HOUSE OF COMMONS

Public Administration and Constitutional Affairs Committee

Oral evidence: Coronavirus Act 2020 Two Years On, HC 978

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Watch the meeting

Members present: Mr William Wragg (Chair); Ronnie Cowan; John McDonnell; David Mundell; Lloyd Russell-Moyle.

Questions 37 - 97

Witness

I: Rt Hon. Sajid Javid MP, Secretary of State, Department of Health and Social Care.

Examination of witness

Witnesses: Sajid Javid.

Q37 **Chair:** Good morning, and welcome to this meeting of the Public Administration and Constitutional Affairs Committee. Today, the Committee is continuing its inquiry into the Coronavirus Act 2020 as it reaches nearly two years on our statute books and its inbuilt expiry date approaches. As we transition out of the covid-19 pandemic, it is right that Parliament should review the emergency powers that have been introduced into our legislative landscape and examine their ongoing impact and effects, as well as what options there are for future emergency legislation.

I am delighted to say that we are joined this morning by the Secretary of State for Health to discuss this legislation, following the Prime Minister's recent announcement on the Government's plans for living with covid. Secretary of State, could I ask you to introduce yourself for the record?

Sajid Javid: Thank you very much. I am the Secretary of State for Health and Social Care. If I may just say so at the start, I thank you, Mr Chairman, and the Committee for this opportunity to appear in front of your Committee today.

As you say, the legislation that was introduced two years ago was unprecedented. It was an unprecedented piece of legislation in every way to deal with an extraordinary threat our country faced. I think we can all understand the purpose of that, but it was a huge restriction on people's

freedoms, alongside the Public Health Act provisions that we used, and I think we can say it was also a big shift in the relationship between the state and the individual. I would join you in saying that I think everyone can look at the moment we are in now with the pandemic in a much, much better place as we learn to live with covid. I will finally just say at the start that I very much welcome the scrutiny that your Committee has already provided, and continues to provide. As we learn the lessons from covid, this kind of scrutiny is going to be very important.

Q38 **Chair:** We are very grateful indeed to hear that and have that endorsement, and you are very welcome this morning. I will begin with the first question, Secretary of State: will any of the individual provisions that are due to expire be extended, and if so how, and what role do you envisage for Parliament in that process?

Sajid Javid: As you referred to at the start, it was a temporary piece of legislation. It was intended to expire as planned at midnight on 24 March. In terms of the specific question, at each review point, a number of provisions have been retired early. What we do intend to do, as we have announced very recently, is that we plan to keep four of those provisions on a more—eventually, hopefully, subject to the will of Parliament—permanent basis. The objective there is that these four provisions are things we have learned lessons from already. In terms of the impact of them, they can lead to more reforms over the longer term, such as improvements in the courts system and access to courts.

What we intend to do with those four provisions is keep them going for six months, so there is no gap between those provisions and—subject to the will of Parliament—permanent legislation that can come in through existing primary vehicles. There are two Bills in front of Parliament at the moment, and—again, subject to the will of Parliament—we hope Parliament would intend to keep the effects of those four provisions in place on a more permanent basis through primary legislation, with proper scrutiny and debate, but to have no gap, we would intend to keep those for a further six months.

Q39 **Chair:** In terms of those four provisions, you have mentioned the courts. Would you care to expand on the other three and their necessity?

Sajid Javid: There are four in total, so I will quickly go through, and I can expand on any that you wish. There is section 30, which is the suspension of a requirement to hold inquests with juries in England and Wales. This has supported coronial services throughout the pandemic in England and Wales, and we would like to keep that and make it permanent through the Judicial Review and Courts Bill, and extend it for six months so that there is no gap.

The other three are sections 53 to 55: collectively, they are what I might call the remote court provisions. Those are the provisions that have allowed for court hearings to take place using audio and video links so far during the pandemic. There are around 11,000 hearings per week taking place remotely—using remote technology—through some 3,200

courtrooms. They have greatly helped to reduce the backlog in cases and really helped to bring more justice to more people, more quickly. We would intend to make the provisions permanent through the current Bill in front of Parliament, which is the Police, Crime, Sentencing and Courts Bill.

Q40 **Chair:** Thank you very much. Just to clarify, are the Government intending to bring forward the 25 March expiry date for any provisions in the Act?

Sajid Javid: All other provisions. So, of the remaining provisions—

Q41 **Chair:** So on 25 March or sooner? Could you just clarify that?

Sajid Javid: At midnight on 24 March.

Q42 **Chair:** Thank you. That is helpful. What detailed discussions have there been with the devolved Administrations about the impact of the expiry of the Act in March? Have you been privy to or involved in those conversations?

Sajid Javid: We have continuously, throughout this pandemic, and certainly in the time I have been the Health Secretary, had very regular discussions with the devolved Administrations. For myself, unsurprisingly, that has been with my counterparts in the Administrations. We have discussed and informed the non-devolved provisions on many occasions, but ultimately once those decisions have been made, we have discussed those with the devolved Administrations as well.

As you know, there are many devolved provisions that were done through this Act, but it is obviously a decision for the devolved Administrations if they wish to keep some of the devolved provisions within their own domestic legislation. That will be a matter for them.

Chair: That is very helpful indeed.

Q43 **Lloyd Russell-Moyle:** The Government justified the passing of the Coronavirus Act with minimal parliamentary scrutiny by saying that it was to protect life. Why have only 27 of the more than 500 pandemic-related statutory instruments used that Act?

Sajid Javid: The Coronavirus Act was essentially there to provide support for our citizens as a result of using the regulations under the Public Health Act. I want to be clear about this, because I think it is very relevant to our discussions today. The Public Health Act 1984 was essentially the vehicle used to introduce regulations around social isolation, self-isolation, lockdowns, and all of that. That had a significant impact on the citizens of this country, in terms of their jobs, and therefore their livelihoods and businesses, and in many other ways.

Many other things, such as the courts, as I mentioned earlier, could not continue in the normal way because of those social isolation regulations. I would say that the Coronavirus Act was there to complement the use of the Public Health Act and to provide support, such as, in terms of workforce—especially in health and social care—to ease burdens and to

support people helping with some of the provisions to contain the pandemic, but also, for example, to give respect and dignity to the deceased.

Q44 **Lloyd Russell-Moyle:** When your predecessor said in the House on Second Reading that the reason for this Act was to protect life, and that it would be relinquished as soon as the threat to life was gone, that was not quite true. The Act was to support communities, and people being able to continue. It was not to protect life, which was done via the Public Health Act.

Sajid Javid: It was done by both Acts. As I said, I would rather see the Coronavirus Act as complementing the impact of using the Public Health Act. For example, sections 2 and 6 of the Act allowed for the creation of temporary registers. Section 2 is for a temporary register for clinical staff. That meant that clinical staff who may otherwise have been outside of the NHS at that time were able to quickly re-register, and I think that around 25,000 did. There is no doubt that, as that was able to happen in the way that it did, the Act protected life.

Other measures included, for example, section 45, which changed the NHS pension scheme so that people were not disincentivised to come back to the NHS. That would have saved lives. It reduced burdens; for example, it did not require continuous health assessments, which meant that, by reducing that burden, the NHS could focus on people in hospital who had covid-19. I do not think it would be correct at all to suggest that this Act did not save lives.

Q45 **Lloyd Russell-Moyle:** I appreciate that. On the pensions you just mentioned, you have outlined the four provisions that you are going to keep. Have the Government seen any benefit from some of those administrative provisions around the Coronavirus Act, such as the pensions waiver, that would allow people to come back to the NHS? Has there been any analysis or consideration about keeping, say, the pensions element, so that it would allow people who have retired to come back? The crisis in the NHS is not over, is it?

Sajid Javid: There is a significant workforce challenge in the NHS, of course, and it is something I have spoken about in Parliament on many occasions. There are aspects of this that we would keep, but we would keep them in a different way. For example, the temporary registers have been, over and above the pension changes or anything else, the most significant in helping to increase the workforce. We are working with the respective bodies to look at how that can be put on a more permanent basis—not keeping the register open for new entrants, but enabling those that have re-registered to continue to practise after midnight on 24 March.

Q46 **Lloyd Russell-Moyle:** So there is some discussion. Some organisations have told us that provisions in the Act were not used and that the fact they were not enacted was detrimental to them. This applies specifically to the triggering of the emergency volunteering leave provision. Organisations such as St John Ambulance told us that that hampered its

ability to allow people to volunteer. Why did the Government legislate for something such as emergency volunteering leave provision and not use it?

Sajid Javid: Before I turn to that provision, I would say more generally that there were a number of provisions that were legislated for and not used. While I was not involved in the drafting of the Bill at the time, I think it is understandable, given that it was put together at speed, in an emergency situation, and with a virus that we did not have as much information about as we do today. There was an attempt to make sure that provisions that might be needed, but which we could not be 100% sure about, were added just in case.

Later we will get on to the scrutiny, but I will say that it was important that when we had these regular reviews, particularly the six-months reviews, each time the Government would look at each provision and decide whether it was needed or not, and if anything could be retired early, it was. In December 2020, a section 10 provision regarding mental health was retired early and never used, to my understanding. In the next review and the one after that, some 19 provisions were retired within another 12 months.

As for the provision that you mentioned, the Government were obviously working very closely with the NHS and other health providers, and we would have discussed it with them in detail. From our perspective, if the provision had been required, then it would have been used. You have mentioned St John Ambulance, which gives me an opportunity to thank that organisation along with many others that helped and continue to help throughout the pandemic. In respect of St John Ambulance, the help was provided without any hindrance from legal requirements or legal issues, especially in vaccination centres, where it played a critical role in getting this country and its people vaccinated.

Q47 **Lloyd Russell-Moyle:** Has there been or will there be a wholescale assessment of what was or was not used and what impact each of those clauses has had?

Sajid Javid: Yes, absolutely. There must be, and there will be. The stage we are at now, I am pleased we are able to make the announcements about retiring remaining provisions, but there are lessons to be learned from this, and they will be so we can better prepare for the future. Our discussion today and the scrutiny being provided will be part of that, as will the Government's own work, of course.

Q48 **Lloyd Russell-Moyle:** Is that something your Department will take on in terms of public consultation or ability for these organisations to input, and you then collating that and publishing it? Surely that is a piece of work that you will need to lead on.

Sajid Javid: It is very important to do such work. I cannot tell you today exactly what form it will take. You talked about public consultation; that is one potential form. There is already a lot of important feedback that the Government get from various organisations and individuals the

Department deals with, but if you are suggesting a more formal process, I think that is a good suggestion.

Q49 **Lloyd Russell-Moyle:** A good suggestion. Are you willing to put some meat on that in terms of ideas or timetables and to get back to us?

Sajid Javid: We are already looking at how we can have a more structured and formal process. Parliament's role is absolutely crucial here, but we want to make sure that everyone—the wider public and other organisations—have an opportunity to comment and help to improve future legislation.

Q50 **Lloyd Russell-Moyle:** And when you have the timetable and the form that is going to take, you will be able to write to us.

Sajid Javid: I will be happy to write to the Committee and say more on that.

Q51 **Ronnie Cowan:** We already had the Civil Contingencies Act and the Public Health Act before March 2020, and the Coronavirus Bill was drafted at pace—understandably—in March 2020. It was repurposed from the shelved draft pandemic response Bill from 2016, and passed through both Houses at an exceptional pace. With that in mind, what assessment was done before the Coronavirus Act was introduced of the scope for using the Public Health Act as part of the Government's pandemic response?

Sajid Javid: Thank you for that question. I am happy to answer it, but with the caveat that I was not in the Government at the time—I was taking a break from the Government—so I might not be as specific as you want me to be.

As you know, the Public Health Act 1984 was used. Regulations were brought to Parliament under that Act, and the powers under the Act to help to prevent the spread of a communicable disease—the self-isolation rules, the social distancing rules, the tiers that were introduced—all played an important role. But in terms of the subject we are discussing today, I think your question is why just that Act, or perhaps the Civil Contingencies Act, was not used rather than having the new Act. The answer is that, as I mentioned at the start, the Coronavirus Act was there to deal with the consequences of taking the measures under the Public Health Act, which the Public Health Act would not have allowed you to deal with.

Let me share a couple of important examples. Earlier, Mr Russell-Moyle asked a question about expanding the workforce in the NHS; the Public Health Act would not have allowed that. The British people were given significant and vital support because of the consequences of the lockdown measures—for example, on people's livelihoods if they could not go into work. That is why the work retention scheme was set up and billions were paid out to support 11 million or more people; then there were the business schemes, the bounce back loans, the interruption loans—none of that kind of support would have been possible using the provisions of the Public Health Act. Another example is the courts system which, if people been unable to appear physically in court in the normal way, would have

come to a standstill, so the extra provisions were needed. The Public Health Act would not have allowed those support provisions.

Perfectly understandably, you also asked about the Civil Contingencies Act. When that Act went through Parliament, it was to be used as the last resort if no other legislative vehicles were available. In this case, there clearly was a legislative vehicle available. Also, my understanding of the Act is that if Ministers introduced emergency regulations under part 2, which I think would have been the most relevant part had the Act been used, they could stand for only seven days, then Parliament would have to vote on them, and the provision would have to be renewed every 30 days. Every 30 days, on a rolling basis, we would have to come back to Parliament and renew it, which in itself could have been difficult if Parliament was not sitting because of some of the other social distancing and isolation regulations.

Q52 **Ronnie Cowan:** With all due respect, some people would have said that that is what Parliament is for, and you are aware that at one point we could access Parliament through Zoom—other technology platforms are available—and we could vote remotely as well. During something like a pandemic, to ask Parliament every 30 days to rescrutinise legislation that is having an effect on everybody's daily life—that is really what we are here for, is it not?

Sajid Javid: I think you are half right. Although after March 2020 Parliament was able to stand up procedures to allow remote voting and remote debate, the challenge of having to vote every 30 days would not have provided the sort of certainty required for some of the support measures. Take the workforce support measures, for example: if you wanted people to join the registers of nurses and clinicians, but there was uncertainty about their renewal every 30 days, it would have made the NHS's job much harder in terms of planning and responding to the virus. Look at the support measures and the furlough measures.

Imagine you were an air steward; you were off work and knew that, realistically, you would not be back at work in the foreseeable future—certainly not within a month. You would be sitting at home thinking, "Am I going to get paid every month—next month and the month after?" There would be no reliability for businesses. Say you had been given a bounce back loan; it would not have to be repaid for let's say a year, but the legal basis of the loan could disappear within 30 days because Parliament did not renew it. Would you have to pay it back nine or 10 months early?

I could go on. There are many measures that require legal certainty. Some of the measures in the Coronavirus Act are permanent provisions—like it sounds, they stay in place permanently—because they continue to provide vital legal certainty. If I may, I will give just one example. Changes to clinical negligence indemnity were required because hospitals could not operate in the normal way, and there were some settings where they would carry out medical procedures that were not normal—for example, the local authority testing venues[1] that popped up. That change has to be

in place on a permanent basis, because acts that took place using that indemnity during the two-year period still need to be protected. If Parliament had to keep coming back every 30 days, would clinicians have confidence that that negligence protection would be there?

Q53 **Ronnie Cowan:** Where was I half right?

Sajid Javid: I think I was being a bit generous. The only bit you were right about was that there were remote procedures in Parliament. I was just trying to be nice.

Q54 **Chair:** For legal certainty, it might be quite convenient not to have Parliament there to make changes to the law.

Sajid Javid: But when the Coronavirus Act went through Parliament, the need for that legal certainty and why it was important to do it this way rather than use the Civil Contingencies Act would have been explained to parliamentarians.

Q55 **Ronnie Cowan:** There is always going to be that balance. I understand the need to give people long-term certainty, but that has to be balanced against ongoing scrutiny. You cannot just say, "That's it. It shall not change." Parliament is always going to be rescrutinising everything that goes on and the public know that, they accept that, and they understand that things can change and change quickly.

Sajid Javid: I accept the principle, and that is why I think it was important, when this Act went through Parliament, that the Government gave the commitments it did to reports on the status and the use of provisions every two months, the six-monthly reviews and the annual review. There was also a very important commitment to retire any powers that were never going to be used after a better understanding of the pandemic was developed, or provisions you are not likely to want to use again, and Parliament being involved throughout that process.

Q56 **Ronnie Cowan:** The lockdown powers were not set out in the Coronavirus Act; we used the Public Health Act. If you were looking for flexibility, why were they not in the Coronavirus Act?

Sajid Javid: Because you didn't need them to be in the Coronavirus Act; that wasn't the purpose of the Act. The purpose of the Act was to support the use of the lockdown measures—to provide support to our citizens.

Q57 **Ronnie Cowan:** Okay. Now that the Government has used the Public Health Act extensively in the context of this pandemic, what assessment have you made about the gaps in that legislation, to best address a future emergency? Are you considering bringing in new legislation to address these, so that, come that time and whatever it may be, we are not in the situation where we have to legislate at pace?

Sajid Javid: Are you asking about gaps in the Public Health Act or more broadly?

[1] Transcript amended, by request of DHSC, from "vaccination centres" to "testing venues"

Ronnie Cowan: The Public Health Act.

Sajid Javid: First, I would say the assessment, the lessons learned from this, which we were discussing a moment ago with Mr Russell-Moyle—that process is going on in what we are discussing today; the job of this Committee and the excellent work that you are doing is part of that. If you're asking me right here and now, "Were there gaps in the Public Health Act?", that is an analysis we haven't completed. When significant measures—these restrictions on people's lives—are put in place under the Public Health Act, the Government and Parliament certainly need to reflect on the impact they have. They have a huge impact on individuals not being able to go to work, for example, or not being able to run their business and have a livelihood.

I think it's fairly obvious that there is going to have to be support—a Government will want to support people in those situations. If it is obvious that it is going to happen and the ability to do that is not in a future revision of the Public Health Act, we need to reflect on how to set out more clearly how Governments will be able to do that. I think it is obvious that Governments are going to have to support people if these types of lockdown measures are used, as was the case. I think that's one thing to reflect on.

In terms of gaps in the Coronavirus Act, I don't think, certainly from my own analysis—again, I wasn't involved from the start—there are any obvious gaps in the Coronavirus Act. If anything, there were clearly measures that were never used in the end, and I can understand why that happened, but the lessons learned exercise has to incorporate all of this.

Q58 **Ronnie Cowan:** What about the draft pandemic response Bill from 2016?

Sajid Javid: Are you referring to the draft flu pandemic response Bill?

Ronnie Cowan: Yes. Should we be dusting that off?

Sajid Javid: Well, it was dusted off.

Q59 **Ronnie Cowan:** Should we bring it into permanent legislation within the Public Health Act?

Sajid Javid: No, I don't think so. The reason for that is that, understandably and quite sensibly, the Government had a draft—let's call it a draft version of what eventually became the Coronavirus Act—but that draft was based on an assumption of influenza being the pandemic. Obviously, we saw a respiratory disease, a communicable disease, but in terms of its behaviour and, particularly, asymptomatic transmission, it is very different from what an influenza pandemic would have looked like. Clearly, some of the actions that were taken, in terms of isolation, how long you isolated, contacts and so on, would have been very different if it was influenza. While there is no doubt that the Government and Parliament have learned lessons and we continue to learn lessons about how to respond to a pandemic, I think that if we tried to bring something

to Parliament now on a more permanent footing, you would just run the risk of preparing for the last war.

Q60 **Ronnie Cowan:** So what engagement do you see with Parliament, going forward?

Sajid Javid: Significant. I think that, first of all, the scrutiny that is being provided by the expertise on this Committee, the Health and Social Care Committee, the JCHR, the Constitution Committee—that is very important. Obviously, there is the Chamber itself. As you know, a public inquiry will also take place and that will be much broader than just the legislation—it will look at every aspect of the pandemic. That is going to be important as well. I think there will be a lot of lessons to learn from over this entire period.

Chair: I will conclude the session later on with some questions on that very theme. I think it is the age-old battle between the Executive and the legislature that we are having symptoms of this morning.

Q61 **David Mundell:** In the Government's view, was the two-year sunset clause in the Coronavirus Act the right length?

Sajid Javid: Yes.

Q62 **David Mundell:** Why do you say that? Would a shorter length not have given Parliament more say?

Sajid Javid: There are a couple of reasons. If you think back to March 2020, at that point we knew that a horrid virus had entered our country and the world, and we knew either what we had worked out ourselves or what we had from the World Health Organisation and others. But there was a lot we didn't know; there was a huge amount of uncertainty.

Secondly, we didn't have anything like the defences that we have today—everything from vaccines to treatments and many other things, including the surveillance and all of the testing capabilities that we have. We didn't have the tools in the box and we didn't know if or when we were going to get them. If we recall, there was huge uncertainty, for example, over vaccines. We didn't understand the virus enough at all.

I know that in the end the vaccines were developed very quickly, relative to how long vaccines normally take, but you might recall, Mr Mundell, that at the time, many people—many scientists—were saying, "If you are going to get a vaccine for this virus, it will take years and years." In the end, thankfully, it didn't take anything like that and I am proud that we were the first country in the world to approve an effective and safe vaccine. We have seen how that has made all the difference.

There was a lot of uncertainty. Therefore, I think, if you'd gone for six months or one year, it would have felt too short, for those reasons, but if you had gone for three, four or five years, it would have felt too long, for all the obvious reasons. I think it was the right balance to have a two-year date on this.

The second important reason is that these regular reviews were built in—the two-month status reports, the six-month reviews. Those were proper, genuine reviews. I wasn't involved in the first two reviews. I was certainly involved in the review that concluded in December last year, when we retired many provisions—I think a further seven provisions and parts of an eighth.[2]

Those reviews work from the perspective of having the scrutiny of Parliament, listening to Parliament, and retiring things early. I think that meant that, while the Act itself, overall, had a two-year timeframe, many provisions within the Act were rightly falling early. As of today, we have already retired half of all the non-devolved provisions.

Q63 **David Mundell:** I will come on to the reviews and reports shortly. Witnesses we have heard from have come forward with the view that sunset clauses, generally, are regarded as a positive thing, but are often a double-edged sword, because parliamentarians are more inclined to accept very draconian provisions on the basis that they would then come to an end, rather than having a shorter period or having an analysis at the time of introducing the provisions. How do you respond to that argument?

Sajid Javid: For what we are talking about today, I think sunset clauses have been positive and have played an important role. I think there is always a risk with legislation that clearly everyone would understand is temporary—an emergency response, a temporary response. I don't think anyone, even at the height of the pandemic, would have assumed the pandemic was forever, so at some point whatever measures you introduce to deal with it would have to end. I think it is far better that Governments sunset legislation, and in the worst case—let's say we never had the vaccines and never made progress—they have to come back to Parliament and justify why it needs to continue. Thankfully, that has not happened.

This can sunset in two years, as was planned, but I think it is better to do that and to debate again and again in Parliament whether you would need to continue something, rather than just allow something to stay on the statute books. Not with respect to this pandemic, but in my role in Government more broadly I have seen an attitude sometimes in Government where, even when you do not need something that was legislated for a while back, everyone tends to either forget about it or not think about it too much, and it stays on the statute books. I do not think that any law should really be on the books unless it is necessary.

Q64 **David Mundell:** Of course, the Government might not have got the provisions through Parliament without a sunset clause.

Sajid Javid: That is possible, yes. I think that is a good point.

Q65 **David Mundell:** In relation to the reviews that you mentioned, the Act was passed with relatively little scrutiny, for the reasons that we have discussed, and minimal ability to make amendments. The subsequent six-

[2] Transcript amended, by request of DHSC, from "four provisions" to "seven provisions and parts of an eighth"

monthly motions have proved to be unamendable and have had to be voted on as a whole. On reflection, do you think that Parliament should have been able to be more involved, and better informed and consulted, in relation to the ongoing operation of the Act?

Sajid Javid: Back in March 2020, given the nature of the emergency and the need for the Government and the country to act quickly, if I look at how that was handled and the amount of scrutiny that took place, I think it was justifiable. It was a balanced way for the Government to react in terms of providing opportunity for scrutiny but at the same time working at pace to try to get the legislation through as quickly as possible. I also think, looking back, that the six-month review points have played an important role. It has allowed the Government rightly to respond to concerns from parliamentarians.

Many provisions were either expired, or aspects of them were changed, because of the parliamentary scrutiny. In the first review, which took place just six months later, section 10 was expired. That was the provision, I believe, to have quite draconian powers to detain people with mental health challenges. It was never used, but it was expired very early on. In the second review, in April 2021, 12 provisions were expired. In December 2021, seven and part of an eighth were expired, so 20 of 40 provisions have been expired. That is because of the parliamentary process—the Government not needing them, but also the Government listening to parliamentarians.

Q66 **David Mundell:** But it was based on the Government listening to parliamentarians; it was not based on Parliament itself determining those expirations, was it? The Government made the decisions, rather than Parliament.

Sajid Javid: Yes, the Government set out their plans. Ultimately, yes, in that respect the Government made the decisions, but the Government made the decisions because they had rightly said to Parliament, "If you parliamentarians can support this piece of legislation becoming law, we will commit to you that, because of your support, these regular reviews will take place and we will get rid of any provision that was not needed." It was a commitment to Parliament, and I think it helped, rightly, for parliamentarians to support it.

Q67 **David Mundell:** But Parliament itself could not have decided to expire a particular provision.

Sajid Javid: Once Parliament had voted the provisions through, during the two-year lifetime Parliament could not decide on individual provisions.

Q68 **David Mundell:** So that was entirely a Government decision, but you based those decisions on listening.

Sajid Javid: Yes, a Government decision backed by Parliament in the first place by giving the Government those powers.

Q69 **David Mundell:** So you do not think that it would have been preferrable at some point to have had a wider debate in Parliament on some of those

provisions.

Sajid Javid: I see what you are getting at and I think that should be part of the lessons learned. I think it is legitimate now to think of it in that way, and that when you have legislation like this, I guess your point is that although the overall Act is needed, could Parliament have more say on individual provisions, or the right to come back on, even if it is not all the provisions, some of the more, let us say, controversial ones? I think it is a very fair point to think about that now.

Q70 **David Mundell:** In relation to the two-month reports, again some concerns have been raised about the content of the reviews and the Government not addressing some specific concerns that had been raised in those reviews. Again, looking back, what more detail do you think could or should have been included to enhance understanding and scrutiny?

Sajid Javid: Obviously, I have been involved in only some of the two-month reports, and I have strived in each one to provide as much information—data—and stuff as I reasonably can. And I do think it is important to maximise that information and to share everything that you possibly can with parliamentarians, and those two-month report points were clearly an opportunity; I think that is what they should be for.

If you are asking, "Is it possible to provide more information?", I think we should look back at that. It is still worth looking back at each of those two-month points and revisiting, and thinking, "As part of the lessons learned, could more information have been provided?" If there was some information Government had that was not provided, it is worth thinking about why that was not done and asking whether that was the right decision in retrospect.

However, I think that the reporting mechanism—the two-month reporting mechanism, then a deeper process every six months, which was like a proper review—was an important part of the scrutiny.

David Mundell: Thank you.

Q71 **John McDonnell:** Secretary of State, I do not want to labour the point, but the issue was specifically unamendable motions. I can understand in certain circumstances why the Government would want to put up "take it or leave it" motions to provide some form of stable decision making, if you like, and we have all been scarred by the shenanigans around Brexit debates, etc. But I think that having unamendable motions restricted the opportunity of Parliament to shape some potential improvements in the way the system operated.

I would welcome it if you took that back and considered, as we go forward, whether or not it was better to engage with Parliament more effectively by enabling it to have more say. Often, it would be on matters of detail, not necessarily driving at the heart of the particular legislation.

Sajid Javid: Yes, Mr McDonnell, I do understand that and, as I said to Mr Mundell, it is a fair point. Everyone wants to learn lessons from this process—rightly so. It was such a fast pace; it was an emergency. We all

wanted to do everything we could to protect the British people, but we need to remember that one of the key ways to protect the British people is to make sure their Parliament—their elected representatives—feels able to perform a full scrutiny role. And what you have just talked about and Mr Mundell talked about—the idea of having motions that can be amended—is something we need to reflect on.

Q72 **Ronnie Cowan:** In oral evidence given to this Committee, Dr Ronan Cormacain said, "If something is important, Parliament should debate it, pass it, agree it and enact it as a proper law. There is this tendency to push things more towards guidance, which does not have the proper parliamentary scrutiny and approval that it really deserves." Do you agree with him?

Sajid Javid: I think it depends on the context, really. For example, today we are removing the legal need to self-isolate if you are covid-positive and we are replacing it with guidance. I mean, that is the right thing to do. So, if I agreed with that, would you say you should always make it a legal requirement?

Q73 **Ronnie Cowan:** On that example, we have already had the regulations for 10 days' isolation. That has been changed through guidance to seven days and then to five days, but you have not changed the regulation. The law still says 10 days.

Sajid Javid: That is right, but the law also says that what applies there, if it is not 10 days, is a reasonable excuse. And the guidance sets out what—

Ronnie Cowan: "Reasonable excuse"?

Sajid Javid: What the Government would consider a reasonable excuse. I do not think that is unusual, in that you have a law, and then sometimes it is very sensible to have guidance explaining, especially in certain situations, whether the Government feel that something complies with the law or not. My answer to your question is that it depends on the context.

Q74 **Ronnie Cowan:** Do you think that doing so much through guidance, rather than through legal requirement, makes it difficult for people to understand and to enforce? You are putting an awful lot of pressure on the likes of police forces to interpret the law.

Sajid Javid: Again, it depends on what you are talking about and the context. Are you referring to measures that were taken under the Public Health Act, which were legal requirements, or are you referring to measures that were taken under the Coronavirus Act, which is what we are discussing today?

Q75 **Ronnie Cowan:** Using guidance, rather than sticking to the legal requirement. Often, guidance has been changed through the use of media rather than this place, as well. People were told over the Christmas period, "Your guidance has changed", but the law was not changed at all, so where does that put the police force?

Sajid Javid: Again, you are not referring to things that were under the Coronavirus Act. I am only trying to clarify because I thought that today we were discussing the Coronavirus Act. If you want to discuss the Public Health Act and the provisions under that, whether there should have been guidance or regulation, I am happy to do that. I just want to make sure you understand that under the Coronavirus Act, as I referred to earlier, there was a supporting, complementary set of measures to other measures that were taken under the Public Health Act.

For example, I do not see how guidance would have allowed someone to start practising clinically in the NHS again. That has to be a legal measure. I do not see how guidance would have provided indemnity for clinical negligence. I do not see how guidance would have given someone a bounce back loan, so under the Coronavirus Act, I really do not see how guidance versus legislation is even a legitimate debating point.

Q76 **Ronnie Cowan:** The crux of this is whether you think that making changes to things like isolation periods without changing the law was the right thing to do.

Sajid Javid: Yes, in certain circumstances. Let me explain. Take that specific example, where the law at the time was "You self-isolate for 10 days subject to reasonable excuse", and then the Government wanted to move very quickly and say that having a negative lateral flow test on day 5 and day 6 was a reasonable excuse to leave isolation early. If that was the quickest way to do that and reduce restrictions on people's lives—parliamentarians clearly understand why you want to reduce restrictions if things are getting better—I think it was the right way to do it, as long as the Government were very clear and transparent about that.

Q77 **Ronnie Cowan:** You are bypassing all parliamentary scrutiny in doing that. You think it is the quickest way, you think it is the right thing to do—understandably—but you are bypassing all scrutiny from all our parties.

Sajid Javid: With all these decisions, it is not just about speed, although speed is an important factor. It is about being practical; about the most practical way to help people understand when the rules apply and when they do not. If every time the Government wanted to clarify things or make a relatively small shift, but with a big impact, it came back to Parliament—obviously, these were all announced in Parliament, they were all explained in Parliament, and they were debated in Parliament. For the kinds of changes you are talking about, a number of times I would have gone to Parliament, or other Ministers would have gone to Parliament, and explained those changes and why they are happening. Parliamentarians would have been given the opportunity to ask questions about them.

Q78 **Ronnie Cowan:** Excuse me, but that is after the fact. You are still bypassing all parliamentary scrutiny in making changes that fundamentally affect people's lives without the use of any parliamentary scrutiny. Is that the right thing to do?

Sajid Javid: I would not—

Ronnie Cowan: Even if you think it is the right thing to do, is it the right thing to do within the way this place works?

Sajid Javid: You said that it bypasses all parliamentary scrutiny. I do not quite think that is the case: if the Government are changing guidance and being open and transparent, and coming to Parliament to make a statement and explaining why that is happening and why that change is being made—

Q79 **Ronnie Cowan:** You can do it openly and transparently and explain it, but if you do not necessarily involve other people and bodies in the conversation to come up with the decisions you are making, you are bypassing parliamentary scrutiny. If I cannot say to you in Parliament, "We shouldn't go down from 10 days; we should be staying at 10 days" and argue my point of view before the guidance is changed, you have bypassed that scrutiny. You have come to us as a fait accompli and said, "We are going to seven days" or, "We are going to five days".

Sajid Javid: Sometimes, given the speed at which we needed to move, such as on the self-isolation guidance, the impact if everything was slowed down because we took a different approach would have inadvertently affected too many lives in ways that otherwise we could have helped.

I think the general approach, taking again your example of the self-isolation rules for close contacts, was that when those rules were put in place by Parliament under the Public Health Act as regulations, it was made clear to Parliament that they would come with guidance.

Q80 **Ronnie Cowan:** I fully understand that you think what you did was the right action to take; I am not questioning that. Are you honestly telling me that if you were in the Opposition and a Labour-run Government were making those decisions and coming to Parliament and saying, "This is what we have done", you would not be screaming, "Where is the scrutiny?".

Sajid Javid: I would want to ensure there was enough scrutiny, but it would depend on the context of the situation at the time and whether I felt the way the Government had changed guidance and the reasons for doing so were in the public interest.

Chair: I think the nub of the issue, as I have mentioned before, is the apparent confrontation between the legislature and the Executive, notwithstanding all the merits and demerits of different cases. To put it as simply as possible, if the Prime Minister has said something, should people follow what he has said—or should it be that Parliament has made a law? It is that balance. This is in the context of a pandemic, which was very difficult with all kinds of competing demands, but what we are driving at is how compatible is guidance or a nudge in different contexts with parliamentary democracy and law making? It is an almost philosophical debate that we are having. David, did you want to come in?

Q81 **David Mundell:** I want to add a little bit of context. The arguments Mr Cowan is making are the exact arguments that Opposition politicians made

in Scotland because of the First Minister of Scotland's predilection for making announcements in her then daily television broadcasts, rather than making those statements to Parliament. My experience was that there was much greater accessibility in this Parliament, although not—

Sajid Javid: If I may, Mr Mundell—maybe you would know better, Mr Cowan, but it is my understanding that the self-isolation rules in Scotland were done by guidance and not by legislation.

Ronnie Cowan: I am not here today to scrutinise the Scottish Government. I can disagree with what they have done on a number of things. We are looking at what happens here, in this building in Westminster, and how this Government have handled the Coronavirus Act. We are not doing what-aboutery—pointing at squirrels running left, right and centre, and saying that other people made the same mistake or asking how another Government handled the situation. We are really good at doing that here, saying, "We're not the worst, because somebody else has made a bigger mess of this than we have."

David Mundell: We hear that statement very regularly in the Scottish Parliament.

Ronnie Cowan: Some 170,000 people in the UK have died from the coronavirus. We are looking to see how we handled that and whether we could have handled it better. Simply pointing at other people and saying, "They made the same mistakes as us," doesn't cut it, as far as I'm concerned.

Chair: As ever, on this Committee, we have made a marvellous attempt to keep party politics out of it. Maybe it is something that Executives, regardless of their colour, are attracted to.

Q82 **John McDonnell:** I do not want to tread on this private grief with regard to Scotland. On announcements in Parliament, there is a view among some parliamentarians that, at times, it has almost been like peeping through the keyhole or shouting through the letterbox of No. 10, rather than participating in a decision-making process over such fundamental issues. I think that needs to be addressed. The argument has been put by my colleague that at times it has been like a fait accompli. Some changes might have seemed relatively minor to Government, but, as you said yourself, they could have a major impact on our constituents' lives. We need to consider the judgment that is exercised in Government about the way in which Parliament can participate in decision making on those issues. At times, Parliament has not felt that the level of scrutiny that should lead to decision making has been fully engaged in.

Sajid Javid: I think you made a similar point earlier, and I respect what you said about amendable motions. You rightly raise the same issue with regard to scrutiny. As I have said, and as I absolutely believe, there will be a lot of lessons to learn from this process. During the last couple of years, the Government have tried very hard to strike the right balance between acting quickly and responsibly in an emergency situation and making sure that parliamentarians are very involved in that process, as

they should be. Again, as I said to you earlier, there will be lessons to learn from this.

Q83 **Ronnie Cowan:** Over 550 statutory instruments have been laid that in some way relate to the management of the pandemic, some of which were superseded before they were debated in Parliament. One was never debated or approved by the House. What would you do in future to reduce the number of SIs in a similar situation and to ensure that the House had timely opportunities to debate them before approval?

Sajid Javid: Governments should always strive to do what you have just said: to minimise the number of SIs relating to a certain policy initiative and to make sure that there is enough time for debate. Reflecting on the pandemic, I think that it, again, depends on which SI it is, what you are trying to achieve and how urgent it is.

I will use the example of the so-called red-listing of countries. Thinking back to the start of the omicron wave, we identified that omicron was of particular concern in certain countries, including South Africa, Zimbabwe and others. We needed to move fast and take quick action. I needed to be able to announce that before Parliament had a chance to consider the matter. I think it was over a weekend. The SI obviously came later, when Parliament was back in session, but I needed to announce it first for obvious reasons. We wanted to make it clear that we were worried about this new variant and that people coming from South Africa might be carrying it. We needed to make sure they were aware of it and that British people in South Africa were able to take it into account over that important weekend.

Time was of the essence, especially as there was a variant that, according to the data at the time, was more transmissible than anything we had seen before. I use that as an example of how it does depend on the context of the particular SI and what it is intended to achieve.

Q84 **Ronnie Cowan:** Were we trying to do too much? Was there too much legislation? Were we trying to be too particular and dot every i and cross every t? New Zealand handled this with a lot less legislation than we did.

Sajid Javid: That is because New Zealand took an entirely different approach at the start, which was to seal off its country from the rest of the world, in effect. That was its main piece of legislation.

Q85 **Ronnie Cowan:** Was it wrong to do that?

Sajid Javid: That is a matter for New Zealand to determine. I think that would not have been at all practicable or feasible for the United Kingdom on many levels. I do not think that the New Zealand experience is comparable to the UK.

Chair: We are here to scrutinise the UK Government, Mr Cowan.

Ronnie Cowan: Apparently.

Q86 **John McDonnell:** I want to talk about data and thresholds. Which

Department owns all the data gathered due to the pandemic response?

Sajid Javid: When you say, "all the data", that is pretty broad. I would not think it is a single Department that owns all the data. If it is health-related data, my Department would be the obvious home for that—for example, around vaccinations, case numbers, infections and that type of information. If it is data on how many appearances in court were held remotely, clearly that would be the MOJ, and the Home Office might have information on law enforcement issues. I don't think it would be a single Department.

Q87 **John McDonnell:** Is there a mechanism for the co-ordination of the examination of that data, and how is that fed into decision making relating to whether elements of the Act expire or are extended? Try to explain the process of how there is co-ordination of data within the Government itself.

Sajid Javid: I am happy to. Depending on the provision that the Government might be looking at, a Department would own that provision. For provisions around the registration of clinicians, clearly my Department might own them; the MOJ might own provisions around courts. Those Departments would clearly have a view on whether they need to continue the provision or not, but the eventual decision would be a cross-Government decision. Throughout the pandemic, and certainly in the time that I have been involved over the last eight months, that has been co-ordinated through a committee chaired by the Cabinet Office, called Covid-O, which meets on a regular basis with all the relevant Ministers. My Department would almost always be represented, because it is ultimately related to the pandemic, but other Departments would be involved—most of the large Departments, and certainly those that have an interest in the Coronavirus Act, which is almost every Department. There would be a paper prepared by the Cabinet Office, with input from the lead Department and any other Departments. Any advice from, let's say, the UK Health Security Agency, or any other relevant advice would all be in a single paper. That would be presented as a single view of all the facts and data, and then the committee of Ministers would make the decision.

Q88 **John McDonnell:** That leads on to the issue of thresholds. This Committee has previously pushed the Government to set out the thresholds or triggers for certain policy decisions. Are any thresholds being used in justifying the Government's decision on whether to extend the Act itself? If so, what are they?

Sajid Javid: There is no individual single threshold or trigger. We look at a number of metrics and data. Even when we look at those metrics, I don't think there is any single threshold.

Let me explain that. As was said at the start, and as the Prime Minister set out in his statement in Parliament earlier this week when setting out our "Living with COVID-19" plan, clearly many of the legal restrictions are moving and we are in the process of living with covid. In making those decisions, clearly a lot of the data is considered, but it is a combination of data, so it will be around infection numbers, primarily from the ONS weekly survey but also from other surveys, such as what is called the

Vivaldi survey and the SIREN survey. It would be case data, the number of positive registered cases; that will come from UKSA. It will be data from the NHS on the trends in hospitalisations and the regional differences in hospitalisations. There will also be data from the NHS on staff absences, the use of antivirals and other treatments, and how many people were kept out of hospital. So a number of sources of data are taken into account collectively. For a number of weeks, all the data I have just referred to have thankfully been heading in what you might broadly say is the right direction. That is crucial. All that data is then considered not just directly by Government Ministers but, very importantly, by the Government's advisors, our scientists, the chief medical officer and others, and they will give their advice based on that data.

Another thing that I think is directly related to your question as to why there is no particular threshold or number is the context. For example, we know omicron is much more infectious than delta, so you might expect a much higher level of infections, as the ONS data is showing, but we also know that intrinsically it is less severe, especially if someone has been boosted. We would look at the realised severity in the population based on the number of people who have been boosted, especially more vulnerable groups—93% of the over-50s have been boosted, so we would take that into account—and who have more tolerance for infections, given the knowledge that more people are boosted.

I need to highlight that, because when I first came into this job there was no omicron. There was delta, which was considered more severe but less infectious. Obviously, our campaign for vaccinations was still going and a lot of people hadn't even had their second vaccination, so you had a lower tolerance level. If the Government had set a number—I am not necessarily saying this what you were suggesting—and if a threshold meant that if infections go to this level or that level then the Government have to do x and y, then you would have had to keep that under constant review.

Q89 **John McDonnell:** I completely agree and that is completely rational, but a point you have made in the past in Committees is about openness and transparency of decision making. That is why in the past the Committee has pressed for the fullest publication of the data and the fullest public display of Government thinking around the decisions that are being taken. Some of that will be around thresholds at certain levels, infection rates, severity within ICUs, etc.

Although we accept that that will be a changing feast, it must come into Government thinking when you sit around that sub-committee and the data is being fed in; there must be some element of threshold decision making, admittedly changing over time because of the different variants. There must be some level of decision making based on thresholds, no matter how changeable. Wouldn't it be better to be completely open and transparent about those thresholds that will determine decision making?

Sajid Javid: As you say, that threshold is not fixed in any point in time; it has to be under review in the context of that time. In the Government's thinking, there will be what I guess you would call thresholds that you

want to try to target and reach. For example, I referred to boosters; for all the reasons that I think everyone now understands, they became a huge focus over December and early January. Internally, we set targets for the NHS vaccination programme about how quickly we wanted to get more people boosted and the ways we wanted to do that. Rightly, a lot of that was set out publicly because it was right to be transparent and to explain to the public how it might impact them. For example, I came to Parliament a number of times to talk about the vaccination programme, and when we accelerated the booster programme, I talked about why we had asked GPs to temporarily focus less on non-urgent work so they could spend more time boosting elderly people in care homes or people who were housebound. I think everyone understood why, but it was important that we were up front and clear with parliamentarians that this would have an impact on some of their constituents in way that we would have liked to avoid but was unavoidable. So there would have been targets and thresholds that we would have had in mind.

I can also give you the example of the NHS. Prior to omicron, the NHS had gone through the alpha wave and the delta wave and dealt brilliantly with the challenges it had faced. Through that experience, each individual trust would have seen what its peak of covid hospitalisations was in the past. It would have not been unreasonable for a hospital trust to learn from that experience and to look at omicron hospital admissions in relation to that peak and where they were, and to try to judge what they might be able to cope with on that basis. We are learning all the time from the pandemic, and we continue to do so, but it is important that when we look at data it is always in context and it is kept under review.

Q90 **John McDonnell:** I think the plea from the Committee is for openness and transparency around the decision-making process, so that when different elements of the Act are judged to be no longer relevant, that decision is based upon a determination of the data available. Also, in some instances where there is an ambition to stand down part of the Act, there should be clarity about the factors and thresholds that need to be considered to enable that to happen. Otherwise, there can be suspicions that other matters or political issues confronting the Prime Minister—or whoever—are more important than the objective reality of what is happening on the ground.

Sajid Javid: Yes. We must be as transparent as possible and publish as much data as we can. A lot of data was shared, and it increased over time; there was the dashboard data, the SAGE information and minutes, and the vaccination evaluations that we did. We were very quick to publish all that data, partly because we wanted to share it with parliamentarians, but also because we wanted to share it with the world—NHS data could help many other countries. One of the points that you make, and I respect it—it is a very fair point—is that, as we learn lessons from this, we must think about whether more data could have been released in a more structured and regular way. That is a very fair point.

Q91 **Chair:** The final tranche of questions from me—there may be supplementaries from colleagues—try to draw together some of the

strands of what we have been discussing. I wondered if you could envisage circumstances where the Civil Contingencies Act would be used during a pandemic?

Sajid Javid: The Civil Contingencies Act is there for a purpose; broadly speaking, it is right that we have such an Act. I think that it should only ever be used if there are really no legislative alternatives—I believe that was the logic given when it was passed by Parliament. As I explained earlier, in this case I do not think it would have been necessary or appropriate to use it. Your question was about any future serious public health risks. I would not rule it out—I don't think it would be sensible to rule it out.

Q92 **Chair:** On that theme, are there plans to revise emergency provisions in relevant legislation—regardless of what piece—to create a more standard set of scrutiny and accountability measures? As we now have a period for reflection and learning, if not quite the leisure, are there such plans?

Sajid Javid: There is definitely a desire and a plan to properly learn the lessons of the period of the last couple of years. That period is not over, as we know, but we must make sure that we learn the lessons. Through exactly what we are discussing today, and the scrutiny provided by this Committee and others, as well as the public inquiry, there is no doubt in my mind that there will be changes that will better prepare us for the future.

Q93 **Chair:** To play devil's advocate, what analysis has been done of whether any provisions due to expire at midnight on 24 March would be needed to respond to a new variant? How do the Government plan to deal with that, given that this legislation is due to expire? Will we be back to the same point we were at two years ago, and have to bring something forward with minimum scrutiny?

Sajid Javid: I think, thankfully, we have built huge and significant defences over the last two years. Those include continued vaccination, with an announcement this week for a second booster for certain cohorts of people; the treatments that we have today; the testing capabilities that we have today, including the ability to genomic sequence and understand future variants; and the surveillance programmes that we have today, which give us the ability to detect and rapidly respond. It is a completely different picture today compared to what we had before.

Q94 **Chair:** In a less dramatic sense, regarding the role of Parliament and the nature of the legislation underpinning it: are you simply saying you would react to events as you find them?

Sajid Javid: If your question is whether I envisage having to bring back some of the provisions we are retiring, then the answer is no. I do not envisage that for the reasons I gave.

Q95 **Chair:** Okay. It is our understanding, as has been touched on earlier, that the draft pandemic flu Bill existed and some measures formed the core of the Coronavirus Act. Hindsight is a wonderful thing in all this. How much stock emergency legislation is there sitting on that metaphorical shelf?

Sajid Javid: Clearly, before the pandemic, there was the draft flu Bill. Now, alongside that, we have this Bill, and the lessons are from this Bill. Through this debate and others, and as we learn more—we have not learnt all the lessons yet—it would make sense for the Government to try and consolidate all those lessons and maybe come up with another draft Bill to have in reserve for a future pandemic response. You could take into account all these lessons.

Q96 **Chair:** And in terms of concrete proposals, are there any such things? Others outside of this Committee and members of this Committee have called for a new Public Health Act, for example.

Sajid Javid: There are no current proposals for a new Public Health Act. It is worth pointing out that, as I understand it, the Public Health (Control of Disease) Act 1984 was a larger consolidation Act of many previous measures. I point that out just for the knowledge that it was not that Parliament at that time woke up and thought we needed to have these measures. Those kinds of ideas and measures on the statute books have been around for decades. I believe that in 2008 there was a substantive revision of the Act. If your question is whether there is a need for another substantive revision of the Act, that is not something the Government is currently working on, but I think it is a perfectly reasonable question to ask, given what the country has just been through.

Q97 **John McDonnell:** The key thing—I am not accusing you of this—is not to be complacent at the moment, because of the potential of a new variant or whatever. The point the Chair raised was: wouldn't it be better for us now, after having learnt the lessons of the implementation of the Coronavirus Act itself, to at least have a discussion about the potential of draft legislation to be on the shelf in case of a new variant or whatever happening in the future? The lessons that you, hopefully, learn from your own internal review, shared with Parliament, would enable us and this Committee in particular to be engaged in the discussion about a draft Bill that can then rest on the shelf. It could have an element of core features that could then be flexibly adapted to whatever new variant or crisis hits us at that stage, rather than having to simply re-engage, or even bringing down the old legislation without even having it amended in draft form.

Sajid Javid: I understand that, and the Government isn't working on such a draft Bill at this point, for the reasons that I have shared. On your question about whether that work should happen sometime soon so that there is a draft Bill that Parliament has already considered, I understand that. I guess the challenge would be that we just don't know what the next pandemic will look like. I already talked about how the Government had planned, for lots of sensible reasons, like most of the world, for an influenza-based pandemic, and coronavirus was very different. We know how it is transmitted. The fact that it can be asymptomatically transmitted made a huge difference. But what if the next one is a fungal infection and we have planned for a covid-19 type of infection? Or what if it is an influenza type of infection? You might then run the risk that what is put before Parliament is so in draft, so uncertain, that it does not serve much

purpose. That said, I am not ruling that out, but I want to set out that it is not so straightforward.

Chair: Thank you very much for your time this morning, Secretary of State. We are very pleased to have been able to welcome you to our Committee, away from the Health and Social Care Committee. If there is anything else you wish to furnish us with, please write. For the time being, thank you very much indeed.

Sajid Javid: Thank you very much, and I look forward to the next time.