there would be local lockdowns to respond to local outbreaks of the virus and to deal with specific flare-ups once the restrictions in the rest of the country are released. On page 26 of the Scottish Government's route map document, there is reference to "additional local measures". What does that mean? Will there also be local lockdowns in Scotland?

John Swinney: One of the important aspects of the move from lockdown into phase 1 is the availability of effective capacity for test, trace, isolate and support—the test and protect strategy that the Government has set out. As we see the level of the virus reducing in our society, we now have the available capacity to address particular cases in which individuals test positive for the virus and, in essence, to address the contacts that that individual has had.

That task will be a great deal easier if people follow social distancing and the other precautions that I have talked about, because if people observe 2m physical distancing and do not spend time indoors where they should not be—in other households and so on—there will be a much lower case load to try to contact and deal with. It will be much less disruptive in society because people will not have had the contacts who would come up in the contact tracing system. If people follow the general rules, although individuals might contract the virus, we will have much less containment to undertake in the first place.

Of course, there is the possibility of a particularly intense local cluster developing. In those circumstances, we would take public health advice, as we would do in any circumstances, about the right measures to take to control that situation. We have not been prescriptive about that. We have simply reinforced an existing part of our public health approach in Scotland, which is to be mindful and aware of the need to take measures at local level, because certain steps might be required to be taken in individual localities when there is the problem of a particular outbreak. The approach will reflect the circumstances that we face and the public health advice that emerges, given the nature of any

outbreak or cluster that might emerge within an individual locality.

Beatrice Wishart: If such a scenario were to arise, the Government would take advice on the public health information that was available. Is that what you are saying?

John Swinney: Yes. That is exactly what I am saying.

Beatrice Wishart: People will be travelling into areas for work, caring purposes and for a host of other reasons. If a local lockdown were in place, how would that be communicated to everyone who would need to know about it, and what would be deemed as a legitimate reason to travel, or would there be no travel into affected areas?

10:00

John Swinney: We are getting into the realms of hypothetical situations, and I am, perhaps, not best placed to respond. However, essentially we would follow the guidance that came from public health advisers about the nature of a particular outbreak.

I stress that if people follow the general rules on physical distancing, cough etiquette and self-isolation with symptoms, and as we pursue the contact tracing approach, we have many opportunities to try to suppress any further development of the virus and ensure that we do not have to take any of the further measures that Beatrice Wishart asked me about and that we avoid what I accept would be wider community disruption. We are now trying to relax the measures that are causing disruption and that is a widely shared objective.

Ross Greer (West Scotland) (Green): The contact tracing system will be reliant on people voluntarily cooperating if they are contacted by one of the tracers and informed that they need to self-isolate. Yesterday, during First Minister's question time, the First Minister referred to potential accommodation. Obviously, there will be a significant number of people for whom self-isolating in their own home will not be possible, for a variety of circumstances, and they might require accommodation elsewhere. However, the phrase that the First Minister used yesterday was that accommodation could be provided for people "in extremis".

I am looking for clarity from you, because—to me—that gave an indication that contact tracers would not necessarily be able to provide accommodation immediately and that there might be a bureaucratic hurdle to it. Given the urgency that is required to get someone into self-isolation in those circumstances, can you confirm whether individual contact tracers will be empowered to

arrange accommodation for those whom they are asking to self-isolate?

John Swinney: I am not in a position to say whether individual contact tracers would be empowered to do that, but the contact tracing system must consider whether such approaches are required.

Contact tracers will discuss with individuals whose tests have been confirmed as positive the range of contacts that they have had that need to be pursued, and they will then begin to establish the circumstances relating to individual cases to determine what additional support requires to be put in place. It is a test, trace, isolate and support strategy, and it depends on that support element being able to be provided in circumstances in which it is required. The system will provide for that.

I cannot today give a definitive position on what the roles, responsibilities and levels of empowerment of individual contact tracers will be, but the system must be capable of undertaking such support.

Ross Greer: Do you accept the premise of my question, which is that this is really about being able to offer support quickly, and that any delay that requires further authorisation from someone else before accommodation can be booked will simply cause a delay that might result in further spread of the virus? What is important is being able to arrange support quickly.

John Swinney: Yes. I understand those points. Of course.

Ross Greer: A second element is that, if people are to self-isolate, they will need three things: accommodation, food and a level of security around their income. I have two brief questions on food and income.

It is very understandable that, in the first few weeks of the crisis, Government at all levels has relied quite heavily on voluntary organisations, the third sector and local mutual aid groups. There is an ad hoc group in my community that came together very quickly, which is now in the position of having statutory services make referrals to it. The group is happy to help whenever it can, but it is able to do so because we are all in lockdown and a substantial number of people have the time and the capacity to be able to do such work. The test, trace and isolate system that is being brought in now will be much longer term and will be in place when, we hope, most people can go back to work and return to their normal lives.

What assessment has the Government carried out of the ability to support—specifically in relation to food and essential supplies—those people who go into self-isolation? Will there be a continued

reliance on the third sector and informal mutual aid groups? What assessment has been made of long-term capacity in that respect?

Secondly, on income, has the Government considered and spoken to the UK Government about an equivalent of the furlough scheme to ensure a level of guaranteed income for people who require to self-isolate for two weeks? It would be incredibly challenging for people who are on zero-hours contracts or who are in precarious work to lose two weeks of income, but we need them to take that step and self-isolate for the greater public health good, so we must provide them with some security with regard to their income.

John Swinney: Those are highly significant questions. On the first one, which was about support, I very much value and welcome the enormous voluntary effort that has been made to support individuals and provide them with assistance. For completeness, however, it is also important to acknowledge the significant level of statutory support that has been put in place. We established support for the shielding community and got that up and running within a matter of days and, through collaboration with local authorities, we have extended that to a wide range of other individuals who, although they are not shielding, still require support. That has involved a range of third sector organisations and volunteer groups, whose involvement has been welcome.

Fundamentally, we have established and put in place a range of public sector support, and I envisage that that will require to continue for some time to come. That will be a mainstay of the support that is envisaged in this area.

With regard to your question about people's individual circumstances and income, I have two points to make, the first of which takes me back to what I said in response to Shona Robison. Once people have heard about the necessary implications of contact tracing in the event that they come into contact with somebody who has coronavirus, that will tell them that they must do everything that they can to follow all the core rules on social distancing, cough etiquette and hand washing in order to avoid getting into any circumstances in which they might come into contact with Covid, because that would be very disruptive to many aspects of their lives, not least to their health. Maximising the number of people who continue to observe the rules is a critical element of minimising the number of people who need to be affected by the contact tracing strategy.

Secondly, in relation to income, there will be a group of people who suffer from fragile employment circumstances. While some people will have more protection in the form of sick leave provisions and so on, there will be people who

face vulnerability. We are pursuing such matters with the UK Government with a view to making sure that people are properly supported as part of this process.

Monica Lennon: In your opening remarks, you rightly set out that the Government needs to balance a number of risks, but you also said that the plan is about giving hope to the people of Scotland, which is really important for us all.

My questions are about the remobilisation of national health services. We know that lockdown measures have not had an equal impact on everyone. I think that it is not until phase 2 of the route map that patients who rely on chronic pain services could see the reintroduction of pain management and chronic disease management. I am a member of the chronic pain cross-party group, which met recently. There are worrying psychological consequences for people not getting treatment right now.

Can you elaborate on why reintroduction is at phase 2 and whether there is any opportunity to bring it forward? We heard evidence from some members of the group about chronic pain patients paying for private treatment for infusions and some have travelled to England, where treatment is available.

Have you been able to look at the evidence that the committee took on 7 May, from Professor Linda Bauld and Sir Harry Burns? I refer in particular, to Professor Bauld saying that cancer screening is a real life saver and that Scotland has an excellent programme. Based on her evidence, will there be any good news on that front soon?

John Swinney: Monica Lennon has raised very serious issues. The Government has always acknowledged the importance of recognising the four harms, which was at the heart of the framework document that the First Minister set out a number of weeks ago. There is a very direct health harm from Covid, but there is also an indirect health harm, which is all the patients who are not getting the treatment that they need to support them at this time. The issues around cancer care are particularly anxious, but chronic pain sufferers are exactly as significant.

We acknowledge the significance of the issue, and have set out gradual steps that will enable us to reactivate the health service. A central point that I have made to the committee this morning is that, however individually justifiable each step is—and I do not dispute in any way the individual justification of the steps that Monica Lennon has raised with me—when we put them all together, there is a cumulative impact. I tried to make that key point in my closing remarks to the parliamentary debate on the framework. There is inevitably a cumulative impact of different steps

coming together that potentially will have an effect on the level of activity in society and therefore the danger of infectiousness.

We have set out a measured approach and we will of course keep under review the contents of individual phases to see whether there are services that we can advance at any earlier stage. The health secretary is very anxious to make as much early progress to restart services as possible, but it has to be undertaken in the context of what the health service can manage to deliver, given the pressures that it faces over Covid and the wider implications of that level of activity in society.

I assure Monica Lennon that those issues are kept very much under review and will be so as part of the development of the route map.

Monica Lennon: I am grateful for that answer. I wonder what discussions are taking place with colleagues in other parts of the UK about how they have managed to reintroduce chronic pain services, for example.

10:15

However, I will move to another subject that I know the Deputy First Minister will know very well. I am thinking about children who are shielding because of their health conditions or disabilities, and children who live with a parent or carer who is shielding.

Although I have not been close to such issues, they have been raised by a number of constituents in relation to the educational needs of children with disabilities or additional support needs. Some children who are in the transition phase—going into primary 1 or in primary 7—might physically be in school in June. What is the situation for children with disabilities or additional support needs, and what could a return to school look like for children who live with a parent who is shielding?

John Swinney: Those are significant issues. We have stressed throughout the crisis the importance of schools and local authority services maintaining contact with and support for individuals who require that support more than others, as part of the general delivery of education.

Weekly, I look closely at data about the level of contact that local authority staff have with vulnerable young children, and I have to say that local authorities have maintained very strong performance on contact, particularly in relation to young people for whom there are child-protection issues. Effort has been made to ensure that contact is in place in order that we can be assured of their security and safety.

Individual schools are best placed to judge what support individual pupils need. They know their pupils—they know them well. For young people with additional support needs, it is ever more important to make sure that schools are empowered to have direct contact and communication with young people who require support. I am pretty confident that that has been on-going throughout this situation, and that it will continue as we begin to see the steady return of formal education services.

The specific question about young people who are shielding, and those who are in the households of a carer or parent who is shielding, is complex. In the scenario in which a parent is shielding but their child is not, and the child as a pupil is eligible in August to go back to school, we will clearly have to manage that very carefully and very locally, and we will have to support it properly, because of the danger from communication with the outside world, which—more than likely—will not have happened at all for that child while their parent has been shielding,

If a judgment is made, for example, that the child should not return to school because of the danger of Covid-19 being brought into their home, educational support will have to be available to them in their home to enable them to sustain their learning. Such cases will obviously represent a minority of pupils around the country, but we have to make sure that every individual case is properly and fully addressed.

Monica Lennon: I will finish by asking a little bit more about children who have complex support needs and disabilities. Before Covid-19, those children might have been picked up by a school bus to be taken to an ASN base within the school. Those children might also require one-to-one care or, sometimes, two members of staff to help with personal care, medication, lifting the child and so on. Although I do not want to put a hypothetical question, if we get to the point at which children are returning to school in August, what guidance will be available in advance for parents, carers, children and staff who are in such situations? I know that some parents fear that their children face a long period of isolation. We have touched on the other impacts of Covid on people's mental health and wellbeing.

John Swinney: That is a critical issue that the education recovery group has been working on in its 10 workstreams, which are looking at many detailed and complex issues. I will not start a conversation about school transport, because it is one of the most complex subjects on the planet. I know that the education recovery group has wrestled with all those questions.

Last week, Parliament heard a high-level description of how the education system will

resume. Beneath that, there is a need for a substantial amount of guidance to advance issues such as Monica Lennon mentioned. I expect that guidance to be published shortly—perhaps later today. I hope that it will provide the clarity that Monica Lennon quite fairly asks of me.

A critical element of the restoration of formal schooling—this is central to my thinking—is the idea that people must feel safe. I know that it is important that kids are at school—I subscribe to that view—but everyone, including staff, parents and pupils, must feel safe, so we need to put in place a safe regime.

Our schools have a strong reputation as places of safety for most children and young people, and I know that headteachers are determined to make them so. That challenge will be difficult in August—much more so than before lockdown—so we have to ensure that the guidance is in place, and it will be. It will then be up to educational practitioners and other staff to ensure that it becomes the reality on the ground.

Monica Lennon: I have no further questions, but I want to record my thanks to all teachers and school staff. I think that there is a misconception that they are not at work right now, but they are. In fact, they are working very hard to support young people and families, so I want to record my appreciation for that work.

Stewart Stevenson: First, I can report that some things are going back to normal. In two weeks I will have my annual review with my consultant at the hospital, but on this occasion—*[Temporary loss of sound]*.

Being in my eighth decade, I am in the group of vulnerable people. However, the Government's document uses the word "vulnerable" only once, in "shielding the vulnerable", which is slightly confusing. It is quite important to ensure that people like me, who are over 70 but are not shielding, understand the implications of the changes that are made so that we can make informed decisions.

Those were observations; I turn now to questions. The original plan was that people who are vulnerable and are shielding should isolate for 12 weeks. I am now in my 11th week. I do not quite know where the figure of 12 weeks came from, so anything that you have to say on that subject might be interesting. More to the point, can we expect the particular issue that I raised to be addressed before the 12 weeks are up at the end of next week?

I will consolidate all the other questions that I want to ask into one jumble. As people return to work, childcare might be an issue. For a number of families in rural areas in particular, options might be limited and childcare will often be provided by

grandparents, who could be in the vulnerable group. Can we offer any specific advice to parents who might contemplate going back to work while having grandparents cover some of their childcare responsibilities?

John Swinney: Mr Stevenson has made a really important point in relation to the distinction between "shielding" and "vulnerable." We have wrestled with the terminology for people who are not shielding but who are considered to be potentially vulnerable. The shorthand that is often used, and which I have used during the meeting, refers to people who are eligible for the flu jab. That group goes beyond the shielding population. What I said earlier was to acknowledge that, within that group, there will be people over 70 who have no underlying conditions but who are eligible for the flu jab. They will not really consider themselves to be vulnerable; they will feel as if they can get on and do things in life.

We will need to be very careful in our message to those individuals; we will have to tell them that they will really have to look after themselves, take care and follow all the rules. Without that, they could become vulnerable and could become very ill as a consequence. We need to give a very focused message to those people in order to ensure that we properly advise them about the choices that they are making.

That will influence some of the other matters that Mr Stevenson raised, including whether such people are able to provide childcare support to their families. In reference to the changes that will be considered today, I point out that we are not considering enabling people to be indoors in other people's households. That is not part of phase 1. The idea of grandparents providing childcare support will not be advanced by phase 1, and we have not advertised it as such, because significant complexities and dangers come from people going into other people's houses.

Mr Stevenson has raised a range of challenging questions about how we must put in place a regime and set of arrangements that can be easily understood and practically deployed by people as they deal with the emerging situation.

The Convener: Mr Stevenson, do you wish to come back in?

Stewart Stevenson: No, thank you. That response has covered my questions.

The Convener: No members wish to come back in, so I thank Mr Swinney for his time. We have had a comprehensive discussion that has covered a broad range of topics. We will listen with great interest to what the First Minister has to tell us later today. On the back of that, we might want to have another meeting with you at some future point, Mr Swinney, to explore the issues further.

In the meantime, I thank the cabinet secretary and colleagues very much.

Meeting closed at 10:28.

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Published in Edinburgh by the Scottish Parliamentary Corporate Body, the Scottish Parliament, Edinburgh, EH99 1SP

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