

Letter 1-

**From:** Kevin Stewart MSP <[Kevin.Stewart.msp@parliament.scot](mailto:Kevin.Stewart.msp@parliament.scot)>

**Sent:** 15 February 2021 22:59

**To:** First Minister <[firstminister@gov.scot](mailto:firstminister@gov.scot)>

**Subject:** Public inquiry into the handling of the Covid-19 pandemic (Case Ref: KS6180)

Dear Nicola,

I have been contacted by about the promised public inquiry into the handling of the Covid - 19 pandemic.

My constituent has highlighted to me a number of concerns that they had about the treatment of a family member in a care home prior to the pandemic. They went on to raise concerns that some of the practices and culture they had seen may have had a bearing on how care homes responded to the pandemic.

My constituent has asked whether the public inquiry will be able to look at how pre - pandemic practices and work cultures may have affected the response to Covid -19, if the inquiry felt that were appropriate.

I would welcome any assurances that you could offer my constituent.

Regards,

Kevin

Kevin Stewart MSP  
Aberdeen Central

1 Pitstruan Place  
Aberdeen  
AB10 6PQ  
Tel: **[Redacted]**

[twitter.com/KevinStewartSNP](https://twitter.com/KevinStewartSNP)  
[facebook.com/KevinStewartSNP](https://facebook.com/KevinStewartSNP)

Letter 2 –

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 25 August 2021 02:09

**To:** First Minister <[firstminister@gov.scot](mailto:firstminister@gov.scot)>

**Subject:** Scotland public inquiry - covid Urgent

**Topic:**

Scotland is to hold its own public inquiry into the handling of the Covid pandemic by the end of the year, the Scottish government has confirmed.

Regarding the above quote can I ask why are you waiting until the end of the year?

1st concern:

My personal recent experience shows things are still going wrong leading to unnecessary infections within the elderly in the care sector.

My husband and I recently tested positive for covid his positive result was on the **[Redacted]**. I tested positive on the the **[Redacted]**.

When the track and trace team contacted me I explained I had been in contact with my elderly mother **[Redacted]** who is attended by carers daily on the **[Redacted]** yet they said they didn't need to go that far back.

This was when I told the agent on the phone I actually had the new symptoms. I had a extremely sore head from the same time as my husband showed symptoms but the caller was only interested in when my cough started.

These new more common symptoms are now being recored in sites like Zoe Covid Study were double vaccinated people are showing other illness other the main three.

I wasn't happy with this response I couldn't understand why they wouldn't want to check on an elderly person. I'm just glad I got my mum to take a test myself before the call happened.

Her test came back positive yet she would have been missed!! Surly now more education is needed to be provided to the public about double vaccinated symptoms being slightly different and this should be considered during these calls.

Headache  
Sneezing

2nd concern

I contacted her enablement team as soon as her results arrived. Her evening carer came fully suited with protective gear on an hour or so later to help put my mum to bed.

**[Redacted]**

Great I thought avoided further risks of spending the virus to other vulnerable people which track and trace missed.

Morning visit just basic PPE was worn. My mum didn't know to challenge them. So this carer then went onto other patients with the potential to pass on the infection and also put herself at risk.

I asked my mum to tell me if it happened again and to mention it on her next visit.

Lunch time visit fully suited great!. Said didn't know why the carer who attended in the morning didn't wear full PPE apologised and said she would report it.

Night time carer arrived again basis PPE mum stopped her coming in this time. The carer advised she was covering for someone who had called in sick and nobody told her no messages on her phone.

What happens to these patients who don't have family checking these rules in place are actually being actioned to help stop the virus spreading. I now believe my family probably got the infection from a carer contact due to these type of mistakes happening.

Again new Symptoms for double vaccinated being reviewed : sickness, nausea, diarrhoea which my mum had on the **[Redacted]** yet no concern was raised.

These symptoms are also now being recorded in sites like Zoe Covid Study for double vaccinated people other than just the main three.

Our experience is just so unacceptable 18 month after this all started. We kept our mum safe for 18 month then because she has multiple carers in her house that are not communicating or being communicated to they have possibly spread the virus to other vulnerable patients giving our family more reason to believe this is where our family outbreak all started from.

Please look at the noted points above as take the necessary actions, give feedback to ensure local care teams are providing safe care for their patients rather than wait for further reviews.

Track and trace to ask more probing questions re headaches sneezing, nausea for double vaccinated positive cases.

I recognise these carers are doing an amazing job sometimes a thankless job and are fatigued with what has happened. Many family's would be lost without their help and support but this doesn't mean we should not challenge their policy's and processes now when things are going wrong rather than wait on a review that won't come out until next year or later.

These are some of the most vulnerable people in our society and they deserve better now.

I look forward to your response.

**[Redacted]**

**[Redacted]**

Letter 3 –

**From:** Jamie Hepburn MSP <[Jamie.hepburn.msp@parliament.scot](mailto:Jamie.hepburn.msp@parliament.scot)>

**Sent:** 03 August 2021 17:06

**To:** Minister for Public Health, Women's Health & Sport <[MinisterPHWHS@gov.scot](mailto:MinisterPHWHS@gov.scot)>

**Subject:** Constituent Concern - Covid-19 Deaths Inquiry (Case Ref: CK/JH19445)

Dear Humza,

I have recently been contacted by my constituent regarding the Covid-19 public inquiry which has not yet began.

I am aware my constituent's mother caught Covid-19 whilst in hospital and sadly passed away. My constituent has raised concerns that despite family not being allowed to visit their mother, hospital staff must have brought the virus into hospital and passed this on to their mother.

My constituent has stated to me that they are a member of the Scotland Branch of Covid-19 *Bereaved Families for Justice UK* and support an inquiry into the handling of the Covid-19 pandemic. My constituent reminds me that parliament voted for an inquiry to be conducted into the handling of the Covid-19 pandemic in May 2020 and is concerned that this inquiry has not yet been started.

I would be grateful if you would investigate this matter as soon as possible and provide details on when the Scottish Government intend to conduct an inquiry and why this inquiry has not yet been started.

I look forward to your response in due course.

Yours,

Jamie Hepburn MSP  
Cumbernauld & Kilsyth  
Suite 1, Lennox House, Lennox Road, Cumbernauld, G67 1LL

**Please Note: My office in Seafar is now closed for the foreseeable future in line with government advice. I remain contactable directly by email at all times via [jamie.hepburn.msp@parliament.scot](mailto:jamie.hepburn.msp@parliament.scot).**

Letter 4 –

Mr Humza Yousaf MSP  
Cabinet Secretary for Health and Social Care  
Health and Social Care  
Scottish Government, St. Andrews House  
Regent Road  
Edinburgh  
EH1 3DG  
Our Ref: BS/CB5278  
12 August 2021

Dear Humza

**Subject – Public Inquiry Into Covid-19 Response**

I am writing on behalf of a constituent who recently contacted me expressing their frustration with the Scottish Government's lack of action in setting up a Public Inquiry into its Covid-19 response.

My constituent sadly lost a loved-one to Covid-19 and as bereaved family member, it pains them that they do not have the full answers to why their relatives died. My Constituent reports they have reached out to the Scottish Government to find answers, but are yet to receive a formal reply.

Please can you confirm when the Scottish Government plans to hold this Inquiry and what measures are being put in place to ensure this will occur at the nearest possible time.

Yours sincerely,  
Colin Beattie MSP  
Midlothian North & Musselburgh

Letter 5 –

**From:** [kirsten.oswald.mp@parliament.uk](mailto:kirsten.oswald.mp@parliament.uk) <[kirsten.oswald.mp@parliament.uk](mailto:kirsten.oswald.mp@parliament.uk)>  
**Sent:** 24 August 2021 17:12  
**To:** Cabinet Secretary for Health and Social Care <[CabSecHSC@gov.scot](mailto:CabSecHSC@gov.scot)>  
**Subject:** CV19 public inquiry/initial thoughts (Case Ref: KO9966)

Dear Cabinet Secretary

I have been contacted by my constituent, **[Redacted]**, in relation to the forthcoming inquiry into the Covid-19 pandemic.

**[Redacted]** has prepared a series of proposals for the conduct of the inquiry, which are as follows:

1. Inquiry should be set up to allow for continuation in the event of the Presiding Judge becoming indisposed; inquiry generally needs to adopt innovative and flexible approach to gathering evidence to avoid being bogged down by legal and procedural issues. However, cognisance of the impact of current investigations by Police Scotland/Crown Office; civil legal actions against individual care homes; complaints to Care Inspectorate etc need to be considered (e.g. at the time of writing, a Glasgow care home is facing legal action by CI to close; it is a dynamic sector with constant changes);
2. Whilst a Scottish judge should lead, there should be legal and other experts to observe (e.g. from UN Human Rights?) to ensure inquiry commands domestic and international credibility and respect? (Some care homes are ultimately owned by anonymous international finance groups);
3. Inquiry should issue interim/staged reports at regular intervals; these should be released without prior scrutiny by Scot Gov lawyers etc?
4. Witnesses from care sector especially elderly family carers should be given time priority at start of inquiry?
5. Failure to cooperate fully and supply evidence to the inquiry by any individual or group should be treated as "contempt" and dealt with accordingly; potential witnesses (esp. professionals/politicians) should not be allowed to indefinitely play the "unavailable due to early retirement on ill health grounds" ploy! Nor should any "confidential advice to Ministers non-disclosure" ploy be permitted?
6. Given that health and social care has been fully devolved from the outset, inquiry should consider the historical context of NHS, social care preparedness for the pandemic; Scot Gov relationship with nursing/care home providers etc; infection control in NHS/social care act pre-pandemic; lessons from Lord Clyde inquiry (Vale of Leven) etc?
7. Inquiry needs to strike correct balance between the "general and the particular". Too much of the former allows specific errors to be concealed; too much of the latter and the inquiry will become bogged down by details which don't help to inform what must be changed?

As **[Redacted]** mother died in a nursing home in Spring 2020 albeit the cause of death was not Covid 19, this is of particular importance to him.

I look forward to seeing the proposals for an inquiry when they are available in order that I can make these available to **[Redacted]**.

With all best wishes

Kirsten

Kirsten Oswald MP  
Member of Parliament for East Renfrewshire  
Telephone:0141 648 8822

**COVID-19 GUIDANCE:**

For the latest updates on coronavirus, please check [here](#).

Stay safe, protect others, save lives.

- Face coverings in crowded places
- Avoid crowded places
- Clean hands and surfaces regularly
- Two-metre social distancing from other people
- Self-isolate and book a test if you have COVID-19 symptoms.

The latest public health advice about COVID-19 can be found at [www.nhsinform.scot/coronavirus](http://www.nhsinform.scot/coronavirus)

Letter 6 –

From: **[Redacted]** <**[Redacted]**>  
Sent: 06 July 2021 21:48  
To: Scottish Ministers <Scottish\_Ministers@gov.scot>  
Subject: Public Inquiry First Minister

I read yesterday that the First Minister was of the opinion that a Scottish Public Inquiry into the lessons from the current covid epidemic was not a top priority, rather to contribute to the UK wide inquiry. I am of the opinion that it is necessary to hold a Scottish inquiry and to be decisive in doing so soon before memories fade, hurt recedes and office bearers resign/ retire/ disappear. Whilst I am sure there will be many commonalities in UK and Scottish Inquiries, the truth of the matter over the past 16 months or so, seems to have had the First Minister and other government ministers distancing themselves from just about every decision and action taken by the UK Government. The SNP Government cannot have it both ways and need to be brought to account, and to learn lessons for the future.

More likely, their view is that any direct or indirect apportionment of 'blame' will be softened and lightened by the wider geographical areas and governments involved. Moreover, whilst there has been some wise differences in approach and action by the SNP Govt, there has also been some rather specific wrong doings which need to be exposed. I hope you will proceed with a specific Scottish Inquiry and announce it soon without delay or procrastination.

Thanks

**[Redacted]**

**[Redacted]**

Sent from my iPad

Letter 7 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 13 July 2021 16:58  
To: First Minister <firstminister@gov.scot>; Central Enquiry Unit <CEU@gov.scot>; Leitch J (Jason)

<Jason.Leitch@gov.scot>

**Subject:** COVID 19 Management

**Importance:** High

Dear Nicola and Jason

First of all, a huge thank you for everything you've done over the last 18 months or so, it is so much appreciated by me and my family and also by friends and relatives south of the border who despair and management of the pandemic down there.

May I provide some context. My father **[Redacted]** hailed from **[Redacted]**, but had lived in **[Redacted]**. He caught COVID-19 in his care home down there and died on **[Redacted]**. He was **[Redacted]** years old and frail, but may have lived a bit longer, but for the gross negligence of the UK Government. At the very least I could have been with him when he died and attended his funeral, being there via Zoom was beyond distressing.

Since he died I have ascertained the circumstances and have been pursuing the UK Government and the former Secretary of State Matt Hancock in particular as being legally responsible. I appreciate that Hancock has been replaced by Javid, but it happened on his watch.

For your information, my case is as follows:

- Government is responsible for overseeing emergency planning, indeed they run a college for that purpose at Easingwold (under Cabinet Office I believe) and I have attended a course there.
- Pandemics occur (Spanish Flu, SARS, Ebola) and one never knows where they will occur, or what form they will take, but Government monitors and learns - so for example it will have been known that coronavirus is virulent, can affect older people disproportionately, isolation/PPE and other measures required. Emergency planning should have covered all of this and Operation Cygnet reinforced it.
- Countries like New Zealand appreciated all of this and clamped down on it quickly, hence their population and economy have not suffered to same extent.
- We kept borders open, allowed Liverpool match, Cheltenham races etc in knowledge that Covid-19 was around and spread easily and quickly plus there was an initial phase of herd immunity.
- CQC confirmed to me that instructions were to protect NHS, not care homes - a systemic failure, but also a conscious decision in full knowledge of impact that care homes would be left to fend for themselves.
- Under Section 1 (1) of The Corporate Manslaughter and Corporate Homicide Act 2007 - an organisation, in this case the Department of Health, can be guilty of an offence if the way in which its activities are managed or organised causes a person's death and amounts to a gross breach of a relevant duty of care owed by the organisation to the deceased (i.e. my father and many thousands of others).
- An organisation is guilty of an offence under the above Act if the way in which its activities are managed or organised by its senior management is a substantial element in the breach referred to in subsection 1.
- Section 2A of the Health and Social Care Act 2012 states that the Secretary of State must take such steps as the Secretary of State considers appropriate for the purpose of protecting the public in England from disease or other dangers to health. I take this as a duty of care under the 2007 Act referred to above.
- These steps may include research; microbiological and technical services; vaccination, immunisation or screening service; other services or facilities for the prevention, diagnosis or treatment of illness; training; information and advice; making available the services of any person or facilities.

- The Civil Contingencies Act 2004 definition of an emergency includes an event or situation which threatens serious damage to human welfare in a place in the UK. An emergency inside or outside the UK is covered provided it has consequences inside the UK.
- The COVID-19 pandemic is clearly such an emergency which I consider required the Secretary of State for Health, with his duty of care, to take steps required under the Health and Social Care Act to protect the public in England.
- The Government co-ordinates emergency planning taking account of global events, previous experience (e.g. Spanish Flu, SARS, Ebola) and periodic simulation exercises. This informs the response when something like COVID-19 occurs, so it was not an impossible or even unanticipated event. It would be interesting to know to what extent the UK Government involved Scottish Government in its emergency planning.
- On 28 April 2020 at the BBC hosted daily briefing the Secretary of State, Matt Hancock, stated, in response to a question from a Sky News journalist, that he was concerned in January 2020 at the potential impact of COVID-19 on the elderly in care homes. This is a matter of record.
- Although he had this concern in January 2020, he did not pass the information to care homes, nor offer guidance or necessary equipment. If [REDACTED] where my father lived had been informed in January and full PPE/guidance/testing made available, then my he would not have died from COVID-19.
- Because we have a system of cabinet government and collective responsibility, I consider that similar charges could be pursued against the Prime Minister and other relevant members of the Cabinet, but I have referred specifically to the Secretary of State for Health as he has a statutory duty of care.

My father's case of death by gross negligence manslaughter is still being considered by [Redacted] Constabulary and I have passed details of all communications on to the COVID Bereaved Families for Justice urging them to seek a prosecution as well as a public inquiry. I am grateful for your commitment to hold establish a Scottish Inquiry this year and for your virtual meeting with FfJ, we all appreciated it and wish it had been reciprocated in England.

We now have a situation where the UK Government is throwing all caution to the wind, despite the protests from the scientific community and Independent SAGE. It is terrifying and I am really frightened for my family in England. To my mind we have moved from gross negligence manslaughter to murder as Boris, Javid et al admit that there will be an increase in deaths, which would not happen if they remained cautious. So, they will knowingly create circumstances where more people will die who could otherwise have been protected.

This makes it more difficult for yourselves as your devolved powers are limited and the pressure is on you to follow the Westminster lead. I am so grateful for your words at today's briefing, where you made it abundantly clear you remain cautious as far as is within your gift. Please maintain his position and furthermore I wonder if it is possible for Scottish Government to instigate proceedings against UK Government for effectively forcing it to proceed on a basis that will be injurious to the population of Scotland. It is surely worth considering?

I would appreciate your thoughts on what can be done to rein in the madness and save lives.

Anyway, please keep doing what you're doing, do not bow to pressure, and be assured you have our absolute trust because you are motivated solely by the well being of the people of Scotland.

Very best wishes

[Redacted]

[Redacted]

**[Redacted]**

Letter 8 –

**From:** [Redacted] <[Redacted]>

**Sent:** 02 August 2021 17:13

**To:** Deputy First Minister and Cabinet Secretary for Covid Recovery <[DFMCSCR@gov.scot](mailto:DFMCSCR@gov.scot)>

**Subject:** FW: Query from the office of Collette Stevenson MSP. (Case Ref: CS473)

Dear Deputy First Minister and Cabinet Secretary for Covid Recovery,

Good afternoon, [Redacted] from Collette Stevenson's office here again, just a quick message asking if you could please ignore my previous email, (see below) no response is needed now but thanks so much for your time!

Many thanks,

**[Redacted]**

**[Redacted]**

**[Redacted]**

Collette Stevenson MSP

Email: [Redacted]

[@CStevensonSNP](https://www.facebook.com/CStevensonSNP)

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**From:** [Redacted] <[Redacted]>

**Sent:** 02 August 2021 12:33

**To:** Deputy First Minister and Cabinet Secretary for Covid Recovery <[DFMCSCR@gov.scot](mailto:DFMCSCR@gov.scot)>

**Subject:** Query from the office of Collette Stevenson MSP.

Dear Deputy First Minister and Cabinet Secretary for Covid Recovery,

Good afternoon, [Redacted] from Collette Stevenson MSPs office here, I hope this message finds you and your staff well.

I am writing to you on behalf of a constituent of Collette's who was very sadly bereaved by Covid-19 in the early stages of the pandemic, and who is a member of the Scotland Branch of Covid-19 Bereaved Families for Justice UK.

This lady would like to know if there are any plans to hold a Scottish public inquiry into the Covid-19 response.

I am aware that a Scottish Government Spokesperson has recently made the following statement:

"Following the UK Government's decision to follow us in committing to take forward a four nations full public inquiry, detailed work will be done on the terms of reference and timescale.

"When we have a greater sense of that remit, we will make a judgment as to whether the UK-wide inquiry covers all of the issues that need to be covered for Scotland or whether there is a need to

have a part of the process that looks at other issues.”

I wonder if you might please have a more recent update or any further information on this which might provide some reassurance to Collette’s constituent on this matter?

Many thanks for your time during this very busy period, and I look forward to hearing from you.

**[Redacted]**

**[Redacted]**

**[Redacted]**

Collette Stevenson MSP

Email: **[Redacted]**

[www.facebook.com/CStevensonSNP](http://www.facebook.com/CStevensonSNP)

@CStevensonSNP

Letter 9 –

Ms Nicola Sturgeon MSP

First Minister

Scottish Government,

Edinburgh

EH1 3DG

My ref: GP/BD12000

Dear Nicola,

The [Redacted] of the Scotland Branch of Covid-19 Bereaved Families for Justice UK is a constituent of mine. **[Redacted]** sadly lost her mother to Covid-19 on **[Redacted]**. I was pleased to learn that you took the time to meet with the Scotland Branch of Covid-19 Bereaved Families for Justice UK in March this year. As you know the group are looking for a Scotland specific Covid-19 statutory public inquiry to commence as soon as possible. Indeed it is hoped that details will be confirmed before the end of the Scottish Government’s first 100 days in office (on 14 August) following May’s election.

From media reports on 25 July it was positive to see the Scottish Government reaffirming the commitment to discuss the matter further with families shortly and that

the Scottish Government remains committed to a public inquiry that will begin work this year which will consider matters relating to Scotland’s handling of the pandemic.

The Scottish Government has been clear that a distinct Scottish inquiry may be required if the UK Government does not act swiftly and in an appropriate manner to secure a pan UK public inquiry. I would request as much clarity over the timescale and terms of reference as possible for a distinct Scottish Inquiry should one be established. I would also ask, should a UK wide public inquiry ensue, how can we ensure that Scottish specific matters will be scrutinised and investigated with appropriate rigour and focus?

My thanks for considering these matters.

Yours sincerely

Bob Doris MSP

Member of the Scottish Parliament for Glasgow Maryhill and Springburn constituency (SNP)

Powered by TCPDF (www.tcpdf.org)  
Office of Bob Doris  
e-mail: bob.doris.msp@parliament.scot  
Constituency Office, Maryhill Burgh Halls, 10-24 Gairbraid Avenue, Glasgow G20  
8YE  
Phone: 0141 946 7700

Letter 10 -

**From:** Joe FitzPatrick MSP <[joe.fitzpatrick.msp@parliament.scot](mailto:joe.fitzpatrick.msp@parliament.scot)>  
**Sent:** 20 August 2021 13:54  
**To:** Cabinet Secretary for Health and Social Care <[CabSecHSC@gov.scot](mailto:CabSecHSC@gov.scot)>  
**Subject:** Constituent Request (Case Ref: JO0495)

Good afternoon Humza,

**[Redacted]**

I have been contacted by the abovementioned constituent regarding the Covid-19 Public Inquiry. I have copied his original correspondence below for your consideration.

Dear Mr. FitzPatrick,

*I read today that the Scottish Government is to hold talks with the families of those who died with coronavirus to discuss a future public inquiry (<https://www.bbc.co.uk/news/uk-scotland-58234070> <https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.bbc.co.uk%2Fnews%2Fuk-scotland-58234070&data=04%7C01%7>)*

*Do you think this process should include families who lost loved ones during the pandemic, who were severely adversely affected by the wider consequences of the pandemic, even when death was not due to a coronavirus infection?*

*My mother died **[Redacted]** from cancer. She had fought for several years and until early last year was in remission. Scheduled scans were cancelled due to the pandemic so she and the rest of my family were taken completely by surprise when she experienced a rapid onset of severe symptoms.*

*Besides the cancelled scans, other elements of her care were not unaffected by pandemic control measures.*

**[Redacted]**

*But we missed out on her last few months of good health because of the pandemic restrictions; she did not get to spend time with her youngest granddaughter, my first daughter, because of them; and we were not able to be as close as we would have been in normal circumstances.*

*The article I linked mentioned that the government would meet with representatives of an organisation called the "Covid-19 Bereaved Families for Justice" (<https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.covidfamiliesforjustice.org%2F&data=04%7C01%7CJoe.Fitzpatrick.msp%40parliament.scot%7Cee946c289b0c41f5354108d96175b1b5%7Cd603c99cfd4292926800db0d0cf081%7C1%7C1%7C6376479803896889980%7CUnknown%7CTWFpbGZsb3d8eyJWljiMC4wLjAwMDAiLCJQIjoiV2luMzI6LiLCJBTiI6IjE6IjE6IiwiaW50IjoiV2luMzI6LiLCJXVC16Mn0%3D%7C3000&sdata=jG6eyViI2%2FmanQedeZIT%2FdwHx8pEuHbUjmf50lu7EZc%3D&reserved=0>). This organisation says on their website that they are for, "all family members of those lost to Covid-19". I do not fit in this category and I would not be surprised if some of the views of people in my situation may not be reflected in this organisation's agenda. Therefore, I ask if you would make the case that families like mine should be part of this discussion.*

*Yours sincerely,*

**[Redacted]**

Can you please let me know if there is any consideration being given to families such as **[Redacted]** in the upcoming inquiry?

Thank you,

**Joe FitzPatrick MSP (Dundee City West Constituency)**

a: 37 Dock Street, Dundee, DD1 3DR

t: 01382 843244

w: joe.fitzpatrick.scot

Letter 11 –

From: **[Redacted]** <**[Redacted]**>

Sent: 27 February 2021 14:54

To: Leitch J (Jason) <[Jason.Leitch@gov.scot](mailto:Jason.Leitch@gov.scot)>

Subject: Time For The Right Choices

Dear Professor Leitch

I am writing to you as an ordinary member of the public trying to cope with what we are all going through.

Almost a year ago you came into our homes as part of the daily COVID updates. I am sure that many Scots thought here is someone who talks simply and clearly and gives us confidence about what is happening.

But I suspect none of us thought that a year later you would still be at the heart of a process of advising the Scottish government on the measures to be taken that affect every aspect of our lives.

I understand that there will at some point be a public inquiry into the handling of the response to the pandemic, both what went wrong and what has been done well.

Putting aside the amazing work of health care workers, for me two things were done well - the work that Scottish Enterprise undertook with business to produce PPE, and the development and procurement of vaccines, although this was largely a Westminster government success.

There have been many things that have gone wrong but the two that stand out for me, my friends and my colleagues are the treatment of the elderly (both in care homes and those living in their own homes) and the specific restrictions that have been put in place to control the spread of the virus.

The elderly have been treated appallingly in my opinion, sacrificed on the altar of 'children come first'. From the outset, you and others have told us that the virus is a greater threat to the elderly and the vulnerable. Yet the elderly in care homes have been badly let down - through poor testing, allowing infected transient staff to move from one care-home to another, and the shameful practice of sending people from hospital to care homes without a Covid test, many of whom were infected. In addition to this, the rest of the elderly have effectively been prisoners in their own homes, with little or no interaction with their loved ones.

Regarding the spread of the virus we were told from the outset that this is transmitted by droplets and that these can land on surfaces that we touch and

therefore we need to wash our hands regularly, not touch our face and keep two meters apart. But until very recently the wearing of face coverings was dismissed as unnecessary because 'it wouldn't protect the wearer and may give them a false sense of confidence'. Nothing was said about the absolutely obvious benefits face-coverings would have in restricting the droplets from landing on surfaces in the first place, let alone the direct infection from person to person.

Even now it is not going to be compulsory for people to wear face masks in all indoor public settings - schools and universities being an example. This is a huge mistake.

This week a member of the Scottish government's own advisory committee has debunked the myth that 'Scotland almost eliminated the virus last summer' when he confirmed not only that this was patently not true but also that the rise in cases in late summer was not caused by returning international travellers but by internal movements within the UK. The reality was the 'super-spreader' movement of students back to universities and to some extent to school were the major cause. That this was a completely foreseeable outcome makes it all the more depressing.

Now we are at the point of moving to the next stage. You and your colleagues have a major opportunity to get this stage right and take the correct measures. This is a really important time for the mental health of all of us. The FM clearly has her mind elsewhere as her shameful performance at the COVID update on 24 February demonstrated - please help the government get it right this time.

For our elderly, every week confined to their home without being able to see their loved ones is a week that they will never get back.

This needs to stop now. By mid-April everyone over the age of 50 and all vulnerable adults will have been vaccinated. There is absolutely no reason whatsoever they should remain 'locked-up' for a further six weeks or more after that without their loved ones being allowed in their house, as the current plan would involve given the planned move to Tier three.

You and the government have constantly stated that you will treat the Scottish people like adults - please start doing so. We will not put our loved ones at risk after the year we have had to go through and if you are worried about rule-breakers/those who are less careful, deal with them - don't restrict everyone else for 'a day more than necessary' as the FM keeps saying.

If you have read this, thank you for your time and for your efforts over the past year.

Regards  
**[Redacted]**

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Humza Yousaf  
Health Secretary  
E mail correspondence

2nd June 2021

ZA17705/SF

Dear Cab Sec Yousaf,

I have been contacted by my constituent **[Redacted]**, regarding the announcement of the covid inquiry.

Due to the nature of the pandemic and the catastrophic effects it has had on the nation as a whole **[Redacted]** would like reassurance that the findings of the Governments internal review will be made public, ensuring lessons have been learned and recommendations implemented to ensure the saving of lives is paramount in the future.

**[Redacted]** would also like reassurance that the Governments internal review into the handling of Covid19 will commence immediately and not be postponed until next year.

Yours sincerely

  
**Dr Lisa Cameron MP**  
SNP Spokesperson on Mental Health  
Chair All Party Parliamentary Group Disability

Letter 13 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 12:38

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Scope of Covid-19 inquiry - Management of non Covid related health issues

Good afternoon,

I am getting in touch to ask that the scope of the up coming public inquiry into the management of the Covid-19 pandemic includes an investigation as to whether people on the NHSiS waiting list for the entire duration of the pandemic have been given enough support with their deteriorating health due to lack of availability of non Covid related health care during the pandemic.

Also, why the NHSiS did not have any slack in its capacity in March 20 in order to deal with an epidemic and other health issues of the population it serves concurrently.

I would also like to see investigation into whether streaming of Covid and non Covid related health issues could have been managed better after the pandemic came along in order that more of those with non Covid related health issues could have had access to the treatment they need.

I hope this inquiry can provide some answers to the above questions in order that those who have had to sit out the entire pandemic waiting for the treatment they need is not a situation which will arise next time a new virus emerges.

Regards,  
[Redacted]

[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]

Letter 14 –

**From:** [Redacted] <[Redacted]>  
**Sent:** 24 August 2021 12:22  
**To:** COVID-19 Public Inquiry Set-Up Team  
<COVID19publicinquirysetupteam@gov.scot>  
**Subject:** Taking part

Hello

How do I take part?

Letter 15 –

**From:** [Redacted] <[Redacted]>  
**Sent:** 24 August 2021 13:20  
**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
**Subject:** Public Enquiry

Hello,

In my opinion the care home tragedy should be its own separate item. It should be looked at why the Scottish NHS and Government decided that the lives of elderly patients, along with the lives of care home staff and their families, were deemed irrelevant or an acceptable loss. Who authorised sending elderly patients back into care homes when they knew they had covid? I assume that person or persons will be tried for manslaughter immediately.

Also, why did the government deem retail workers in supermarkets and corner shops and pharmacies also irrelevant and an acceptable loss? Them receiving PPE was an afterthought. They have suffered 18 months of abuse with no backup from either yourselves or the police. They were forced to work when everyone else was told to stay home simply because they're on minimum wage and poor so they can be bullied. Where are their pay rises? Has there been an increase in their holiday allowance? No? Why? Because the government and the wealthy portion of the public view them and their families as slaves that are expendable.

Again, the dismal and dispicable treatment of those staff members working in retail at the hands of everybody during the the pandemic should also be its own separate item.

As they clearly also view care home staff and their families.

And the NHS and government also clearly view the elderly that are most in need of medical care and help as a drain on funds and a nuisance.

What this public enquiry should show is that the SNP care less about the poor and elderly than the Conservative party do. Congratulations.

Regards,  
**[Redacted]**

[Sent from Yahoo Mail on Android](#)

Letter 16 -

From: **[Redacted]** <**[Redacted]**>

Sent: 24 August 2021 13:23

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: Comment on the proposed aims of the Public Inquiry relating to Covid 19 in Scotland

The financial relationship between the UK government and the Scottish government should be a more explicit aim. Monies were received by the Scottish government from central government, but there was a lack of clarity and transparency from the Scottish government as to how much was received, how these monies were distributed and to whom and when.

It is surely an important aspect of the inquiry, not only to establish whether this distribution was equitable, timely and at appropriate levels, but also, given the current focus of the Scottish government on independence, whether this degree of financial support could be generated solely from resources within Scotland.

**[Redacted]**

Letter 17 -

From: **[Redacted]** <**[Redacted]**>

Sent: 24 August 2021 13:23

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: Need for widest possible scrutiny

I do hope that this inquiry will not be focused solely on the actions of the Scottish Government & institution's like NHS etc.

If we are genuinely to learn lessons for the future then the role of opposition politicians and Scotland's press - who have collectively spent the entirety of the pandemic seeking to undermine public health measures in the cause of promoting unionist party & constitutional politics at the cost of lives - must also be scrutinised.

The appalling attempt by Labour and Tories to bully BBC into ending broadcasting of vital public health updates and succeeding in largely turning what should be a purely non-political information update into a political clown show is a prime example. Only in Scotland does the BBC break away from the briefing midway to allow opposition politicians to trash and undermine the public health announcements. Since the complaints from Tories & Labour, the airing of briefings on the BBC Scotland channel has also become patchy with many not broadcast at all. Such attempts to undermine the dissemination to the public of vital info **MUST** be as much a part of the inquiry's scrutiny or we will continue to see lives lost in future.

Letter 18 -

**From:** [Redacted] <[Redacted]>

**Sent:** 24 August 2021 13:30

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Public inquiry

I agree with the four main principles but must get equal consideration. For me covid became the NHS priority and yes little was known about it but we are now over 18 months in. I was also concerned that it was the pressure on nhs was main driver of lockdown measures and again some of this was the organisation declining and not being fit for purpose most years without throwing in a pandemic.

I was also concerned by only hearing one viewpoint not only in government information sharing but across the wider media and scare tactics being used to enforce compliance. Not enough debate before major decisions were taken and this act quickly did not provide better results over time than other areas of the UK that acted later. Economic impact is also huge 36 billion deficit and more thought needed on what we can do to keep businesses operating safely than closing down altogether being the only answer.

Thanks [Redacted]

Sent from Samsung Mobile on O2

Letter 19 –

**From:** [Redacted] <[Redacted]>

**Sent:** 24 August 2021 13:33

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Hospital acquired Covid

I would like the inquiry to cover not just nursing homes but Hospital acquired COVID-19.

My husband was put at risk twice. The first time he ended up being stuck in hospital for six weeks, isolated but didn't catch Covid. It wrecked his life.

The second time was a few weeks later. Once again put into a multi occupancy room although he had been shielding since March 2020.

He was infected in hospital and died **[Redacted]**.

Kind regards

**[Redacted]**

Letter 20 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 14:04

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Covid Pandemic suggestions for Scottish enquiry.

I welcome the opportunity to suggest some questions to the enquiry.

1. Why do we still allow health workers to travel to and from work in uniform! This must pose a massive risk of virus transfer not only in Covid times but in general times also. Uniform used to be washed and returned at work thus never worn off site. Should this routine be brought back and it made an offence to wear it out of the work environment.

2. Testing in schools has been very poorly managed and thus self schooling and cancelled examinations have badly affected all our children.

3. Stock piling of PPE was none existent. Is this being addressed going forward?

4. I would like to see Health Minister Jeans Freeman and Education Minister John Swinney face the enquiry and answer for their poor performance during the Pandemic.

Kind regards

**[Redacted]**

Letter 21 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 14:37

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Covid enquiry

I would like to have discussion on why we did not tackle this as an island.

I found the varying regulations difficult as I travel between England, Scotland & NI regularly.

Some of the guidance like not going to Manchester despite Dundee being higher was really confusing.

To me it would have made more sense to secure the island as a whole and have a single set of guidelines. I wonder if this generated addition cost as well as confusion.

I would also like to understand why we did not have a single vaccine function with consistent paperwork. Again, I can only imagine this introduced extra cost for little benefit.

Finally on comms - I feel this merits a section in discussion as we had Scottish ministers broadcasting misleading guidance later debunked in press. We had varying levels vs communicated in advance (level minus 0??)

Thx **[Redacted]**

Letter 22 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 14:44

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Public inquiry thesis

Hi there,

I am enormously pleased to see that you will be setting up an inquiry with a human rights based approach. This is so important.

I attach a master's thesis I produced last year on taking a human rights approach to public inquiries (looking at the Grenfell Tower Inquiry) in case it is of any interest. I am a **[Redacted]**.

Good luck with it and I only hope a similar approach is adopted by the UK government.

Kind regards

**[Redacted]**

Letter 23 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 14:54

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Issues for consideration.

Sirs

I would be grateful if consideration could be given to including the role of misinformation on social media and in the mainstream media during the pandemic.

While I believe in a strong independent press that is able to hold government to account, I have felt for some time that some parts of the media were more intent on undermining the Public Health message for political purposes than they were on reporting these messages objectively.

**[Redacted]**  
**[Redacted]**

Sent from my iPad

Letter 24 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 15:31

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** **[Redacted]**

Dear sir/madam further to your enquiry my **[Redacted]** was admitted to **[Redacted]** hospital not feeling well, he was there for 4 hours when the hospital informed us that he had fallen and broke his **[Redacted]**

he was transferred to **[Redacted]** hospital to get his **[Redacted]** that went well ,7days later the hospital stated he had fallen again breaking his **[Redacted]** further after getting that fixed they reported that my **[Redacted]** had caught covid in hospital resulting in his death my **[Redacted]** name was **[Redacted]** this is a email to let you know that my **[Redacted]** died due to covid in hospital and to assist in the enquiry into covid deaths thank you contact number **[Redacted]**

**[Redacted]**

Letter 25 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 15:31

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** CV19 public inquiry/initial thoughts

1. Inquiry should be set up to allow for continuation in the event of the Presiding Judge becoming indisposed; inquiry generally needs to adopt innovative and flexible approach to gathering evidence to avoid being bogged down by legal and procedural issues? However, cognisance of the impact of current investigations by Police Scotland/Crown Office; civil legal actions against individual care homes; complaints to Care Inspectorate etc need to be considered (e.g. at the time of writing, a Glasgow care home is facing legal action by CI to close; it is a dynamic sector with constant changes); 2. Whilst a Scottish judge should lead, there should be legal and other experts to observe (e.g. from UN Human Rights?) to ensure inquiry commands domestic and international credibility and respect? (Some care homes are ultimately owned by anonymous international finance groups); 3. Inquiry should issue interim/staged reports at regular intervals; these should be released without prior scrutiny by Scot Gov lawyers etc?

4. Witnesses from care sector especially elderly family carers should be given time priority at start of inquiry?
5. Failure to cooperate fully and supply evidence to the inquiry by any individual or group should be treated as "contempt" and dealt with accordingly; potential witnesses (esp. professionals/politicians) should not be allowed to indefinitely play the "unavailable due to early retirement on ill health grounds" ploy! Nor should any "confidential advice to Ministers non-disclosure" ploy be permitted?
6. Given that health and social care has been fully devolved from the outset, inquiry should consider the historical context of NHS, social care preparedness for the pandemic; Scot Gov relationship with nursing/care home providers etc; infection control in NHS/social care act pre-pandemic; lessons from Lord Clyde inquiry (Vale of Leven) etc?
7. Inquiry needs to strike correct balance between the "general and the particular" . Too much of the former allows specific errors to be concealed; too much of the latter and the inquiry will become bogged down by details which don't help to inform what must be changed?

I trust these comments are of some use. ([Redacted] died in a nursing home in [Redacted] albeit cause of death was not Covid 19. I do not have any specific evidence for the inquiry that is not already in the public domain/consciousness; the common themes should emerge naturally from the evidence that will be submitted by all and sundry!). I do not envy any one involved with steering and supporting this humongous task, which will hopefully be concluded within my lifetime and that of the majority off those mostaffected!

[Redacted]  
[Redacted]

Letter 26 -

From: [Redacted] <[Redacted]>  
Sent: 24 August 2021 15:41  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: Care homes

Good afternoon

I am a GP and one of the most obvious difficulties in the first few months was that care home staff had little or no training or support concerning PPE and infection control. I felt really sorry for them.. they were terrified to go to work and traumatised at the rate their residents died. I hope that this is something the enquiry will look at.

Also.... We had a direct instruction at the start not to admit residents from nursing homes/care homes to hospital. I don't think this is public knowledge.

We all had to learn on the hoof, it was a terrible time for all involved.

[Redacted]

Sent from my iPhone

Letter 27 -

From: **[Redacted]** <**[Redacted]**>

Sent: 24 August 2021 15:53

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: The real lesson of Covid19

Ok you want to know what needs sorting from this pandemic?

As a scientist and with my smattering of medical knowledge that is simple.

The main take from what has happened is this.

We can no more stop at present the evolution and spread of a novel pathogen be it microbial or indeed viral than we could 100 years ago.

That is simply leaving the fate of our civilization to the loaded revolver of the next pandemic in a future game of Russian roulette. You see even in the family of Betacoronaviridae (order Nidovirales) you see a wide variation in mortality of a population once infected. IF WE CANNOT STOP a pussycat of an infection such as this then it is now only a matter of time before the pandemic that has the >9% mortality rate arrives. I always said that 10 percent is an important threshold in mortality rates once you exceed that then several things happen.... You see a breakdown in the means to keep technology and industry running (workers hide and don't go to work) , medical staff will be fearful to treat those afflicted, your just in time means of disposal of human remains breakdown so your in to mass burial and cremation, the highest technology is the first to go, it's too reliant on long and complex chains of supply, vehicles are vulnerable too as they are totally reliant on complex electronics so wouldn't be robust against supply chain failures... this knocks onto the very structure of society from delivery of vital supplies such as food to delivery of raw materials for other manufacturing chains. I could go on infinitum I'm afraid a more deadly pandemic has the potential to cause exponential issues to us and our way of life.

So any inquiry has to work out how to make sure we stop an explosive outbreak occurring again ... lag log steady simply is leaving the gate of humankind to the genetics of chance itself.

We are an island we can stop these things it really depends upon how hard we come down on any future outbreaks

Sent from my iPhone

Letter 28 -

From: **[Redacted]** <**[Redacted]**>

Sent: 24 August 2021 16:31

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: Covid Inquiry Feedback

The following seem important

Question 1 - Why were persons known to be infected, and not known to be uninfected, moved into care homes?

Question 2 - Was the unfounded perception created by the government of a better response in Scotland harmful?

Question 3 - Did separate Scottish messaging cause confusion?

Question 4 - Allowing for the increased vulnerabilities of the minorities, the role of a major hub airport in exacerbating the crisis, and lower population density in Scotland, how do we best account for Scotland's high Covid death rate?

Question 5 - Given that insulin resistance, obesity and physical inactivity strongly correlate with worse outcomes, has the Scottish Governments approach to public health - both since 2007 and during the pandemic itself - been appropriate?

Yours

**[Redacted]**  
**[Redacted]**

Sent from my iPhone

Letter 29 –

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 17:01

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** covid enquiry

hello,

i would like the enquiry to look at the following point

1, was UN- Convention Article 11 of the right of persons with disabilities not taken in to account, international law

as a person with mental health disabilities, I received no help from the state throughout the pandemic and was left to get through it on my own.. the state choose to prioritise people who were thought to be covid vulnerable, while people with disabilities were forgotten.

2, why was people with mental health issues removed from HSCP Psychiatry and Psychology clinics, at a time when people with pre existing mental health conditions, got worse, with no support put in place for them.

3, why was services not given extra money to extend services past the 6 month timeframe, so that people could get help throughout the pandemic, that has now lasted almost 18 months, and is not yet over

i hope that these issues can be looked at by the inquiry

regards

**[Redacted]**

Letter 30 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 17:27

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Public inquiry

1: Why are deaths counted 28 days within a positive test. You either died from covid or you didn't. Nor should have it been counted as cause of death when it was mentioned on death certificate, not primary cause.

2: PCR test, when will the government admit they are not fit for purpose & have created this hysteria of cases which is based on inaccurate figures.

3: Vaccines as you refer to them. People where not fully made aware about the conditions of the emergency license, that they were taking part in a clinical trial which doesn't end until 2023. Doesn't meet the criteria of a vaccine and is infact gene therapy.

4: Vaccine deaths & injuries, as this is an experimental treatment I feel the First Minister was remiss by not informing the public when adverse effects & deaths started to mount up. Every covid death was a tragedy to her but every vaccine death a casualty of war.

5: Vaccine passports, since the vaccine neither stops you from catching or spreading coronavirus & as many double jabbed people end up in hospital as non vaccinated, the only reason you would need them is to coerce people to have a vaccine, to control freedoms and mine data.

6: Emergency coronavirus laws, as I write this it still hangs in the balance whether these will be extended or implemented as permanent. First Minister has no right to implement emergency measures permanently otherwise she could create any emergency to change whatever law she wants.

7: Finally masks, we all know masks have absolutely no business being mandatory, it even tells you on the box it does not stop coronavirus'. Just a measure of control & compliance, its not ebola, we don't have biohazard bins to put these masks in every day.

[Sent from Sky Yahoo Mail on Android](#)

Letter 31 -

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 24 August 2021 17:30

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
**Subject:** Climate crisis

Hi there,

The climate crisis needs to be at the centre of all decisions, as decisions made today will affect humans for millennia. Therefore I hope the inquiry will spend time on the environmental impacts of the pandemic. There are wide-ranging lessons to be learned, such as the reduction of CO2 emissions due to home-working, and the dramatic increase of single-use plastics etc. Could this have been avoided?

Best wishes,  
**[Redacted]**

Letter 32 -

**From:** **[Redacted]** <**[Redacted]**>  
**Sent:** 24 August 2021 18:16  
**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
**Subject:** Public Enquiry

Like all the nations in the UK we were 8 weeks late in our serious response, around the world we watched and failed to act swiftly, many lives have been lost as a result of this delayed, nervous response.

The implementation of face coverings should have been mandated much sooner-in March, following those nations who've had respiratory illness outbreaks, and should remain a mandate for many months to come.

Subsequent controls were more measured in Scotland compared to the UK Gov and I believe we got this right, many lives have been lost by the hung ho approach in England.

Thank you for the opportunity to objectively comment, appreciated

Sent from my iPhone

Letter 33 -

**From:** **[Redacted]** <**[Redacted]**>  
**Sent:** 24 August 2021 18:50  
**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
**Subject:** Re Public Inquiry planning

Good day, I can't see any specific mention of the '4 Nations' approach which caused an enormous amount of confusion in respect of different rules, guidance and especially terminology implemented throughout the handling of the pandemic. Will this issue be addressed or left to the Government (UK) to include in the inquiry expected next Spring. Yours **[Redacted]**

Sent from my iPad

Letter 34 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 24 August 2021 19:16  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: Media misinformation/disinformation

The media must be held to account in that they regularly misinformed disinformed the public regularly and are still doing so now. Stopping briefings by the government and even now cutting short the few briefings we do get. Undermine Scotland's public health messaging led to confusion and basically the messaging not getting out to all of the public. Did this cost lives! Yes it did messaging kept from the Scottish public and replaced with uk government messaging which was different and contradictory Regards **[Redacted]**

Sent from my iPhone

Letter 35 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 24 August 2021 19:40  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: Suggestions for inquiry

To whom it may concern,

I suggest including the significance of effects of Scot Gov not having control of Scotlands borders. It is clear that UK gov's management of decisions relating to UK border control was ineffective and their 'one size fits all' approach was not granular enough to ensure control.

**[Redacted]**  
**[Redacted]**

Sent from my iPhone

Letter 36 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 24 August 2021 20:08  
To: COVID-19 Public Inquiry Set-Up Team <COVID-

19publicinquirysetupteam@gov.scot>  
Subject: COVID-19 inquiry

Can you please ensure that the inquiry allows evidence to support obtaining answers to the following questions;

1. What information or advice was available at the time from global sources to inform the Scottish Government (SG) about the risks of moving the elderly out of hospitals and into care homes?
2. What information was used to make the decision to move the elderly from hospitals to care homes and who participated in this decision?
3. What steps did the SG take to ensure that care homes had the right equipment when residents arrived from hospitals into care homes?
4. What covid safety guidance was communicated from the SG to care homes and on what date(s) and how was this communicated?
5. What steps did the SG take to ensure this guidance was understood by care homes?
6. What steps did the SG take to ensure that care homes were following the guidance and how often?
7. SG has admitted that mistakes were made. Why were these mistakes made and could they have been avoided or mitigated using the available medical advice globally at the time?
8. A total of 46% of all Scottish covid deaths happened in care homes, compared to 28% in England & Wales. Why was there such a significant difference?

Regards

**[Redacted]**

Sent from my iPad

Letter 37 –

From: **[Redacted]** <**[Redacted]**>

Sent: 24 August 2021 20:56

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: Participation?

Hello

Please could you explain how we can tell our stories from the early days of the pandemic? Is it simply just to write to this email address with the information?

Many thanks  
[Redacted]

Sent from my iPhone

Letter

Letter 38 -

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 08:42

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Scope of Covid -19 inquiry - Closure of public toilets during lockdown

Good Morning,

I am getting in touch to ask that the scope of the up coming public inquiry into the management of the Covid pandemic includes an investigation into whether it was necessary to close all public toilets during lockdown and why there was such difficulty getting many public toilets reopened after it was deemed that they could be as closed public toilets caused a lot of harm in rural areas and to people who have non infectious medical problems which require frequent use of a toilet.

Regards,  
[Redacted]

[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]

Letter 39 –

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 08:58

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** BBC, print media and opposition politicians

The actions of the BBC and other broadcasters as well as the print media need to be examined as part of the COVID inquiry.

They deliberately undermined public health and politicised the COVID response.

The opposition politicians did the same and their actions need inquiry.

Lives were lost due to this.

Yours sincerely

[Redacted]

Sent from my iPad

Letter 40 –

**From:** [Redacted] <[Redacted]>

**Sent:** 24 August 2021 12:53

**To:** Central Enquiry Unit <[CEU@gov.scot](mailto:CEU@gov.scot)>

**Subject:** Enquiry

I would like to be involved in the coronavirus inquiry. My beautiful mum died [Redacted] from mouth cancer. She was [Redacted] and had none of the contributing factors associated with mouth cancer. She had a delay in diagnosis due to the pandemic. Dentists weren't working the criteria for seeing a dental practitioner were strict she didn't fit into any of the criteria, GPs were seeing emergency only. [Redacted]

She was an indirect victim of covid. She didn't die of it but it contributed to her death. Scotland has the worst rate of mouth cancer in the whole of the UK with numbers above average

Why were no provisions for this statistic put in place?

How many people have subsequently been failed with an early diagnosis?

I want to share my mum's story. I want the first minister to look at cancer rates in Scotland pre and post pandemic and the differences in people accessing treatment.

I look forward to your response

Kind regards

[Redacted]

Letter 41 -

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 09:31

**To:** COVID-19 Public Inquiry Set-Up Team <[COVID-19publicinquirysetupteam@gov.scot](mailto:COVID-19publicinquirysetupteam@gov.scot)>

**Cc:** covidfamiliesforjusticeuk@gmail.com

**Subject:** COVID-19 Inquiry for Scotland - [Redacted]

**FAO: COVID-19 Inquiry for Scotland – [Redacted]**

Dear Sirs,

**RE: [Redacted]**

I write with regard to the above and the public inquiry into the handling of the Covid-19 pandemic in Scotland.

On Sunday ([Redacted]) [Redacted] ([Redacted]) was admitted to hospital due to a sudden decline in health on admission to [Redacted] he was given a Covid-19 test, which unfortunately proved to be positive.

**[Redacted]** was immediately then transferred to **[Redacted]** to the Covid-19 ward and subsequently died on Saturday (**[Redacted]**).

The family are completely devastated, we protected and carried out every possible mitigation to ensure **[Redacted]** was safe, he hadn't left his house in months and we only recently agreed to allow carers in to provide breakfast and evening meals.

We are in somewhat disbelief that he picked up Covid-19, even more so given when he was just in the week before his death was asked if it was ok for a carer to visit as she had just been with a recent Covid-19 client who had a fall! **[Redacted]** had only recently commented to the family that a number of the normal care staff were off and self-isolating due to Covid-19 and others had told him they were being reprimanded just for going to have Covid-19 tests – Then being hounded to get back to work, if they tested positive but showed no symptoms.

Please be in no doubt – This is someone's life we can't bring back. The care package was provided by **[Redacted]** and **PLEASE ensure no other innocent victims are inadvertently infected due to staff shortages or PPE and self-isolating procedures not being adhered to, surely a basic duty of care.**

**[Redacted]** didn't deserve his life to end in this way in the most brutal of circumstances and we do not wish for any other family to go through what we did and are continuing to do so.

We are "totally heartbroken" to lose a much loved Father, Grandfather and Great Grandfather in this way.

This inquiry must answer the following serious questions:

1. Why did 'track and trace' not contact **[Redacted]** after the **[Redacted]** staff members positive covid-19 test?
2. Do elderly people not count or matter as a close contact?
3. Why did **[Redacted]** not contact **[Redacted]** to advise about this positive covid-19 staff member immediately and highlight the exposure risk?
4. If the appropriate PPE had been worn and all procedures were followed, how did this staff member infect **[Redacted]**?
5. **[Redacted]** had his lower legs washed and medical ointment applied by this care worker, surely this is a close and immediate contact – **[Redacted]** wasn't wearing a mask or any PPE protection?
6. Was **[Redacted]** only 'recommended' to wear PPE when supporting clients and not at all times?

7. When **[Redacted]** was admitted to the Covid-19 ward at **[Redacted]** he was rigorously interrogated by the 'track and trace' team to find his immediate contacts, but why not the care worker?

8. I still believe it is fundamentally wrong that **[Redacted]** only through 'snippets' from the replacement care workers found out that someone who had visited **HIS** own home, carried our meal preparation and provided close contact care had tested covid-19 positive?

**[Redacted]** should have been safe and protected in his own home, he followed the rules. After all he was only days away from his first vaccine...sadly he didn't get that chance.

I am happy and willing to provide further information to aid this inquiry and hope the findings are truthful. The UK and Scottish government failed our elderly citizens from hospital discharges to nursing homes to home care packages - **[Redacted]** was a retired **[Redacted]** and I could just hear him say 'we have been treated like cattle'.

Yours faithfully,

**[Redacted]**

**[Redacted]**

Tel: **[Redacted]**

Email: **[Redacted]**

Letter 42 –

**From:** **[Redacted]** <**[Redacted]**>

**Sent:** 25 August 2021 09:56

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Beareved Family looking for answers to Care for the elderly during the pandemic

Hi

I lost my mum during the covid pandemic and we as a family are looking for some answers to questions and would like to have input to the Covid enquiry mentioned by the first minister yesterday.

Can you advise if this is the correct forum to have questions raised for the enquiry please.

Regards

**[Redacted]**

**[Redacted]**

Letter 43 –

From: [Redacted] <[Redacted]>  
Sent: 25 August 2021 10:57  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: Covid-19 Public inquiry thoughts

Hello,

In additions to the suggestions in the documentation on the web site i.e. why people with CV19 were returned to care homes etc.

I have questions I would also like answered. These questions are asked from my level of understanding at this time and thus could be incorrect in their context.

But I would like answers.

- 1) Why were people who died of other causes, but had CV19 mentioned on their death certificate included in the statistics?
- 2) Why were the figures for level of infections compared to the WHO level when the WHO testing is for a random sample where as the Scottish tests are for those who believe they are infected, thus your level of infection will always be greater?
- 3) It is difficult and human life is priceless, but will there be a real report about the level of lives lost, against the risk of actually dying from the virus with the effect of cost to our economy and loss of jobs?
- 4) The media reporting of the viruses progression was sensationalist and designed to cause great alarm in the community. People I know actually though that if they got this virus they would die, fact. The Media should be looked at and their mission be examined in great detail.
- 5) As of today 10464 people have died where CV19 is mentioned on the certificate, not necessarily the cause of death. With a Scottish population of approximately 6 million, this gives the chances of dying at 0.17%, flu is 0.1 to 0.3% age dependent. So why were not the real risk level explained to the population?
- 6) In the early days politicians (who are not virologists by the way) treated their response as if it were a war, with language like "we are going to fight and defeat this virus" you can vaccinate against a virus, you can live with a virus, but you can never beat it. so why such emotive language, thus adding to the spread of fear?
- 7) We are now happily approaching a very high level of vaccination in the Scottish population, reports in the news this morning raised two points, infections are increasing & immunity with time from vaccination is decreasing. Although death rate is not climbing nearly as rapidly as previously. Why is it not being put out there that to maintain a population immunity to a virus we must be exposed to it, thus why once vaccination is achieved are we not being told to get out there and maintain our antibody count? it was stated quite early on in this sequence that those with the

highest levels of immunity were the front line CV19 healthcare workers, why?  
Because they were exposed to it every day.

8) People died from this virus and that was very sad. People also died of many other things and I would like to know the figures of those dying from CV19 against those dying of other preventable causes because they did not seek help due to fear of on disease they died of another?

9) The NHS was in trouble before this even started, I would like the NHS management and purchasing structure to be heavily investigated, the amounts of wasted money on unsuitable PPE and other measures to be realized. Why were there not a high enough level of front line staff and why have intensive care beds been cut over many years, UK is 9.9/100k, Germany 29.2 / 100k, France 11.6 / 100k, Scotland 5/100k.....Why?

10) Denial by SMP's, I would like to know why I was informed from a reliable source that consultant surgeons had done no work for 18 months in one hospital I know about and that people would be dead before they had an operation, People were being knocked back for essential life changing operations due to CV19, why? Infection control in the operating room is vital, thus CV-19 should like necrotising fasciitis be treated as any other threat and managed while still allowing other essential operations to continue. I wrote to my SMP about this and she initially denied there was a problem, the story broke in the papers the next day, why denial for a thing that was obvious?

11) Schools, with extremely rare, and most unfortunate exceptions, children are relatively unaffected by CV-19, thus why blanket close the schools? In addition I believe private schools did not have to close why?

12) Profiteering, I would like the extent of this to be investigated. Including universities, I believe the universities of Scotland treated students incredibly badly, the status of business university should be removed and they should be returned to the state of educational non-profit organizations.

Regards

**[Redacted]**

**[Redacted]**

Letter 44 -

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 11:03

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Public Inquiry Feedback

First and foremost it needs to be completely apolitical; there is to be no attempts to subvert, restrict or manipulate in any way the information and evidence provided to meet a political requirement.

Evidence should be sought from those directly involved at the front line of the NHS and Care Homes. All relevant historical references, including emails, dossiers etc, pertaining to decisions made are to be utilised.

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Letter 45 –

**From:** [Redacted] <[Redacted]>

**Sent:** 24 August 2021 17:16

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Fwd: "Covid" legislation

Please see email below as it relates to a public enquiry. Information and questions that need to be considered.

I'm still awaiting a response to this.

Regards,

[Redacted]

Sent from Samsung Mobile on O2

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**From:** [Redacted] <[Redacted]>

**Sent:** Tuesday, 17 August 2021, 20:28

**To:** [covid.leg.consultation@gov.scot](mailto:covid.leg.consultation@gov.scot)

**Subject:** "Covid" legislation

To whom it may concern,

The unlawful coronavirus Bill must be repealed immediately.

The first link I have provided a link for a document. This is for your attention. Over 400 pages documenting covid as fraud.

Excerpt:

"The pseudopandemic is first and foremost a crime. There are real people who are guilty of it. This book is written in the firm hope that the plan ultimately fails and that we never allow our society to be manipulated by criminals again"

<https://t.co/86jwpyKzxv>

I feel this is also something you should be made aware of & would like to know your thoughts on the points raised in this letter in the second link below.

This has just been sent by lawyer **[Redacted]**. **[Redacted]** has also sent this direct a Detective Superintendent assessing a criminal complaint by **[Redacted]**. This complaint is still being reviewed with no crime number yet.

A 23 page letter from a firm of solicitors on behalf of their client a whistleblower Doctor from within the NHS.

It's damning, raises serious concerns about the vaccines, lack of informed consent, alternative medications, outside influence from paid celebrities and high profile donors and mentions the harms caused by mask wearing. This document is public, it's been sent to Cressida Dick the Commissioner at The Metropolitan Police and The Chief Executive at the NHS, Chief Executive of the General Medical Council, Parliamentary Standards Committee and Speaker at the House of Commons. This is yet more significant and irrefutable evidence of serious crime and wrong doing being committed at the very top.

<https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:d1f6f719-d1ee-43a2-8d65-381e42bee9e1#pageNum=1>

I have also recently received a response to a freedom of information request (attached) and perhaps you can consider the following questions moving forward. I'd would like a response.

1. I'd like to hear your view on why deaths in Scottish Hospitals in [2020](#) are below the 10 year average, given that we are supposedly in the middle of a Global pandemic.

2. Is it fair to assume the spike in Deaths during the first lockdown in March/April was down to medical neglect (including that of the terminally ill) & also what was essentially a genocide of the elderly by moving them to care homes without the proper care they needed?

& why was there a massive spike in use of midazolam during lockdown?

3. Looking at mortality rates, why are we still destroying civil liberties, children's education, mental health, small businesses..(I could go on) the detrimental impact of lockdown is endless.

Link for information in the table is below:

<https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/general-publications/weekly-and-monthly-data-on-births-and-deaths/monthly-data-on-births-and-deaths-registered-in-scotland>

4. Can you point me in the direction of a Detailed Risk assessment for Masking our Children & the excessive use of hand sanitizer in Schools? I have been unable to locate it online.

5. Covid 19 was downgraded in March last year. Why is it we were locked in our homes almost a year later when it not regarded as a high consequence infectious disease?

<https://www.gov.uk/guidance/high-consequence-infectious-diseases-hcid>

6. Can I ask that you take a note of Cease & desist papers served on Christian Drosten by high respected international lawyer, Reiner Füllmich (translated from German)

Do you think we are likely to see any such action in Scotland against our covid advisory committee given the obvious medical fraud that is happening?

[https://drive.google.com/file/d/17X4Gm\\_MXn\\_m-vDwgEy9vMhbNqzodAEW3b/view](https://drive.google.com/file/d/17X4Gm_MXn_m-vDwgEy9vMhbNqzodAEW3b/view)

7. Can I ask that you take note of this Article in the BJM on the corruption & suppression of science.

[https://www.bmj.com/content/371/bmj.m4425?utm\\_source=twitter&utm\\_medium=social&utm\\_term=hootsuite&utm\\_content=sme&utm\\_campaign=usage](https://www.bmj.com/content/371/bmj.m4425?utm_source=twitter&utm_medium=social&utm_term=hootsuite&utm_content=sme&utm_campaign=usage)

8. Nobel peace prize winner, Kary Mullis invented the PCR test. Here are his comments on the misuse of PCR, which as many know, is happening now to justify restrictions.

Why are we using this test if it doesn't work?

[https://youtu.be/Zm\\_Zft4fXhQQ](https://youtu.be/Zm_Zft4fXhQQ)

9. Again, on PCR testing. A court in Portugal ruled PCR tests unable to detect "covid" which would support claims of medical fraud. Other documents also supporting this

<https://www.collective-evolution.com/2020/11/23/portuguese-court-rules-that-the-pcr-test-is-unable-to-determine-a-covid-19-infection/>

[https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes\\_CDC\\_RT-PCR\\_SARS-CoV-2\\_Testing\\_1.html](https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html)

<https://www.lewrockwell.com/2021/07/gary-g-kohls/the-death-knell-for-relying-on-the-pcr-test-for-covid-statistics/>

<https://oye.news/news/health/inventor-of-pcr-test-kary-mullis-fauci-is-a-fraud-and-a-liar/>

<https://madisonarealymesupportgroup.com/2021/07/26/cdc-quietly-withdraws->

[europa-for-covid-pcr-test-it-cant-distinguish-between-covid-the-flu/amp/?\\_twitter\\_impression=true](#)

[https://www.fda.gov/medical-devices/medical-device-recalls/innova-medical-group-recalls-unauthorized-sars-cov-2-antigen-rapid-qualitative-test-risk-false-test](#)

[https://principia-scientific.com/the-covid-19-pcr-test-is-key-to-the-pandemic-fraud/](#)

[https://principia-scientific.com/video-the-pcr-covid-testing-fraud-explained/](#)

10. My final point is on vaccine safety. Is it actually safe? I have provided some alarming information for your attention. Let me know your thoughts?

[https://www.sciencedirect.com/science/article/pii/S2589909020300186](#)

[https://www.ideastream.org/news/stark-county-school-closed-monday-due-to-covid-19-vaccine-side-effects](#)

[https://www.nbcnews.com/news/amp/ncna1256880?\\_twitter\\_impression=true](#)

[https://www.conservativewoman.co.uk/the-largest-experiment-ever-seen-and-were-all-guinea-pigs/](#)

[https://brandnewtube.com/watch/doctors-and-nurses-giving-the-covid-19-vaccine-will-be-tried-as-war-criminals\\_7tNEBnZogbdIE Xu.html](#)

[https://dailyexpose.co.uk/2021/02/08/official-data-on-adverse-reactions-to-vaccines/amp/?\\_twitter\\_impression=true](#)

[https://video.wakkeren.nl/videos/watch/9bd9f602-e5e9-47e0-b35d-8f1bfd78f0f4](#)

[https://www.thenewsminute.com/article/23-elderly-norway-die-after-getting-pfizer-biontech-covid-19-vaccine-141589](#)

[https://en.gaonconnection.com/19-health-workers-dead-after-covid-19-vaccination-health-experts-demand-investigation/](#)

[https://21stcenturywire.com/2021/02/14/germany-whistleblower-in-nursing-home-says-elderly-dying-after-covid-vaccine/](#)

I'd also like to refer you to the Great Barrington Declaration.

[https://gbdeclaration.org/](#)

Deaths for any reason within 28 days of a test that doesn't work is not a pandemic, its medical fraud.

Bin the bill. Restore full freedom with immediate effect & so called vaccine passports are not only pointless, but an absolute abomination and should not be considered.

Please respond

Kind regards,

**[Redacted]**

Letter 46 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 25 August 2021 15:36  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: Breavment

During the lock down my father was took to hospital age **[Redacted]** very alert slow but mobile. With a fall he had **[Redacted]** and was taken to **[Redacted]** then to **[Redacted]** hospital **[Redacted]**. We were told that he was retaining fluid which they would not operate. We were told they were doing palative care as nothing more could be done. We couldn't all sit round his bedside as he slipped away as we were told that his siblings had to decide out of his **[Redacted]** children 2 could only visit. This in my eyes is appaling and inhuman not only for our father but for us as a family. We couldn't hold his hand at his bedside yet mr Hancock had his hands all over his mistress. When in fact he made the decisions totally disgusted.  
**[Redacted]**

Sent from my iPhone

Letter 47 -

From: **[Redacted]** <**[Redacted]**>  
Sent: 25 August 2021 15:36  
To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>  
Subject: MSM

I think it is vitally important that the input of the Media is scrutinised. Many many people were left terrified by what they read and what they heard via radio and television. In most cases their reporting was found to be misleading or dangerous. I know many people, myself included, who felt devastated after listening or reading their often misleading reports.

**[Redacted]**

Sent from my iPhone

Letter 48 -

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 19:42

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Comments as requested

The most important, crucial even, point is for the inquiry not to shy away from the fact that the Hive Mindset of the SNP, with the racism of being anti English embedded deep in its DNA, was the singular factor that led to decision making based on Pandemic Political Profiteering usurping decision making based on the greatest good for the greatest number.

The scourge of Nationalism walks the earth and destroys everything in its wake.

Due to the one note, one track policy of the SNP we had gone into the Pandemic with our Economy in dire straits, our NHS ( the Hospitals not opening on time farce), Transport ( the farce of the Ferries) and Police Services in disarray:the country in a state of cold civil war because of the Tribalism engendered by a political faction that wanted to encourage division.

The incredible centralisation in Scotland meant that the regions were not able to act quickly or flexibly; this is of particular import in relation to the Massacre in the Care Homes

The chance of a coordinated UK response was destroyed by the antics of the first Minister at the Cobra meetings whereby she breached protocols on joint communication initiatives and used confidential information including plans proposed for political gain. I believe that such was the shock at her behaviour that meetings were held without the FM's attendance due to the lack of Trust. We also saw constant engineering of grievance such as the English PPE grab with no evidence to bear it out.

The Following also unfolded.

A cover up of the Coronavirus reaching Edinburgh but full disclosure of the arrival in Dundee. The Patriots against the scourge of Nationalism know well the message being sent. We saw this bias again when the Regional Lockdowns featured Pubs being shut in Aberdeen but not in Glasgow, travel bans related to Manchester but not to Dundee even though the latter had a higher rate of infection also clearly indicates that the Minority Government was functioning to promote secession and partition as opposed to optimum Health and Social outcomes. In terms of being an [Redacted] resident I am well connected and heard through the Grapevine about the Hotel outbreak thus changing my routine to walking 1 1/2 Hours to work and 1 1/2 Hours back in order to avoid busy Transport. Many of my fellows citizens were not given this privilege and thus may well have been afflicted due to this political decision. I suspect the SNP wanted to claim the first Virus came from England as opposed to

elsewhere. The Track and Trace system at this stage of a few cases failed spectacularly to manage the situation.

The use of statistics being spun for agenda purposes was a feature of the Pandemic.

A constant jooing of the stats including using different parameters ( the 28 days rule) that was aimed at giving a political spin to how well Scotland was doing in comparison to England. The SNP knew that the UK was using different approach but did not alert them to this fact

A TWO WEEK RUNNING TOTAL VIEWPOINT SHOULD HAVE BEEN UTILISED TO GIVE A MORE IMPACTFUL PERSPECTIVE.

I believe raw data was often referred to without due diligence in order to back up the SNP point of view and indeed wrong information about numbers became a feature of the Pandemic especially failing to highlight like for like percentages if they pointed to failure on the part of the Minority Government

The complicity of the metropolitan elite media was also shocking. BBC Scotland had been bullied into constant complicity to agenda spin in the SNP favour since the nationalists stormtroopers had been sent to Pacific Quay to squash freedom of expression. The fact that Scotland was regularly the worst performing part of the UK in the covid league tables and indeed the worst in Europe on occasion was barely touched on by the Media. This led to a false sense of security for the Scottish population not realising how risky the situation really was. There was the shameful downplaying of the fact that Ian Blackford did exactly the same as Dominic Cummings in terms of travelling to self isolate but the Scottish Government and the media covered this up: indeed the dreadful example of Calderwood, Blackford, Ferrier and Sturgeon were utterly detrimental to promoting good practice throughout the population. At least Hancock resigned but Hypocrisy lingered long in the Scottish landscape.

There was an epidemic of mixed messaging as political agenda TRUMPED health and social requirements regularly. Sturgeon was deemed to have lied to Parliament by a parliamentary committee thus establishing that she was not a fit and proper person to be leading us through a crisis but the Hive Mind of National Populism protected her. The Salmond enquiry also showed the huge disconnect between bureaucracy and the needs of the country. The Shambles of poor administration was laid bare for all to see.

We now know that people were put into Care Homes from Hospital untested and indeed Covid 19 Positive even though there was plenty of evidence from Italy and Spain that this was the most vulnerable area; comments from high ranking SNP officials such as Angus Robertson about how beneficial to the cause of Independence the dying out of the baby boomers, who felt very British due to the war experience, were crass in the extreme . This affected my family deeply.

The Minority Government pretended to be more cautious ( albeit weirdly with worse results) but many policies were enacted purely to look like they were different from the UK approach. They were often entirely unenforceable such as the 8 3 rule with under 12 s free. How could the Police deal with that unless people were mandated to

carry Birth certificates, Council Tax letters and Passports ! The Police were left in the lurch time and time again with poorly designed legislation aimed at Political headlines rather than a Social contract between Government and the Governed - who rather quietly began to tire of the mixed and confusing messaging and compliance became much looser because of this. For Example

The SNP encouraged and condoned the mob gathering in Glasgow against a Home Office operation despite it breaching Covid rules, regulations and guidance thus losing the moral ground when the Football fans gathered in huge numbers. The unrestricted trip to Wembley reseeded the Delta version virus in grievous circumstances.

The people of Scotland were badly let down by a minority Government whose primary instinct was to play Politics in favour of their referendum objective rather than do the right thing by the majority of the people of Scotland.

Other aspects that need to be investigated

The reluctance of Mainstream journalism in Scotland to challenge the failings of the Minority Government and indeed often fail to emphasise the spurious nature of many of the assertions that were opined to protect the SNP from scrutiny. I think there is a general sense that the SNP, if successful in their quest for Independence, would be vengeful against those that did not follow their creed.

The Testing was much slower to be developed and the track and trace administration was inept and inefficient The vaccination program was so slow in comparison to UK that people probably died due to this inefficiency that once again stemmed from over centralisation.

The politicisation of the Science and Medical experts.

The Politicisation of the Pandemic pronouncements which were meant to be Health based but were used as Party Political Propaganda with no right of challenge build in for opposition representatives.

The case of the Barnet consequentials and covid related funding being held back to be used as part of the Election campaign promises.

The attempt to play Border Politics when the Virus does not recognise those parameters - as Ferrier's peculiar roving highlights.

Why responsibility was not taken and resignations not offered by Sturgeon, Swinney and Freeman should be at the forefront of consideration.

The stewardship of Scotland by a minority Government hell bent on bending the will of the people in a direction that they had no mandate to do ( they have never won more than the third of the electorate and of course the Democratic result was 55 - 45) was an epic fail and caused Scotland in terms of its population and indeed in terms of population density to have outrageously bad outcomes in terms of infection in general and Deaths in particular. ( 10,000 + !)

We needed a cross party administration and a cross border approach to co ordinate the best practice. The shame of playing politics in a time of emergency will stain the SNP for ever more.

The Judge should be cognisant of the need to give voice to the perspective and perceptions of the Patriots against the Scourge of Nationalism despite the pressure that will be forthcoming from the flag waving fundamentalists.

**[Redacted]**

PS I am grateful for the opportunity to bear witness to the Covid related death of my Mother in a care home that was preventable if the will of the Scottish Government had not been deflected by political considerations at every juncture.

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Letter 49 -

**From:** [Redacted] <[Redacted]>

**Sent:** 25 August 2021 22:10

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Input for COVID-19 Inquiry

Hello,

I would like the inquiry to cover these points:-

- The accuracy of the PCR testing - the inventor of this test himself has stated that "if you do it well, you can find almost anything any anybody" and "it doesn't tell you, you are sick and that the thing you ended up with is going to hurt you" - thousands of people tested positive but were asymptomatic who may not have been infected at all.
- The metric used - anyone who dies within 28 days of a positive 'test' includes all accidental deaths and those who were dying anyway of something else - this measure does not give the true number of people that died 'from' COVID but only those that died 'with' COVID
- From the 10,193 people that died in Scotland between 1-Mar-20 and 30-Jun-21, only 692 people died that did not have existing health issues. The other causes of death suggest that most people did die in the care homes. I am very sad for the relatives of these people however if we remove those deaths from the picture, were we really in a state of emergency and did the government really need to cause all this collateral damage?
- The propaganda and censorship applied by the government over those who do not share the same view. This includes lack of balanced information being provided on the safety and effectiveness of the vaccine. No data has been shared by the government on the yellow card reports.

I think this document sums up well, the concerns of many people, including myself.

<https://www.covid19assembly.org/doctors-open-letter/?fbclid=IwAR3inQH-YKyNIFYJCiFVF8PqpjCAvfUpxftpseYTA4JAoonQwhRTJ75eApQ>

Thank-you,  
**[Redacted]**

Letter 50 -

**From: [Redacted]**

**Sent:** 26 August 2021 11:31

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Stakeholder view on the draft Scottish Government Covid Inquiry Aims, Principles and Terms of Reference

Hello,

I am writing to you as a researcher on covid and also as a citizen in Scotland who uses the NHS and who, like all citizens in the country, has been affected by the pandemic.

Below I detail some suggestions, concerns and questions about the draft Covid-19 public inquiry document.

Regards,

**[Redacted]**  
**[Redacted]**

The announcement of the public inquiry to investigate the handling of the Covid-19 pandemic in Scotland before the end of 2021 is very welcome. The draft aims and principles document, open to comment to shape the inquiry, is also welcome. This email therefore contains a number of comments on that draft with several suggestions for the specific inclusion of topics in the terms of reference. It also seeks clarification on a number of points contained within the draft.

### **1. Principles of the inquiry**

i. The public perception of the role of the Scottish Lord Advocate has recently been unfortunately tarnished by other investigations and inquiries in Scotland. For the public to have confidence in how the inquiry works, its impartiality, transparency and in its findings, many will expect the Lord Advocate to appoint a judge outwith

Scotland to chair the inquiry. Such an appointment would be wise, well received and avoid any possibility of perceived bias at the outset of the judge's work.

ii. The independence of the inquiry has rightly been highlighted by the Scottish Government. As ministers set the terms of reference, it does not appear that all areas the judge may wish to investigate, will be explored. For example the draft document states Ministers will decide the detail on " the particular matters to be determined e.g. whether the inquiry is being invited to review policy in a given area or consider the facts of a particular case". Can the Scottish Government clarify that this will not mean certain matters will be beyond the terms of reference if the Ministers so choose? Such terms of reference would hamstring the inquiry and greatly limit its value as well as contributing to possible public distrust of findings. For example the inquiry would leave a large gap if there was no detailed examination of the inter-relationship between PHS, NHS Health Board PH departments, HPS, on occasions HSE, and the local authorities in the examination of covid outbreaks, the work of incident management teams and how those teams disseminated information.

## **2. Aims of the inquiry**

i. In the draft document, there is reference to the purpose of the inquiry being to investigate events causing 'public concern'. It is unclear from the document how 'public concerns' will be identified and exactly by whom. Concerns must surely include all Covid events in Scotland as they occurred from spring 2020 to the summer and autumn of 2021. This therefore would require the inquiry to look at lockdowns and delayed lockdowns and not just covid cases and causes within the NHS and care homes. The sectors to be examined would include education , workplaces – factories and offices, transport, and emergency services. It would also examine the position of essential and key workers and how such policies as working from home, physical distancing, ventilation, PPE selection and vaccination affected them. It would further include issues surrounding the recognition of covid as a prescribed occupational disease and the recognition and treatment of long covid affecting any patients that contracted covid.

ii. Ventilation, physical distancing, PPE , masks, vaccination, testing and tracing, quarantine, and travel are major topics of 'public concern' so all would require detailed scrutiny.

iii. Pandemic planning pre-March 2020 will be a critical area and how this influenced and informed Ministers and NHSS linked to what WHO and other international advice was on such planning. In this context, an examination of the information that the Scottish Government and its advisors obtained about covid policies in other countries where suppression worked well at various times is also necessary.

iv. The aims and principles document refers to events but does not specifically mention policies and practices but these must surely be central to any effective inquiry of events. It would be useful if this was made explicit in the terms of reference document. This would also mean that proper scrutiny of the middle and long-term impacts of covid policy took place. In this context, it would require an assessment of the evidence-base, assessments, and actions of the Scottish Government with regard to covid exclusion, elimination, suppression, and mitigation strategies. These

strategies underpinned what happened in hospitals, care homes, schools, and workplaces and the transmission of the virus. The inquiry would need to explore why the Scottish Government's suppression policies were weakened as time passed. The evidence base guiding the Scottish Government's decisions should also be scrutinised and examine why for example some critical queries and questions about that covid evidence based and related policies were ignored for months by Scottish Government civil servants.

v. Can the Government state categorically at this stage that the inquiry will be required to make recommendations where appropriate in the terms of reference? If no such recommendations are to be made, this would greatly limit the inquiry's value.

vi. The inquiry, we are told, can only look into devolved matters in relation to Scotland. This is understood. However, the pandemic events and policies in Scotland entailed much that has been devolved prior to the pandemic and, during the pandemic, new areas that de facto after March 2020 were controlled by the Scottish Government. An example of the former that will require scrutiny is vaccination policy because the Scottish Government is not bound by JCVI advice. An example of the latter would be the development by the Scottish Government of workplace guidance on covid where HSE did not take a UK-wide lead but left this to the public health bodies in the devolved countries. It must also surely involve scrutiny of what input Scottish medical and scientific civil servants such as the CMO and CNO had into UK committees and groups and on what basis and how the Scottish Government and its advisors accepted and used SAGE and other covid advice.

vii. The aims section refers to consideration on avoiding 'duplication of investigations' with any UK-wide inquiries. The section reads somewhat oddly and ambiguously for an inquiry that must be underway in this calendar year. The Scottish Government has taken the lead on setting up an independent inquiry and it should not be delayed by waiting for the UK government to begin an inquiry or preclude areas of investigation. Information about the four harms from covid events, policies, and procedures and how they inter-locked with UK activity will already be available and in the possession of the Scottish Government.

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The University achieved an overall 5 stars in the QS World University Rankings 2020  
UK Sports University of the Year 2020 (Times Higher Good University Guide)  
The University of Stirling is a charity registered in Scotland, number SC 011159.

Letter 51 -

From: **[Redacted]** <**[Redacted]**>

Sent: 26 August 2021 18:20

To: COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

Subject: Covid enquiry

Sent from my iPhone I have been a SNP voter for years, no more I think during COVID you threw our old under a bus, they didn't stand a chance, frailty scores no critical care, ward care only, and if they didn't have COVID when they went into hospital they certainly had it when they came out, DNR stuffed down their throats at every turn, no communication with family, W47 forms filled in without knowledge of POA over full health and welfare, some Drs spoke to us like Mum's care had nothing to do with us, they played God and put her on end of life again not a word of it to family, palliative care they said, one ward she's doing great she will be home in couple days next day out of the blue week to two to live, so what I want to know is who gave them permission to kill our old, who made them God, [Redacted], I watched my Mum die, and for that there is no forgiveness, someone has to be held to account, and if government didn't know this was going on then head of departments in hospitals should resign and hang their heads in shame.

Letter 52 -

**From:** [Redacted] <[Redacted]>

**Sent:** 26 August 2021 17:56

**To:** COVID-19 Public Inquiry Set-Up Team <COVID-19publicinquirysetupteam@gov.scot>

**Subject:** Re: Hospital acquired Covid

Thank you for your reply.

I hope hospital acquired COVID-19 is part of the inquiry. People were sent back to nursing homes with Covid. Presumably acquired in hospital. Other people were also infected in hospital but didn't leave.

If they became infected because of Hospital Trusts/Government decisions that should be covered as well.

Kind regards

[Redacted]

Letter 53 -

**From:** [Redacted] <[Redacted]>

**Sent:** 13 January 2021 22:09

**To:** First Minister <[firstminister@gov.scot](mailto:firstminister@gov.scot)>; Cabinet Secretary for Health and Sport

<[CabSecHS@gov.scot](mailto:CabSecHS@gov.scot)>

**Cc:** [Redacted] <[Redacted]>

**Subject:** Re: Covid-19 ;(1) SAVING LIVES; (2) FEELEY ADISORY PANEL; INDEPENDENT REVIEW OF ADULT SOCIAL CARE IN SCOTLAND -REPORTING IN JANUARY 2021. (3) QUARANTINE PILOTS FOR THOSE TESTING POSITIVE IN JANUARY/FEBRUARY 2021; (4) SCOTTISH FOOTBALL - RISKS/SUSPENSIONS.

Dear First Minister and Cabinet Secretary,

Firstly, sincere congratulations on the action taken by your Government to slow the spread of infection across Scotland - and save lives. You will be relieved that the Scottish Rate per 100,000 over previous 7 days has fallen from 297.4 on 8/1/2021 to 285.2 on 12/1/2021 - with the daily positive new cases falling below 2,000 on each of 9/10/11 and 12 January 2021.

With vaccinations of the highest risk groups due to complete by mid February 2021 - academic modelling on Channel 4 News is persuasive that daily hospitalisations and deaths should begin to reduce from the beginning of February 2021 ; you deserve much credit for saving lives ; and the eventual tally/mortality statistics from COVID in UK/SCOTLAND - on all 3 measures - in 2020 and 2021 - will be useful data to support the widely held view in Scotland that the leadership and messaging from your Govt. has saved many lives and protected our NHS since January 2020.

Secondly, I set out in my e-mails of 3 November and 4 December - the importance of addressing the transfer of employment (to the NHS ) training and qualification strategies for our CARE AT HOME workers - some of the real unsung heroes/heroines of 2020 and 2021 COVID CRISIS in Scotland. Their futures have had minimum coverage in the media- due to the better resourced lobby of the PRIVATE PROVIDER LED CARE HOME SECTOR - the weaknesses of which have been cruelly exposed in the COVID crisis.

I also suggested a phased programme of conversion of appropriate existing Care Homes to a NHS NURSING HOME/COTTAGE HOSPITAL sector. **[Redacted]** advised in a letter of 24/11/2020 that recommendations would be contained in an independent review report by DEREK FEELEY in January 2021; and your Government would use these to set out how you will reform adult social care - before and after the Scottish Parliament Elections in 2021.

I look forward to sight of the Feeley Report and Government papers/statements setting out your approach on incorporating in an expanded NHS - both CARE AT HOME WORKERS; and NHS NURSING HOMES AND COTTAGE HOSPITALS ; and a consequent reduction in the number of lightly regulated and capped public subsidies to identified residents in private provider Care Homes; presumably with some demographic trends/ resident/user projections and facility pilots on a NEW NHS led approach ( perhaps, working with a small private provider Care Home sector) to adult health and social care across Scotland.

Thirdly, at this critical stage - in light of your info that the new variant is present in identified communities - surely an effort must be made to ensure that those getting positive test results over the next month - are offered the opportunity to quarantine in appropriate hotel accommodation - with catering and nursing support - ensuring they self-isolate until providing a negative test result. With data from your Health Protection Teams - it must be possible to identify areas where such quarantining arrangements could be piloted from now until April 2021.

Finally, your new Minister for Public Health Sport and Wellbeing, Mairi Gougeon MSP, is reported to have discussed the SFA/SPFL's hierarchies concerns at the health and wellbeing risks to male and female part-time football players in Scotland if they continued to play in scheduled fixtures from 12/1/2021 to 31/1/2021. Accordingly, your Government were consulted prior to the latest bizarre announcement by SFA/SPFL that senior football below Championship level in Scotland will be suspended for 3 weeks - ON THE SAME DAY (11 January 2021) as the First Minister was being cross-examined at a Media Conference on whether a winter break in Dubai by full time footballers in January 2021 constituted 'essential travel'. Partial disclosure resulted in an honest preliminary view by the First

Minister that the Celtic trip was non-essential. That afternoon Celtic disclosed the name of the elite footballer who had tested positive on return to Scotland. His identity was met with surprise across Scottish football as the individual was known to be injured !! Why was he in Dubai?

This drip feed of key facts reminded many of the First Minister's discomfort at the disclosure of week-end trips by the Government's former Chief Medical Officer to a holiday home in Elie at the peak of phase one of the pandemic. Correctly, Catherine Calderwood's public apology was delivered; her resignation was sought and accepted once all the facts were known.

By now, your Health and Protection team will have clarified how many of the 50 infected returnees from Dubai, (including Celtic player Chis Julien and his isolating colleagues on the Club's non-essential winter break) were exposed and infected by the new variant. You asked Celtic to reflect and clarify their position - but the information collated by the Health and Protection team is of greater significance on variant virus spread. On 13/1/2021 Celtic's Chief Executive apologised to the Celtic support on a the Club's social media. The disciplinary action proposed by the SFA and SPFL is awaited ; and your advisers will be compiling a report on all of these developments for your consideration . Of course, this is only the latest in a long list of COVID restriction breaches and infection outbreaks at full time elite clubs in their 'Bubbles' agreed by the football authorities with your Government through a JOINT RESPONSE GROUP.

Although the First Minister has expressed (at media conferences) little personal interest in Scottish football, I would urge you to insist that all of Scottish senior football is permitted to return to coaching and training from 1 February 2021 - or ALL SCOTTISH FOOTBALL MUST BE SUSPENDED. This would respect the bizarre SFA/SPFL suspension decision WHILE requiring all competitive league and cup fixtures involving part time clubs be re-scheduled from mid- February 2021 ; with an appropriate extension to the various competitions in the 2020/21 Season to be agreed by end-February, 2021 - after a structured consultation with all clubs during February 2021. I hope that outcomes along the above lines can be agreed through your Minister's further meetings with the Joint Response Group.

I trust that you will consider the above points . I look forward to any updates/responses from your advisers ; and to Ministerial statements confirming your discussions with the football authorities between now and end- February 2021.

Yours faithfully,

**[Redacted]**

Best regards,

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**From:** [Redacted] <[Redacted]>

**Sent:** 04 December 2020 19:00

**To:** [firstminister@gov.scot](mailto:firstminister@gov.scot) <[firstminister@gov.scot](mailto:firstminister@gov.scot)>; [CabSecHS@gov.scot](mailto:CabSecHS@gov.scot) <[CabSecHS@gov.scot](mailto:CabSecHS@gov.scot)>

**Cc:** [Redacted] <[Redacted]>; [Redacted] <[Redacted]>

**Subject:** Re: Covid-19 and Care Homes in Scotland ; INDEPENDENT REVIEW OF ADULT SOCIAL CARE IN SCOTLAND -REPORTING IN JANUARY 2021.

Dear First Minister and Cabinet Secretary,

[Redacted] (now in charge of Pandemic Response - Adult Social Care) was good enough to provide a reply dated 24/11/2020 to a few of the issues raised in my most recent email of 3 November 2020.

From [Redacted] 's reply and Ministerial Statements to the Scottish Parliament, it is clear that many of the shortcomings and errors in the March to June 2020 FIRST WAVE period will be a focus of the Pandemic Public Inquiry in due course; more importantly, lessons have already been learned and the mortality statistics on Care Home Residents in the October to December 2020 SECOND WAVE are and will reflect actions taken by your Government in recent months - hopefully.

Of course, the game - changers will be the dates of approval of vaccines - their supply - and delivery of an efficient programme of vaccines in Scotland from your target commencement date of 8/12/2020 to key Health and Social Care workers (and from 14/12/2020 to Care Home residents). Reporting of progress in vaccinations across Scotland will be critical - and I would urge you to ensure that the key 'CARE AT HOME WORKERS' and THIER VULNERABLE ELDERLY CLIENTS get priority and YOU REPORT on progress in these vaccination programmes - distinct from CARE HOME residents. Many vulnerable elderly Scots live alone in their own homes - reliant on 'CARE AT HOME' services ; many in this 70,000 grouping are TERRIFIED of being moved to a Care Home - if they fall ill with COVID or other ailments.

The importance of transferring these 'CARE AT HOME 'workers to NHS employment - thereby ensuring better training; qualifications and ready access to GP; Pharmacy and nursing services - when required - must remain a key early recommendation for the FEELEY led ADVISORY PANEL reporting in January 2021. Your £500 thank you gesture for 2020 services will be warmly welcomed by these staff - but is no substitute for a more secure NHS employment and recognised NHS training framework in 2021.

Hopefully, the Feeley Report will also pave the way for a phased programme of NHS NURSING HOMES/COTTAGE HOSPITALS to be established by your Government in Scotland ; it can be anticipated that manifestos will clarify differing approaches to the CARE HOME private provider framework at the 2021 Scottish Parliament elections.

My personal view on a strategy - as can be seen in my earlier correspondence - is that CARE AT HOME grows and is better resourced by NHS staff; a planned growth in NHS NURSING HOMES/COTTAGE HOSPITALS is agreed to recognise the shortage of hospital beds following

the years of austerity. Less capital and revenue public subsidies should be allocated to a smaller Care Home Sector - with entitlement dependent on Care Inspectorate regulation - with beefed up powers of inspection/intervention and financial penalties.

I hope that these comments are helpful - and taken into account.

Again, sincere congratulations on the clear messaging and competent Government led by both of you in these strange and difficult times.

All the very best for 2021,

**[Redacted]**

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**From:** **[Redacted]**

**Sent:** 03 November 2020 00:03

**To:** [firstminister@gov.scot](mailto:firstminister@gov.scot) <[firstminister@gov.scot](mailto:firstminister@gov.scot)>; [CabSecHS@gov.scot](mailto:CabSecHS@gov.scot) <[CabSecHS@gov.scot](mailto:CabSecHS@gov.scot)>

**Cc:** **[Redacted]** <**[Redacted]**>; **[Redacted]** <**[Redacted]**>

**Subject:** Covid-19 and Care Homes in Scotland.

Dear First Minister and Cabinet Secretary,

I refer to my earlier correspondence - and the acknowledgements ; replies from your **[Redacted]**; and the helpful reports from David Bell and his colleagues at the University of Stirling.

Last week's publication of the PHS/University ( Glasgow/Edinburgh ) statistical report on the 5191 patient hospital discharges from 1/3/2020 to 31/5/2020 to 843 of the 1084 registered Care Homes in Scotland did little to raise the standard of debate on both past and present issues. This report fuelled frustration - and media negativity. This was disappointing ; as you deserve credit for agreeing that the excess deaths in Care Homes in Scotland from March to June 2020 are a topic for future detailed Inquiry . The limited initial report ensures the Inquiry will have statistics available on the scale of the March/June 2020 delayed discharge issue .(on which opposition politicians allege errors in policy and operations).

As infection levels are high in many communities across Scotland - there are a number of key current issues that merit wider clarification and discussion - including:-

What are the present vacancy/occupancy levels in the 1084 registered care homes in Scotland?

In the larger Care Homes - identified as being higher risk of outbreaks and premature deaths - what are the proposals for occupancy levels in Tier 2 and 3 locations?

Will the initial NHS acquisition of the failed Portree facility - be a pilot for the annual conversion of more failed larger Care Home facilities to Registered Nursing Homes - within the NHS Scotland structure?

Is your Government not willing to promote a Scottish pilot programme ?

Or are you waiting to copy English/Treasury initiatives on Elderly/Care in England ? (Successive Scottish Governments adoption of UK frameworks as in private provider Care Home and University Halls of Residence models have been found wanting in the Covid crisis - in the opinion of many !!).

I look forward to early Ministerial Statements to the Scottish Parliament clarifying the position and your Government's approach to the Care Home crisis in Scotland.

Finally I was delighted to read in the NRS weekly report on Covid- 19 mortalities for Week 43 to 25/10/2020 - that the place of death for the 106 Scots where Covid was recognised as a cause was:-

Hospital - 82

Care Home - 18

Community- 6

Comparison with the location of 4482 running total at 31/10/2020 of registered Covid deaths in Scotland in 2020 is merited:-

Hospital - 2149

Care Home- 2016

Community- 317

From the above - I am re-assured that residents in Care Homes are, since June 2020 , being admitted to NHS Hospitals for treatment by consultants/doctors with ready access to oxygen and 24 hour nursing care ; this was not the case between 1 March and 1 June 2020 - and the 'light that your Government has shone ' on the Care Home sector will have helped to ensure frail vulnerable elderly residents are now getting appropriate medical aid and treatment in NHS Hospitals , whenever required.

At the same time, most Scots - in my age group- will never wish to be referred to a Care Home.

For the future, much improved Care at Home by trained qualified NHS staff ( or Treatment in a NHS Nursing Home or NHS Hospital ) should be the health/wellbeing improvements and outcomes of the 2020 deaths of over 2000 Care Home residents in Scotland - many of whom died alone and before their time .

Your Government's pilot programme should include the phased transfer of community based Care Staff to NHS employment and conditions of Service with Health Boards across Scotland. Working out with the Care Homes - these personnel are the real local heroines (occasionally heroes)of the Covid crisis. To date, all they have had is warm words. Time for action.

Again, I look forward to early Ministerial statements and resourced programmes for change during November 2020.

Yours sincerely,

**[Redacted]**.

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Letter 54 –

**Humza Yousaf MSP**

Cabinet Secretary for Health and Social Care

The Scottish Government

St. Andrew 's House

Edinburgh, EH1 3DG

**3rd June 2021**

**Dear Cabinet Secretary Mr Yousaf MSP,**

I am writing to you to introduce myself as Chair of the Scottish members of Covid -19 Bereaved Families for Justice, to congratulate you on your recent appointment as Cabinet Secretary for Health and Social Care, and to offer a meeting with Covid -19 Bereaved Families for Justice.

On 22nd March 2021, Covid-19 Bereaved Families for Justice met with First Minister Nicola Sturgeon MSP. At that meeting, she made a committed that it would be a priority for her government if re-elected to begin the process of setting up a statutory public inquiry into the handling of the Covid-19 pandemic, as well as to include bereaved families including our group in setting the terms of reference for such an inquiry.

I heard your interview on the BBC Radio 4 Today programme on 29th May, in which you mentioned that you have been given Cabinet-level responsibility by the First Minister to begin work to set up this inquiry. Therefore, I would welcome the opportunity to meet with you to discuss where our group may be able to assist your office in setting the Terms of Reference for either a Scotland-only inquiry or, indeed, on those additional elements that might require to be considered at a UK level inquiry now that Prime Minister Boris Johnson has confirmed one will take place.

It is our belief in the strongest terms possible that a lessons learned inquiry cannot wait until Spring 2022 when Boris Johnson has set the date for the UK-wide inquiry. If a rapid review first phase took place last Summer when we first proposed it, then we may not have experienced as many lives lost as we tragically did.

Bereaved families cannot be left in the dark any longer, and we owe it to them and to the future Covid-19 bereaved to begin work on a full statutory public inquiry immediately.

Anything less would be a bitter blow to those still grieving the loss of their loved ones.

I appreciate that your schedule must be incredibly busy, but I would welcome the opportunity to meet you and discuss these matters further in person or virtually.

Yours sincerely,

**Alan Wightman**

**Scottish Chair of Covid-19 Bereaved Families for Justice**

Letter 55 –

**Nicola Sturgeon MSP**

First Minister of Scotland

Bute House

5 Charlotte Square  
Edinburgh, EH2 4DR

**20th May 2021**

**Dear First Minister,**

I am writing on behalf of Covid-19 Bereaved Families for Justice to congratulate you on your recent victory in the Scottish Parliamentary elections and on your being re-elected as First Minister, as well as to offer a further meeting following our discussion on 22nd March this year.

At our last meeting, you made a commitment that it would be a first priority for your government if re-elected to begin the process setting up a statutory public inquiry into the handling of the Covid-19 pandemic, as well as to include bereaved families including our group in setting the Terms of Reference of such an inquiry.

As Chair of the Scottish members of Covid-19 Bereaved Families for Justice, I am writing to advise you that our members are ready to engage with your Government on setting the Terms of Reference for either a Scotland-only inquiry or, indeed, on those additional elements that might require to be considered at a UK level inquiry now that Prime Minister Boris Johnson has confirmed one will take place.

While we welcome this commitment from the Prime Minister, we continue to have serious concerns about the scope and start date of the UK-wide inquiry. Most importantly, we strongly disagree with the timescale laid out by the Prime Minister that the inquiry should begin in "Spring 2022". Added to which, he has neither promised nor indicated that we would be involved in setting the Terms of Reference, whether the inquiry would be Judge-led, nor that it will be Human Rights based. This stands in stark contrast to the commitments you made to our group in March.

We further note with concern that the Prime Minister's statement merely referred to the devolved Administrations being consulted "prior to" the setting of Terms of Reference, rather than during the process of establishing Terms of Reference.

You have said previously that you still saw a role for a Scotland -only statutory public inquiry if the four nation inquiry is not adequate for Scotland. As such, we would be keen to assist your government in helping determine what Scotland's needs are in this inquiry, in addition to those stated in the above paragraph.

I appreciate that your schedule must be incredibly busy, but if you or a member of your team would like to meet me and representatives of Covid -19 Bereaved Families for Justice to discuss these matters and any others, please do not hesitate to get in touch.

Yours sincerely,

**Alan Wightman**

**Scottish Chair of Covid-19 Bereaved Families for Justice**

Letter 56 -

**From:** [Redacted] <[Redacted]@aameranwar.com>

**Sent:** 08 July 2021 16:17

**To:** Cabinet Secretary for Health and Social Care <[CabSecHSC@gov.scot](mailto:CabSecHSC@gov.scot)>; First Minister <[firstminister@gov.scot](mailto:firstminister@gov.scot)>

**Cc:** Aamer Anwar <[Redacted]@aameranwar.com >

**Subject:** Covid-19 Bereaved Families for Justice

Dear First Minister and Mr Yousaf,

We act on behalf of members of the Scottish branch of the UK group 'Covid-19 Bereaved Families for Justice'. Following the positive meeting some of the families had with you on 22<sup>nd</sup> March 2021, we are requesting a meeting with you, the Scottish family members and ourselves to discuss any public inquiry into Covid-19 in Scotland.

Please find attached correspondence from Mr Anwar in relation to the above matter.

Kind regards,  
**[Redacted]**

**[Redacted]**  
**[Redacted]**  
**Aamer Anwar & Co**  
Carlton Buildings  
63 Carlton Place  
Glasgow  
G5 9TW

T 0141 429 7090

Letter 56:  
Attachment 1 -



Section 27 of the Inquiries Act 2005 sets out that a UK inquiry's terms of reference cannot include Scottish devolved matters without consultation and written permission to do so. It also sets out in s 27 (3) that a UK inquiry cannot compel evidence from Scottish ministers on Scottish devolved matters.

This works both ways- under s 28 it is set out that a Scottish inquiry would not be able to look at UK reserved matters, nor be able to compel evidence on UK reserved matters.

It is within this context that we intend to raise a number of issues, that will be added to:

- i) What are the Scottish Government's plans for a public inquiry?
- ii) Will you confirm that the Scottish Government will not wait without time-limit for the UK government to establish a judge led public inquiry.
- iii) It is imperative that the Scottish families are not subjected to unnecessary delay at the hands of the UK government when it is within the power of the Scottish Government to act now, nor should the issues of concern for the Scottish families be subsumed by a UK wide inquiry.
- iv) We expect that a date for an inquiry, dealing with devolved issues, will be established. The timing of this should not be predicated on the actions and plans of the UK government. It is hoped that an inquiry could be set up and hearings could take place on Scottish issues and where there are cross-border issues then these could be dealt with at a later date.
- v) Are you able to confirm that the members of Covid-19 Bereaved Families for Justice will be core participants in any public inquiry into Covid-19?
- vi) Rule 18(2) of the Inquiries (Scotland) Rules 2007 requires the Chair to take account of the financial resources of the person applying for an award for legal representation. We would be asking Scottish Ministers to agree to vary this rule when it applies to bereaved family members. As a result there would be no need to detail the financial resources of any of family members- we ask this in advance as it would be unacceptable for bereaved family members to be required to pay the cost of representation at the inquiry when all other core-participants are to be funded from the public purse.

- vii) Can you confirm that the Scottish members of Covid-19 Bereaved Families for Justice will be consulted in relation to the drafting of the terms of reference for any public inquiry into Covid-19?
- viii) Can you confirm that all those who wish to have their story heard will be able to give evidence to the inquiry?
- ix) Can you confirm that the recommendations of any public inquiry into Covid-19 are implemented in Scotland? After the inquiry report has been published there needs to be a formal response from the Scottish Government. The Scottish Government should respond to each specific recommendation, set out a timeline for implementing recommendations, and give reasons if they are not going to do so.

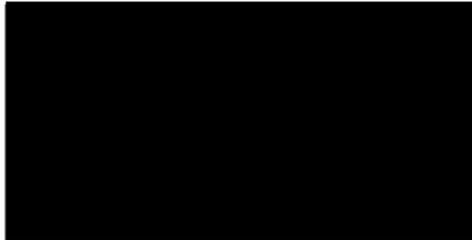
In the first instance we believe the above is necessary to ensure the families have confidence that the public inquiry will be an effective mechanism to ensure that what has happened to them, will not happen again.

The effectiveness of the process and the public perception of the inquiry will ultimately be determined by what is done by the Scottish Government in establishing a public inquiry and implementing any findings of the report.

Whilst we appreciate that there appears to be conflict in views and approach adopted by the Scottish Government and the UK Government, the families we represent do not of course wish to be dragged into the middle of this. They have been through enough pain and loss. The families simply wish for their voices to be heard and their experience to be front and centre of any public inquiry.

Kind Regards,

**Aamer Anwar**



  
**AAMER ANWAR & CO**  
SOLICITORS & NOTARIES

**Our Ref: AA/CHB/**

**8<sup>th</sup> July 2021**

**Nicola Sturgeon  
First Minister**

**By email only**

Dear Nicola,

**Meeting in relation to a public inquiry into Covid-19**

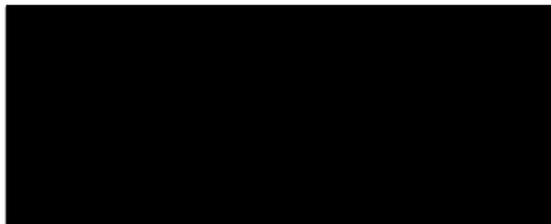
We act on behalf of members of the Scottish branch of the UK group 'Covid-19 Bereaved Families for Justice'. Following the positive meeting some of the families had with you on 22<sup>nd</sup> March 2021, we are requesting a meeting with you and the Cabinet Secretary for Health with the Scottish family members and ourselves to discuss any public inquiry into Covid-19 in Scotland.

We expect this meeting to be smaller because of the need to be Covid-19 regulations compliant and safe, but it is hoped that a larger meeting for the families can be organised when it is safe to do so.

Please find attached a letter containing matters the families wish to be addressed at the meeting.

Kind regards,

**Aamer Anwar**



Telephone: 0141 429 7090 | Fax: 0141 429 7025  
Email: [office@aameranwar.com](mailto:office@aameranwar.com) | [www.glasgow-lawyer.com](http://www.glasgow-lawyer.com)  
Carlton Buildings, Ground Floor, 63 Carlton Place, Glasgow G5 9TW  
VAT Reg number is 894865551



**From:** Families For Justice <[Redacted]>

**Sent:** 03 June 2021 09:36

**To:** Humza.Yousaf.msp@parliament.scot

**Cc:** Alan Wightman <[Redacted]>; Scottish Ministers <Scottish\_Ministers@gov.scot>

**Subject:** Letter from Covid-19 Bereaved Families for Justice

**[Redacted]**

Dear Cabinet Secretary Mr Yousaf MSP,

Please find attached letter from Covid-19 Bereaved Families for Justice.

We look forward to receiving a response.

Regards

Alan Wightman

Attachment 1:

**Humza Yousaf MSP**

Cabinet Secretary for Health and Social Care

The Scottish Government

St. Andrew 's House

Edinburgh, EH1 3DG

**2nd June 2021**

**Dear Cabinet Secretary Mr Yousaf MSP,**

I am writing to you to introduce myself as Chair of the Scottish members of Covid-19 Bereaved Families for Justice, to congratulate you on your recent appointment as Cabinet Secretary for Health and Social Care, and to offer a meeting with Covid -19 Bereaved Families for Justice.

On 22nd March 2021, Covid-19 Bereaved Families for Justice met with First Minister Nicola Sturgeon MSP. At that meeting, she made a committed that it would be the first priority for her government if re-elected to begin the process of setting up a statutory public inquiry into the handling of the Covid-19 pandemic, as well as to include bereaved families including our group in setting the terms of reference for such an inquiry.

I heard your interview on the BBC Radio 4 Today programme on 29th May, in which you mentioned that you have been given Cabinet-level responsibility by the First Minister to begin work to set up this inquiry. Therefore, I would welcome the opportunity to meet with you to discuss where our group may be able to assist your office in setting the Terms of Reference for either a Scotland-only inquiry or, indeed, on those additional elements that might require to be considered at a UK level inquiry now that Prime Minister Boris Johnson has confirmed one will take place.

It is our belief in the strongest terms possible that a lessons learned inquiry cannot wait until Spring 2022 when Boris Johnson has set the date for the UK-wide inquiry. If a rapid review first phase took place last Summer when we first proposed it, then we may not have experienced as many lives lost as we tragically did.

Bereaved families cannot be left in the dark any longer, and we owe it to them and to the future Covid-19 bereaved to begin work on a full statutory public inquiry immediately.

Anything less would be a bitter blow to those still grieving the loss of their loved ones.

I appreciate that your schedule must be incredibly busy, but I would welcome the opportunity to meet you and discuss these matters further in person or virtually.

Yours sincerely,

**Alan Wightman**

**Scottish Chair of Covid-19 Bereaved Families for Justice**

Letter 58 –

**From:** [Redacted] <[Redacted]>  
**Sent:** 25 June 2021 15:28  
**To:** Scottish Ministers <Scottish\_Ministers@gov.scot>  
**Cc:** Peter Watson <[Redacted]>  
**Subject:** CAREH01-01

Dear Cabinet Secretary Yousaf

Please see attached. We look forward to hearing from you.

Kind regards

[Redacted]



18 Woodside Place  
Glasgow, G3 7QF  
0141 439 1990

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Letter 58:  
Attachment 1 –

Our ref: CAREH01-01 PBW/AB  
Date: 25 June 2021  
Humza Yousaf  
Cabinet Secretary for Health & Social Care

The Scottish Government  
St Andrew's House  
Regent Road  
Edinburgh  
EH1 3DG  
Also sent via email: Scottish.Ministers@gov.scot  
Dear Cabinet Secretary Yousaf

**Care Home Deaths**

We are in the process of organising a group call with the families that we represent who have lost loved ones as a result of deaths in care homes.

We enclose our earlier correspondence and would be grateful for your reply.

Yours sincerely

**Prof Peter Watson**

Solicitor Advocate

Letter 58:  
Attachment 2 –

PBW LAW, 18 Woodside Place, Glasgow G3 7QF Tel: 0141 439 1990 Fax: 0141 332 7105 E:  
pbw@pbwlaw.co.uk LP: PBW Law, LP-16 Glasgow DX: PBW Law, DX 512203 Glas Sandyford Place  
www.pbwlaw.co.uk

Our ref: PBW/AH  
Date: 25 May 2021  
Humza Yousaf  
Cabinet Secretary for Health & Social Care  
The Scottish Government  
St Andrew's House  
Regent Road  
Edinburgh  
EH1 3DG  
Also sent via email: Scottish.Ministers@gov.scot  
Dear Cabinet Secretary Yousaf

**Care Home Deaths**

We act on behalf of several families who have suffered bereavement of family members whilst resident of care homes in Scotland during the Covid-19 crisis.

As you will no doubt be aware, something in the region of 3,300 people have died in the care homes in Scotland, many of whom were discharged from hospitals into care homes which lacked the necessary safeguarding measures and in some cases if not all there was no risk assessment carried out. Many who died were infected or were at risk of being infected with Covid and what followed was a level of death within care homes which was a scandal.

The families that we represent are grateful to the First Minister and your predecessor Jeane Freeman for the honest admission that mistakes had been made. Such honesty is welcomed. We are now seeking a dialogue with you and invite you to enter into discussions about a scheme to compensate the families and thus avoid alternative and unwelcome course of legal action. They would like to resolve this amicably and to move forward. If necessary, they will engage with litigation but that is very much a last resort. We hope that the Scottish Government, in acknowledging that mistakes have been made, will also acknowledge the need to compensate those who have suffered loss. There is an opportunity for all concerned to avoid a situation of

conflict between those who have suffered loss in what is widely recognised to be a scandal and the Scottish Government.

The question of a Public inquiry and indeed any Fatal Inquiry are separate issue and will no doubt take many years to resolve. The matters we deserve to be addressed now.

I am instructed to meet with you to discuss these matters if that would be acceptable. Such a meeting would be held in confidential circumstances.

Yours sincerely  
Prof Peter Watson  
Solicitor Advocate

Letter 58:  
Attachment 3 –

PBW LAW, 18 Woodside Place, Glasgow G3 7QF Tel: 0141 439 1990 Fax: 0141 332 7105 E:  
pbw@pbwlaw.co.uk LP: PBW Law, LP-16 Glasgow DX: PBW Law, DX 512203 Glas Sandyford Place  
www.pbwlaw.co.uk

Our ref: CAREH01-01 PBW/AB  
Date: 11 June 2021  
Humza Yousaf  
Cabinet Secretary for Health & Social Care  
The Scottish Government  
St Andrew's House  
Regent Road  
Edinburgh  
EH1 3DG

Also sent via email: [Scottish.Ministers@gov.scot](mailto:Scottish.Ministers@gov.scot)

Dear Cabinet Secretary Yousaf

### **Care Home Deaths**

We enclose our letter of 25 May which is yet to receive a response.

The families that we represent, all of whom have lost family members in circumstances of care home deaths and Covid, wish to highlight their concerns regarding the report in The Times of 11 June 2021. The report is headed "Watchdog's remit is to shield SNP ministers". This report has caused considerable concern and cast into doubt the independence of Public Health Scotland's role in considering the discharge of patients into care homes in dangerous circumstances. The role of Public Health Scotland, as illustrated in this report, is clearly not independent. It also casts doubt on reassurances which have been given by the Government to the families concerned.

We reiterate that the wish of those we represent is to engage in a meaningful dialogue with you, with a view to addressing all of the issues arising including a scheme for compensating families. There is an opportunity for the Scottish Government to take a lead in this matter given the frank admissions which have been made.

Given the ongoing distress that all concerned are suffering, we hope that you will agree to engage with us. It will be entirely inappropriate to wait the outcome of a Public Inquiry for these matters to be addressed. Even if a Public Inquiry is started by next year, it is unlikely to report before three or four years given the investigative stage which will require to take place in the first instance before evidence is heard and the Inquiry has an opportunity to consider and report on matters.

We look forward to hearing from you.

Yours sincerely  
Prof Peter Watson  
Solicitor Advocate  
Encl: Letter dated 25 May 2021

Letter 59:

**From:** [Redacted]<[Redacted]>  
**Sent:** 11 June 2021 09:15  
**To:** Scottish Ministers <Scottish\_Ministers@gov.scot>  
**Cc:** Peter Watson <[Redacted]>  
**Subject:** CAREH01-01 Care Homes

Dear Cabinet Secretary Yousaf,

Please see attached correspondence for your attention.

We look forward to hearing from you.

Yours sincerely

[Redacted]



18 Woodside Place  
Glasgow, G3 7QF  
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Letter 60:

**From:** [Redacted]<[Redacted]>  
**Sent:** 25 May 2021 09:22  
**To:** Scottish Ministers <Scottish\_Ministers@gov.scot>  
**Cc:** Peter Watson <[Redacted]>  
**Subject:** CAREH01-01

Dear Cabinet Secretary Yousaf

Please see attached correspondence.

We look forward to hearing from you.

Yours sincerely

[Redacted]



SOLICITOR ADVOCATE

18 Woodside Place  
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0141 439 1990

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