

Scottish Covid Public Inquiry - submission on 'Aims and Principles' in response to invitation to provide input

The aims and principles factsheet¹

No comment.

The 'consultation' questions²

What do you think the Inquiry should cover?

The inquiry must include within its scope data capture of, and lessons learned about and from, the professional and personal impact on all healthcare workforce – including registered nurses and nursing support workers – in terms of how they were enabled to deliver safe and effective care, how their own safety and welfare was protected, and inequalities within these.

Though legal frameworks vary across UK Government and devolved nations, nursing is a safety critical profession working to a UK wide professional code. Therefore, the scope of any public inquiry must include the extent to which all national decision-making for preparedness and response to the pandemic actively enabled the nursing profession to work to this code, in all settings in which they work. The scope should also include learning lessons about the lack of national leadership and accountability for workplace safety for health care staff in all settings.

Any inquiry must give weight to the lived experience of the impact on healthcare staff, as this cannot be fully understood, nor lessons learned, without this built into the scope.

What do you think the Inquiry should not cover?

With respect to our own field, we have no other comment to make.

Is there any type of evidence that you think is essential for the Inquiry to obtain?

As outlined, the nursing community must be provided with an accessible route to provide evidence on the impact on them professionally and personally. This must be inclusive, and efforts sought to hear from marginalised groups who may have experienced inequity, including but not limited to BAME individuals, migrant workers and those working in care sector settings.

What should happen to ensure the Inquiry is completed as quickly as reasonable thoroughness permits?

The Inquiry should be given a deadline to report. Disproportionate periods of time would not be satisfactory because the pandemic isn't over yet and there should not be any delay to the opportunity to learn the lessons that the public inquiry may have to teach us or for those accountable to act on its recommendations.

How should the Inquiry report its progress?

The Inquiry's reports should be accessible to all those affected by the pandemic.

Should there be interim reports? If so, what should the Inquiry deal with in interim reports?

No comment.

Should the Inquiry be required to make recommendations?

Yes – and these must be specific recommendations for implementation by named Scottish Government, and where appropriate named UK Government, departments and agencies, in line with their remits

¹ www.gov.scot/publications/covid-19-inquiry

² [COVID-19 Inquiry - gov.scot \(www.gov.scot\)](http://COVID-19%20Inquiry%20-%20gov.scot%20(www.gov.scot))

What should be done to ensure everyone learns from the Inquiry?

The Scottish Government should commit in advance to implement the recommendations of the inquiry in full.

How should the Inquiry be designed so that it takes a person-centred, human rights-based approach to its work? For example, do you have views on inclusiveness and accessibility of venues and information?

Recent years have seen the development of a huge amount of expertise in public participation and involvement methodologies in Scotland, which the Inquiry design should use to ensure the best range and quality of input to its work.

What help and support could be made available for those participating in the Inquiry?

As was the case in the inquiry into the Vale of Leven hospital (NHS Greater Glasgow and Clyde); in the interests of fairness and to avoid any potential for conflicts of interest to arise with respect to representation of different parties, the inquiry should, whenever necessary, exercise its powers under section 40 of the 2005 Act to 'award amounts in respect of legal representation' for those attendees who are registered nurses with the NMC or for those workers who are, or whose role means that they should be even if they are not, registered with the SSSC.

Do you have views on whether there should be a panel of members and/or assessors, in addition to the Inquiry Chair?

We are clear that there must be a senior registered nurse appointed as one of the assessors.

Do you have any other comments about the design of the COVID-19 Public Inquiry?

No.