



Committee for Health

OFFICIAL REPORT (Hansard)

Health Protection (Coronavirus, Restrictions)
Regulations (Northern Ireland) 2021 (Amendment
No. 19) Regulations (Northern Ireland) 2021:
Department of Health; The Executive Office

2 December 2021

NORTHERN IRELAND ASSEMBLY

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Health Protection (Coronavirus, Restrictions) Regulations (Northern Ireland) 2021
(Amendment No. 19) Regulations (Northern Ireland) 2021:
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Members present for all or part of the proceedings:

Mr Colm Gildernew (Chairperson)

Mrs Pam Cameron (Deputy Chairperson)

Ms Paula Bradshaw

Mr Gerry Carroll

Mr Alan Chambers

Mrs Deborah Erskine

Ms Órlaithí Flynn

Mr Colin McGrath

Ms Carál Ní Chuilín

Witnesses:

Ms Elaine Colgan

Department of Health

Mr Peter Luney

The Executive Office

The Chairperson (Mr Gildernew): I welcome, via StarLeaf, Elaine Colgan, who is the head of health protection in the Department of Health. Good morning, Elaine. Can you hear me OK?

Ms Elaine Colgan (Department of Health): Good morning, Chair. Yes, I can hear you OK.

The Chairperson (Mr Gildernew): Thank you. We are also joined by Peter Luney, who works in the Executive Office's COVID-19 task force. Can you hear us OK, Peter?

Mr Peter Lunev (The Executive Office): Yes, I can. Chair. Thank you.

The Chairperson (Mr Gildernew): OK. Elaine, I will go back to you for the presentation, and we will then go to Committee members.

Ms Colgan: Thank you for the invitation to attend today. As the Committee is aware, we are considering just one set of amendment regulations to the restrictions regulations today, which is the result of an Executive decision on 17 November. It is the amendment (No. 19) regulations, which were made on Monday 29 November and came into operation on the same day.

Members will be aware of the main provisions of the amendment. They have been well rehearsed and discussed already, so, with your permission, Chair, rather than outline the provisions, I will brief members on a couple of issues around the process that took place.

First, I will outline how we changed from the original plan to combine a consolidation of the existing regulations with the new COVID certification requirements. I am conscious that we submitted an SL1 to members that outlined the proposals to make a consolidated set of regulations, with the certification provisions not being commenced initially. Those certification provisions would be commenced at a later point, if and when they were required.

Unfortunately, the decision to introduce certification came earlier than we had anticipated. The PSNI indicated concern that, if we were to do a consolidation at that point, there would not be sufficient time for it to redraft and reprint its fixed penalty notices, which would put it in a position in which it was not able to issue fixed penalty notices for any of the restrictions, not just the new certification provisions. Coming up to Christmas, that was not feasible. In the light of some of the time pressures and associated procedures, which I will come to in a second, it was decided that it would be better to pause the consolidation and focus on introducing certification as amendment regulations. That is where we ended up. We are still working on a consolidation, and we are working with the PSNI to coordinate the timing of that. It will be done at some point in the next one to two months, when we get a bit of a stable period in which to do it.

The introduction of COVID status certification as a policy required considerable additional work beyond the drafting of the regulations. It was important that as much of that as possible took place before the regulations were made, because the reason for doing most of this is to highlight issues that might require either a change in direction or a change in approach in the regulations. I will touch briefly on a few of those.

The first piece is the full human rights impact assessment, which was completed before the regulations were made. Finalisation is pending, and the impact assessment is with the Northern Ireland Human Rights Commission (NIHRC) for initial comments. We plan to publish it on our website in the next couple of days, so it will be available for the public to see. The second piece is the full statutory Information Commissioner's Office (ICO) notification and statutory data protection impact assessment. That was submitted to the ICO for comment in advance of making the final regulations. That was a really helpful exercise. It informed our guidance on the regulations and what data protection measures needed to be included in that. It was really helpful that we had ICO engagement in advance of making the regulations on data protection and the use of personal data by others. The final piece is an equality impact assessment (EQIA) screening exercise. That was published with the amendment regulations on Monday, and it is available on our website. I am pleased to say that no issues of concern regarding equality were highlighted and that a full EQIA was not required.

I will finish with a brief mention of the grace period. The regulations were made at 3.00 pm then came into force at 5.00 pm on Monday 29 November. COVID status certification is now currently a legal requirement for all the events and premises to which it applies. To give the scheme time to bed in, however, the Executive agreed that there would be a 14-day grace period during which fixed penalty notices would not be issued. The purpose of that period is to allow the affected sectors and members of the public to get used to the workings of the scheme and for any issues that come to light during its operation to be addressed. I emphasise that the benefit of the scheme to the citizen can really happen only when businesses are operating the scheme, because only then will it come to light whether there is a difficulty with their evidence, their understanding of the requirements or their need to take a lateral flow device (LFD) test, for example. The grace period allows businesses flexibility, safe in the knowledge that fixed penalty notices will not be issued should a non-certified person be found on their premises. If the schemes were not operated until after the grace period was over, the benefit to citizens would be reduced, as they would have to be refused entry if they had not come prepared.

Discussions took place at length over whether the best approach to the grace period in law was to make the regulations or to lay them in draft form for Assembly approval without using the emergency procedure. It was considered that the situation was such that there was an immediate need for COVID status certification to be a legal requirement from Monday 29 November and for it to be operated by the businesses captured. That was the reason for the emergency procedure being used in this case.

Peter and I are happy to address any questions that members may have.

The Chairperson (Mr Gildernew): OK. Thank you.

I am a bit confused, because you have not briefed us on the regulations themselves. We will not —.

Ms Colgan: I —.

The Chairperson (Mr Gildernew): Just let me finish. We will not consider regulations on which we have not been briefed. I have received indications from members, and I will let them in to ask questions — I have some too — but we will require a briefing on the regulations before we move to our formal consideration, Elaine. Bear that in mind, please.

Ms Colgan: Chair, if you want, I can do that now. I have information here and can go through the amendment regulations.

The Chairperson (Mr Gildernew): That is normally what we do, so I do not understand why we would not do that today.

Ms Colgan: That is fine. Sorry. Given that the Committee already knows what is in the regulations, I thought that it would be helpful to outline the other things instead. I will go through the regulations now.

The amendment (No. 19) regulations were made as a result of decisions taken on 17 November. Following an increasing number of cases and hospitalisations that caused severe pressure and operational challenges for hospitals, the Executive decided to introduce provisions that would be effective from 29 November. The amendment regulations introduced the requirement for COVID status certification at certain events and in certain premises through one of three methods: proof of full vaccination, proof of a negative COVID-19 lateral flow device/rapid antigen test within the past 48 hours or proof of recovery from a positive COVID-19 PCR test within the previous 30 to 180 days. Those are the three ways in which a person can gain entry into the relevant settings or events.

The amendment regulations allow people to prove their certification in a number of ways. Certification by vaccination can be proven in paper or electronic form, showing that a person has completed a course of doses of an authorised vaccine, with the final dose having been received at least 14 days before the relevant time. For the rapid antigen or LFD test, the certification evidence is from the text or email that people receive once they report the test to the NHS COVID-19 reporting system online. The test must be taken within 48 hours of the relevant time. For a positive PCR test, the valid notification email or text that people received for that test can be presented. The notification must have a date on it that is no earlier than 30 days before the event and no later than 180 days before the event.

The other accepted pieces of evidence are confirmation in writing of the person's participation, either current or past, in a clinical trial for vaccination against coronavirus from the organiser of that trial. Evidence of medical exemption can be provided through the Northern Ireland COVID certification process if a person cannot be vaccinated with any authorised vaccine for a clinical reason, or an equivalent process in a person's place of residence if that person is not resident in Northern Ireland.

The amendment regulations state that the person responsible for implementing the regulations on a premises includes:

"the owner, proprietor and manager of that business or service or those premises".

For a relevant event, it means:

"the person responsible for organising that event, or the person responsible for the management of the premises at which the event is held or to be held if no other person is responsible for organising the event".

A couple of exempted events are specifically named in the regulations. The events are:

1. A funeral, marriage ceremony, civil partnership registration, or a reception or gathering which relates to a funeral, marriage ceremony or civil partnership registration ...
2. A drive-in event
3. A lawful picket.
4. An illuminated trail or pathway.
5. ... religious worship ...
6. An event held at an outdoor public place with no fixed entry points and for which neither tickets nor payment are required."

I hope that that has been helpful for members. I think that that covers the regulations, but, if I have missed anything, please do say, and I will cover it now.

The Chairperson (Mr Gildernew): OK. To me, that is an important part of the process. You mentioned confusion for businesses. The Committee is where some of that gets teased out, and that is a crucial part of the process. I have a few questions, and then I will go to members.

How does the rule impact on staff who work in a licensed premises?

Ms Colgan: Staff are not required to have certification if they work on the premises.

The Chairperson (Mr Gildernew): Why is that?

Ms Colgan: We do not want to interfere with people's work. They have to be there for work purposes. At this point, we have exempted employees.

The Chairperson (Mr Gildernew): OK. How will compliance be monitored? We have touched on monitoring over the past number of weeks.

Ms Colgan: We liaise heavily with the PSNI and get its feedback on compliance with the regulations. We do not have anything specific lined up to monitor the regulations. Peter, do you have anything to add from the adherence group?

Mr Luney: Yes. The plan is that the police will be out visiting licensed premises during the grace period. The police will use the first three Es of their strategy to encourage businesses and make sure that they are prepared to implement COVID status certification. Enforcement will be held off until the end of the grace period. The police and other enforcement officers' ability to issue fixed penalties or to take prosecutions will come into effect from 13 December. It is very much a case of trying to work in partnership with businesses to ensure that they are ready and do what is required of them. Enforcement has to be the backstop, but —.

The Chairperson (Mr Gildernew): Just a second, Peter. I appreciate the information on enforcement, but I asked about monitoring. How will compliance be monitored?

Mr Luney: Responsibility for monitoring uptake sits with the enforcement agencies. The police, local government and, to an extent, the Health and Safety Executive (HSE) are responsible for compliance in that area. The digital solution will give us some information about numbers of certificates downloaded and checks carried out. We will therefore be able to see that at a macro level, but it will not hold granular details that will allow us to test it premises by premises.

The Chairperson (Mr Gildernew): OK. I have a final question before going to members. What advice has been given to business owners on implementing the certification rule?

Ms Colgan: Peter can update you specifically on some of the stakeholder engagement that has happened in the past couple of weeks. From our side, our guidance was published online on Monday, the same day on which the regulations were published. That was version one, which was updated with a second version yesterday that has more in-depth information on data protection. It is an iterative process. As businesses raise issues with us, largely through Peter, we update the guidance with more information. In addition, our website has had a set of frequently asked questions since around the start of last week, so there is guidance from that perspective as well. Peter, do you want to say anything on stakeholder engagement?

Mr Luney: Yes. We held a number of sessions with specific sectors, including several meetings with hospitality, events and retail groups. We outlined how the process operates and explored areas of concern with them. That will be an ongoing process. We will meet them again later today to get their feedback on the first few days of operation. As Elaine said, we are using this period to capture their feedback in order to refine the processes and address any confusion or lack of clarity, and we are responding to them as quickly as possible. That engagement is key, because the sectors are able to give us their members' feedback on what they see as the challenges, and that allows us to refine the process and make it more operable and streamlined.

The Chairperson (Mr Gildernew): OK. I have a final, final question. The Minister indicated some time ago that he wanted to bring in the scheme. Was the work on it parked? I would have thought that a lot of it would have been ongoing across the summer, looking towards winter. Why has it taken until now to start doing it? It seems very dynamic, with a lot of iterations and work going on. Will you explain why

the work was not done earlier so that the scheme was ready to be rolled out in a more finalised fashion?

Ms Colgan: We were working on it. The technical team in particular was working on it from quite an early stage. The fact that the app is already available is down to that work. We were aiming to have this ready for early to mid-December, which would have given us an extra week or two to work through the issues and be much more clear about what was needed when the amendment regulations were being drafted. As I mentioned, however, we were doing that in parallel with a consolidation, which is quite a bit of work in itself. If I am being honest, we were probably caught a little off guard by how quickly the scheme was required. That is the crux of it. It is not that we were not working on it: we were. With another couple of weeks, we probably would have been quite stable and much better than we were on Monday.

Ms Bradshaw: I have a couple of questions. The first relates to regulation 16E, which concerns locations that have been excluded. Why have ports, airports and places of worship been excluded?

Ms Colgan: Regarding ports and airports, around this time last year, we closed hospitality and had severe restrictions between Christmas and the new year. At that time, the issue of ports and airports came up. They needed to be open for essential reasons: for people travelling. There was nowhere else where they could use facilities. It is the same in this case. There are reasons that people travelling through ports and airports might not have the evidence on them. The travel period might be more than 48 hours, for example. If they are not vaccinated, it is hard to get a test. That was the rationale behind excluding ports and airports.

The places of worship exclusion is around the provision of alcohol for Communion. That will allow for that to happen. It is not an operational issue. Obviously, that is not going to be taken up. It is just for clarity: to make sure that, technically, places of worship were not going to be acting illegally.

Ms Bradshaw: I appreciate that. I mentioned to the Health Minister earlier concerns about the elderly, not least those who attend church, about their not having smartphones and not being able to find stuff online. I wanted to raise that with you and ask that you keep it under review.

My second question relates to the availability of lateral flow tests. Correspondence that we as MLAs have had has been very much on the certification app. A lot of the messaging on the alternatives to that has got lost. Are you going to do any campaigning, on social media or elsewhere, to notify people where they can readily get certification?

Ms Colgan: We have the elderly and the vulnerable in mind. That is why, at the moment, we allow paper certification. We have not limited certification to QR codes, which, ideally, is what we would do. To get a paper QR code, however, people need to phone up and apply for that and then to go somewhere and prove their identity. That can take a couple of weeks, so we have allowed that the cards that people get when they get their vaccination to be used in the interim. We will continue to engage with the sectors on how long that interim period needs to be in order to make sure that those people are not disadvantaged by the introduction of certification and that, if they do not have a smartphone, they have had the time and opportunity to get a paper version.

Ms Bradshaw: I have a constituent in South Belfast who was advised to go to Newtownards or north Belfast, or perhaps even further, to Newtownabbey. That is a long way for people to travel, especially if they are carers and cannot leave. It is really very difficult. Is there an alternative to taking proof of identity to a place physically? I suppose that you have it under control. I am just raising a concern about the distance that some people are travelling.

Ms Colgan: I can certainly take that back to the team to see whether having more venues can be looked into.

The availability of LFD tests is not an area I am working in, but I will certainly go back and see whether there are any comms planned. At the moment, people can get the kits in leisure centres and over the counter in pharmacies. They can also order them online and have them posted to their house. If your employer takes part in a workplace scheme, it will also have them.

LFD tests are generally widely available, but, yes, I take the point, and I will feed back to colleagues about trying to get out more communication about where people might get them.

Ms Bradshaw: Thank you.

Mr Luney: I hope to meet the Commissioner for Older People tomorrow. Hopefully, I will be able to take up with him some of the points that Paula has made.

Ms Bradshaw: Thank you. I appreciate that, Peter.

The Chairperson (Mr Gildernew): In support of that point, my understanding is that people from Derry have to travel to Magherafelt. Not only does that create problems for individuals but it seems counter-intuitive to send such a large population into a smaller town.

I have made the point before that there are places that are very poorly served by public transport. There are people who do not drive. There are lots of reasons that people would struggle. That is a useful point to pick up on.

Pam, are you looking to ask a question on the church issue before we move on?

Mrs Cameron: Yes, Chair. Thank you. I appreciate it, and I will come in later with my own questions. I am just looking for some clarity about churches. Elaine, you said that churches have an exemption because of the licensing element. I get that when it comes to church services, but what about church events? At Christmas time, there tend to be lots of different church events, not necessarily church services. Are churches completely exempt or just the elements of church services that include Communion wine and things like that?

Ms Colgan: Yes, it is just those elements of service at the moment. That is one of the issues that we are taking a phased approach to by including only licensed premises. Most of those other types of events in church premises do not involve alcohol, so they do not need to be exempt because churches are not necessarily serving alcohol during them. The wider issue, which we have to deal in the next couple of weeks, in moving to non-licensed hospitality, is the issue around community services and the provision of food and drink that might be free to the vulnerable. For example, providing tea and coffee at a parent-and-toddlers group is one of those things. That is on our radar and is partly the reason this we have introduced this only for licensed premises at the moment.

Mrs Cameron: For clarity, churches are not exempt in totality for events.

Ms Colgan: That is right.

Mr McGrath: Thank you, Elaine and Peter, for the update. I was trying to read through the regulations, and I am struggling with the language when trying to find information on the issue of children. By and large, children should not be in a bar, but it is not unusual for them to be there in the daytime. Some landlords are wondering what they do in that instance and whether there is a particular age range and upwards to which it relates.

Ms Colgan: If you are under 18, you do not need to prove certification, but there has been confusion around this, because there is a misunderstanding about the evidence. We have been getting queries about what a person who is under 18 needs to prove because they cannot get certification. They do not need to provide any evidence. The evidence applies only when certification kicks in, so, if you are under 18, you do not need to do anything. You are not captured by the requirements.

Mr McGrath: That builds into my next point. Is the messaging the responsibility of your side of the house or do you pass that on to somebody else? There is a lot of confusion out there, and we should do anything that we can to ramp up the messaging. You referenced something being on a website, and I very quickly went to it, but I do not know where I am looking to find it. You want almost to be able to google "Hospitality restrictions and COVID certification Northern Ireland" and be brought straight to it, but that does not seem to happen at the minute. Where is that information and the guidelines?

Ms Colgan: Peter, do you want to take the bit about nidirect? I will talk about the bit that we have on our website. On our website, we have what is always there for the restrictions regulations. We have guidance published that explains what the regulations require, and that is on our website beside the restrictions regulations. If you go in and go to "COVID-19 - Legislation" from the quick links on the home page, that is where you will find that. We also have FAQs. I will check this when Peter is talking,

but I am fairly sure that there is a link on the home page for "FAQs on Covid Status Certification". I will double-check that now.

Mr Luney: There is information on nidirect that tells citizens what they can expect on COVID passports. It has been on there since the scheme was operated on a voluntary basis, and we revised it recently to take account of the statutory scheme. There is more to be done, and I have asked my team to start looking at that now. Ideally, we would like two separate, more detailed documents. We would like one that is citizen-facing, similar to what is already there but making it clear what people can get, with links to the various services that they can use. We also want one that is more business-facing and that will probably be sited on nibusinessinfo.co.uk. We have good models from Scotland for both those documents, and the team are now looking at "Northern Irelandising" those. We will work with colleagues in the Department of Health who have responsibility for the policy in order to make sure that the documents are wholly accurate. The issue of being able to find things on nidirect has been raised with us before. We will speak directly to the nidirect team to see how we can raise the priority or spotlight that information, particularly during, say, the first four weeks of its operation.

Mr McGrath: OK. Thank you very much.

The Chairperson (Mr Gildernew): I have a supplementary to Colin's question. This is not directly related to the COVID cert for the purposes of what we are talking about today, but there are a couple of issues that should be flagged and followed up by yourselves. For example, I am aware of a query from a 14-year-old who is going to Spain and needs a certificate there. How do they access a certificate, not for domestic use but for travel use?

On COVID certification for here — I predict that this will become an issue for many people — people are once again struggling because they got their first vaccine in England, where they were a student, and then their second vaccine here or vice versa or in another jurisdiction. Will you put dedicated resourcing into dealing with and addressing those queries? They will arise.

Ms Colgan: On the travel cert, I know that work on that is going on at a UK level, because Spain is not the only country that is starting to require travel certifications for children and young people. I am not involved in that now, so I am not sure what the detail is, but I know that they are looking at it.

On the home side, the problem of people who got their vaccines in two different jurisdictions is a challenge, because the health records in each jurisdiction are stand-alone and do not share information with one another. I will look into that with the technical team and come back to the Committee on the process for a person to be able to evidence that and how it will be dealt with in the coming weeks. I am happy to come back on that one.

The Chairperson (Mr Gildernew): OK. It is important to bear in mind that many of the decisions on travel were based on the common travel area and the fact that we had such integration, with people travelling for work. We need to make sure that all of the other schemes take that into account and are able to deal with it. Thank you for the commitment to look at that, Elaine.

Mrs Erskine: It feels a wee bit like putting the cart before the horse. I want to make a comment before I go into my questions. Having things published on the same day that businesses were meant to start putting things in place makes it difficult. There is an awful lot of confusion and uncertainty around it, which really impacts upon businesses and the public.

Like Paula, I have concerns about older people. I am glad to hear that you are engaging with the Older People's Commissioner. I have concerns around staffing levels for the helpline to ensure that people get their COVID vaccination certificates. Will there be enough staff to man that? We are coming up to the Christmas period. I know that my constituency office will help people who come forward and want to get their passport, but what will happen when my office closes? Where will those people go? Will they be able to get through OK to the helpline? I am wondering about the interim period for that card as well. It is vital that we have that information.

I want to look at the issue of enforcement and things like that. Given that the regulations do not assign one specific body or individual to apply the requirements, is there not a risk that enforcement simply will not be feasible and that confusion will abound over that?

Ms Colgan: On the timing of the publication of things, I completely agree that it is not ideal for businesses to operate in that way. Having the guidance published on Monday, at the same time as the

regulations, made it very difficult. There really was no alternative for us, however, given the pace of things, but we tried to mitigate it and make it a little bit easier by ensuring that the policy intent was well publicised. From the time of the Executive agreement on 17 November, we started to work on the FAQs, which stated what the policy was going to be. We got those online quite quickly, so, whilst we could not publish the regulations or the guidance in detail, that was there. I know that the technical team began its industry engagement on the verifier app a lot sooner as well, so that was already happening. Businesses could get a briefing on how to comply, how it would work and how the app was to be used and downloaded. There was work to try to mitigate the fact that the regulation guidance and the regulations were being published at the same time. I accept the point, and I accept that that was not ideal.

On helpline staffing, we always kind of expected that there would be a bit of a rush, once the regulations were made, to get the certification and use the helpline. I know that there is a well-staffed helpline at the moment. I can come back to the Committee with specific figures on that, if it is helpful, when I come back on the other issues. I am happy to do that.

You asked about the interim period for the use of the card. We do not have a fixed date in mind for when we will remove that. It will be done in consultation with not just the industry but our technical team, because we cannot remove it until we are fully confident that those people have been able to get paper certifications, if they need them. That is the crux. The other reason for that is to allow people time to get evidence of their medical exemption, because the process for that is opening next week. We will not turn it off until we are absolutely convinced that people do not need it, and we will give notice as well.

Mr Luney: I can come in, Deborah, on the enforcement side of things. It is true that the regulations are not prescriptive about who is responsible for what areas, but, in practice, there are allocations. The police will be the lead agency in relation to licensed hospitality, for example. That interface area will be monitored by the task force's adherence group, on which local government, the Health and Safety Executive and the police are all represented. That is an area that we will keep under close scrutiny, particularly during the first few weeks of operation.

Mrs Erskine: I am hearing from businesses that they will have to employ extra people to man their doors. Do they have to ask people coming to their —. Is the point of entry at the doors? That will impact on businesses that have multiple doors and points of entry. For complete clarity, is a point of entry a till? Is it when they are in their seats? Where do businesses have to ask for identification?

Ms Colgan: Yes, it is at point of entry. That is another one of the reasons why it is licensed hospitality. Mixed trading venues and places like fast-food restaurants, where you go in and order and then sit down, are one of the challenges. At the moment, it is point of entry.

In terms of the timing, this is why we are promoting, as far as possible, the use of the verifier app. Businesses can download the COVID certification verifier app and use that, and it takes literally seconds to verify a person who has a domestic certification on their smartphone or any paper evidence with a QR code. It is not only having it on the smartphone that speeds things up. The types of things that will be accepted on the verifier app are international certificates with QR codes and, as I referred to earlier, paper copies of the exemption for those people who do not have smartphones. All those can be scanned by the verifier app. Sometimes the verifier app will say to the person who is doing the scanning to check the ID of one of the people, but mostly it is a green tick and you are straight through. It is very fast. The more the verifier app is used, the less time it will take to get people through the doors.

Mrs Erskine: Thank you.

Mr Carroll: Thanks, Elaine. I have a few questions, Chair, but I will be as quick as I can.

At the outset, I have, and we have, always been enthusiastic supporters of the vaccine. Everybody should get it, unless there are underlying medical conditions preventing them from doing so, but I am very concerned about this scheme generally and the way that it is being presented. It is being presented as somewhat of a silver bullet, and, frankly, it is not and cannot be. A similar scheme was implemented in the South, and cases rocketed. I note that Simon Williams from Swansea University said that there has only been a slight increase, at best, in vaccination in Scotland after the roll-out of the scheme, and others have a more critical take on it. Those points have to be made at the start.

I gather — apologies if I have picked it up wrong — that this essentially applies, in the main, to hospitality venues, aside from places of worship as well. We have a situation where there is no legal requirement to socially distance in hospitality venues. That SR was made and passed a week before this current SR was laid. Perhaps, Elaine, you can confirm that there could be a situation where two people, doubly vaxxed and with certificates to prove it, could sit in a hospitality venue next to somebody with COVID and catch it from that person. Is that a possibility?

Ms Colgan: Yes, it is a possibility. You mentioned that this measure is being presented as a silver bullet. You are right that it is not a silver bullet. In our communications, we have tried to emphasise that. It is another weapon in our arsenal against COVID; that is very much how we have to see it. Face coverings, hand sanitisation, basic hygiene and social distancing where possible are still important elements of this whole thing.

As for the increase in vaccination elsewhere I have to emphasise that that is not a policy objective for us. This is not being introduced to increase vaccination uptake. It might well be a secondary benefit, and we do not deny that, but it is not what we are trying to achieve with this. This is about making those venues safer where we can and about trying to minimise community transmission of the virus.

Mr Carroll: Thanks, and —. Sorry?

Ms Colgan: I was just going to say that I think I have addressed everything, but please let me know if I have not.

Mr Carroll: Thanks. I have a couple of other questions, but I will be as quick as I can. I want to ask about proof of a negative test. I am looking for clarity. I am still trying to ascertain whether that has to be digital. Is there any requirement for photo identification? For example, can people take a test with a negative result at home and physically bring that, or a copy of it in the form of a photograph with the time or date on it? That needs to be clarified as well.

I have one final question after this.

Ms Colgan: The negative LFD result has to be reported through the NHS reporting system, and that is only available digitally at the moment. The reason is that that person will receive a notification, and that notification is the evidence that they have to present, with photographic identification. People who are not resident in the UK will not be able to upload an LFD test onto the NHS system. They will have to do it on site, and there is provision for on-site LFD testing. That is available, but it is up to businesses whether they operate it.

Mr Carroll: You have no idea how many more businesses will take up on-site testing, no?

Ms Colgan: I do not know. Peter, have you any information on the large events sector? I know that they do it, but the numbers are so small. They do not need to do very many of them, and that is even for large events.

Mr Luney: The feedback that we got from the events sector is that the really big operators were doing on-site testing, but very quickly, even once the scheme was being operated voluntarily, the need for that declined to fractions of 1%. We will keep it under review with the other sectors that are now operating it, but it seems that, once the message gets through to individuals, it becomes less essential.

Mr Carroll: Thanks. There is also an issue, Elaine and Peter, with the fact that it is a digital proof. That is a barrier to people who do not have access to a phone or the internet. That is a big issue. I know that the Committee on the Administration of Justice (CAJ), and maybe other human rights organisations — maybe you can speak to that — have expressed concern that people — I do not want to misquote — who have no access to phones or apps can be negatively impacted by this scheme. There are big questions around that, involving people who do not have secure immigration status or are otherwise marginalised. Maybe you can address that.

This is my final question. Elaine, you said that this is not being done to increase vaccination, but that that might be a result. I am concerned that it is being used as the silver bullet to do that. I am unaware, though I am happy to be corrected, of any work being done by the Department or the trusts to ascertain why people are not vaccinated. We have a small cohort of people who are anti-vax — they

are incorrect, obviously — but there is a group of people who are unsure and who could be convinced. At the start, people who were pregnant and who were unsure were told not to get vaccinated. Are we aware or do you have evidence of the broad reasons why people have not been vaccinated? Is the Department doing any work on that?

Ms Colgan: I will, briefly, come back to the LFD tests and the digital issue. There is not much we can do on the LFD test for a non-digital route other than allow on-site testing. The difficulty with the LFD tests is that we have to make sure that, as far as possible, we minimise the ways in which people might game the system. We have to make sure, as far as we can, that people are genuinely taking tests and genuinely getting a negative result. I recognise that that is not perfect, and we are working across the UK on the notification system to see whether there is a way to build in scanning more than the QR code, so that you could actually scan the test and the result could be verified. Work is being done on improving that, but there is no way for us to do anything non-digital in that space, other than on-site testing, that does not leave it open to abuse.

Vaccination is not my area, so I will not even try to guess an answer on what might be going on. I am happy to get input from colleagues and put that into the response, along with the other issues.

Mrs Cameron: Thank you again, Elaine and Peter, for your time today. I have two questions. One is about clarity. I did ask on the back of the previous question about church events, but schedule 2A gives a general exemption for *[Inaudible owing to poor sound quality]* my dogs barking. I just want to check the general exemption for communal worship or communal activities at a place of worship. Does that not give the exemption to churches for not just services but other activities?

Ms Colgan: It does for events, but not if they serve alcohol. If they have an event with no alcohol, that exemption will cover it, but, if they serve alcohol, it can only be done as part of a religious service.

Mrs Cameron: That is brilliant. Thank you for that clarity.

Mr Luney: I will come in on that very quickly. I am the part of the task force that is leading a lot of the engagement. We plan to have another meeting with faith leaders next week, hopefully, to talk to them about that. Although there is an exemption, we want to talk to them about their appetite for applying COVID certificates voluntarily, particularly for the bigger events that they may have in the run-up to Christmas. When we met them before, there were mixed opinions. Some churches felt that they would be keen to do that to protect their congregation. Others were less sure, because they did not want to do anything that would stop people getting access to important religious services. We will, hopefully, continue that conversation next week.

Mrs Cameron: OK. I appreciate that. Thank you, Peter. My other question is about producing a negative lateral flow test as evidence. I am a bit confused about that. Can somebody walk me through the process of how that works in practice? How do you prove that the test has been taken within 48 hours? Can you use an older test? Can you repeatedly use the same negative test? I would like some clarity.

Ms Colgan: Once you have obtained the LFD test, you take the test. There are instructions in the LFD test kit. You have to do the swab yourself from your throat and nose, you use the liquid, it is all step by step to get the result of the test. Once you have that, you go on to the NHS reporting system, and, if you are going to do it regularly, you can create an account, or you can report a single result. When you go to report that, you can only report tests that have been taken either today or yesterday. You cannot report a test that was taken further back. The system will ask you which day the test was taken on, and you put that in. You put in your name and your details. If you want, you can link it to your health and care number; you do not have to, but you can. If you are in a workplace scheme, there will be a code that your employer has given you, which you can enter, and that will be recorded against your workplace testing. None of that is mandatory; you can just report the result.

When you are reporting the result, you can select from three options. It is either positive, negative or inconclusive. When you report the result, the system will ask you whether you want to receive a notification. That is a new step, which I discovered this morning. I had not seen it before, and it threw me completely. For the purposes of certification, if you are taking it to get in somewhere, you will need to click yes to say that you want a notification *[Inaudible owing to poor sound quality]* and an email, depending on what information you have put through. The date of the test is on that notification. There is no time of the test, only the day. If you are going to an event, say, on Saturday at lunchtime, you cannot present a Thursday test. Whilst the regulations say 48 hours, it is more like two days, because,

if you put a date of Thursday, it could have been taken more than 48 hours before. The date of the test will have to be that day or the day before. We are looking at whether we need to amend the regs on that or how we want to handle that. However, because there is no time on the test, only the date is shown. I think that pretty much covers it, end to end.

Mrs Cameron: OK. Thank you for that, Elaine. I have one more question. In what circumstances does the Department envisage someone under 18 enforcing requirements? Did the equality screening cover that element?

Ms Colgan: Under-18s do not need to prove anything. Do you mean if someone is trying to enforce against them and they are under 18?

Mrs Cameron: I mean if somebody is trying to enforce the COVID certification at the door, and they are under 18.

Ms Colgan: Oh, right. OK. It is not even something that we had considered at all. I am happy to go away and look at that. I do not know whether there would be any particular issues with it, but I will check from a data perspective, and certainly for the downloading of the app, if there are any issues arising from under-18s downloading the verifier app or anything like that. We will definitely look into that with the data protection officer.

Mrs Cameron: So presumably the equality screening will not have covered that element, because it has not been thought of?

Ms Colgan: The equality screening is more about impact of users — the citizen having to verify before they go and do something — as opposed to the person who is working for the business and doing the certification itself, so that would not normally be covered in an equality screening. We will go away and have a think about it, and we will talk to the data protection officer. We will have a think about whether there are any other issues, other than data protection, that that raises. We will look into that one.

Mrs Cameron: OK, thank you, Elaine.

The Chairperson (Mr Gildernew): Elaine, I want to pick up on the issue of languages for the LFD testing. The LFD testing process is complicated enough. I have to follow it step by step, and, if I did not do one for another month, I would have to follow it step by step again, and it is tricky enough. Is it available in minority languages?

Ms Colgan: The lateral flow test itself?

The Chairperson (Mr Gildernew): Yes, the instructions for it.

Ms Colgan: I am not sure; I will go away and find out.

The Chairperson (Mr Gildernew): Will you check that as a matter of urgency? There is a real urgency around the fact that people from some of those minority language communities are involved in domiciliary care and in food production, and there are vulnerabilities. I also want to reiterate a point that I have made a few times, which is that a lot of the East Timorese population, certainly in my constituency and beyond, speak Tetum rather than Portuguese. I know that information has been put out in Portuguese before, but a lot of those people speak a different language, which is Tetum. I would like that checked out and included as part of any ongoing instructions.

Also — I raised this last week again — are the LFD test instructions available in Braille? I met the Royal National Institute of Blind People (RNIB), and that is another issue for them. Indeed, any sensory issue that might have an impact on the communication of those complex instructions needs to be considered carefully.

Ms Colgan: Yes, OK.

The Chairperson (Mr Gildernew): I will finish for now on the area of communication. It is crucial that there is clear communication around how this will impact and how people can comply with it. I think that the vast majority of people here understand that, in the circumstances that we are in and,

potentially, the circumstances that we face into, slight improvements are valuable. Our health service and population deserve any slight improvements that we can get. Those should not be dismissed; in fact, I see it as a minimalist enough approach in that sense. We should certainly take advantage of it. There are a number of ways in which you can demonstrate that you do not actively have COVID before going into a crowded setting or somewhere that you do not need to be. We are not talking about necessary travel, public transport and things such as that.

There is a huge onus on you to catch up when it comes to communication. Even this morning, there is a message circulating widely claiming that a range of other measures will be brought in. I believe that it is disinformation, but the Department, the Executive and anyone else who can help need to massively push back and put out the correct information in a way that not only reassures people but provides them with the information to allow them to push back on nonsense. Some of it is nonsense. I accept that there are genuine concerns, but there is a lot of pure nonsense out there. There appears to be a disinformation campaign as we speak, and that needs to be challenged and tackled. That area needs to be looked at.

Thank you, Peter and Elaine, for coming.

Ms Colgan: Thank you.