

Independent inquiry: Purpose and scope

Governments can be criticised for their leadership, strategy, delivery and ability to take their societies with them. Verdicts on the handling of the Covid-19 crisis in the UK are already being proffered. The UK Government has carried broad support for introducing a lockdown, but easing it has proved more problematic and contentious, according to

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Maybe it is a sign of normality returning, but criticism of the UK Government's handling has grown, with old battles on who should lead the country being re-fought. Memory is selective, and unless it captures adequately what happened contemporaneously, retrospectively constructed versions of reality end up replacing what was perceived at the time. This article argues for an independent inquiry as soon as a reasonable distance can be achieved from current events, but not for a deferral of more than six or so months, as any findings could be rendered irrelevant with the passage of too much time.

Any framing of an inquiry – or multiple inquiries – needs to start with a clear purpose and timetable to set and manage expectations, or it will lose direction and run into delays and obstacles. Crises can produce heroes and villains, winners and losers, voices that are heard and voices that are marginalised or suppressed. An effective inquiry should capture, share and assess what is known, from which a common understanding emerges to inform future action.

An inquiry's task is to focus on what can be factually established, consider whether enough perspectives of the right quality were provided, and offer an orbital view of what could have been done more, less or differently, not so much with the benefit of hindsight, but with a keener appreciation of the information, advice and guidance available at the time.

Bringing the rational and emotional together

As well as greater clarity about what happened and why, at different points preceding and during the crisis, an inquiry needs to provide a critique of policies and priorities in the light of a methodical review of information and insight available at the time of decisions being made. This is not only to provide a balanced and reasoned account, but also to engage effectively with key stakeholders and the wider public, providing opportunities to enable catharsis, so that emotions are given enough expression and put to constructive use. Only by bringing together the rational and emotional will such an inquiry produce a call to action so that lessons are learned, owned and changes made.

An independent inquiry would give a more detached and balanced overview, based on available facts, along with new, researched and evaluated information. Provided it is timely, time-limited, properly scoped, constituted and resourced, with legal powers to compel attendance, an inquiry would enable the UK to draw a line and capture learning that could prepare the country better for future crises. The reason for imposing a time limit on concluding the inquiry is that at some point, the UK will need to use what learning it has to plan better for the future – not to fight the last

epidemic, but to anticipate or respond to future systemic threats.

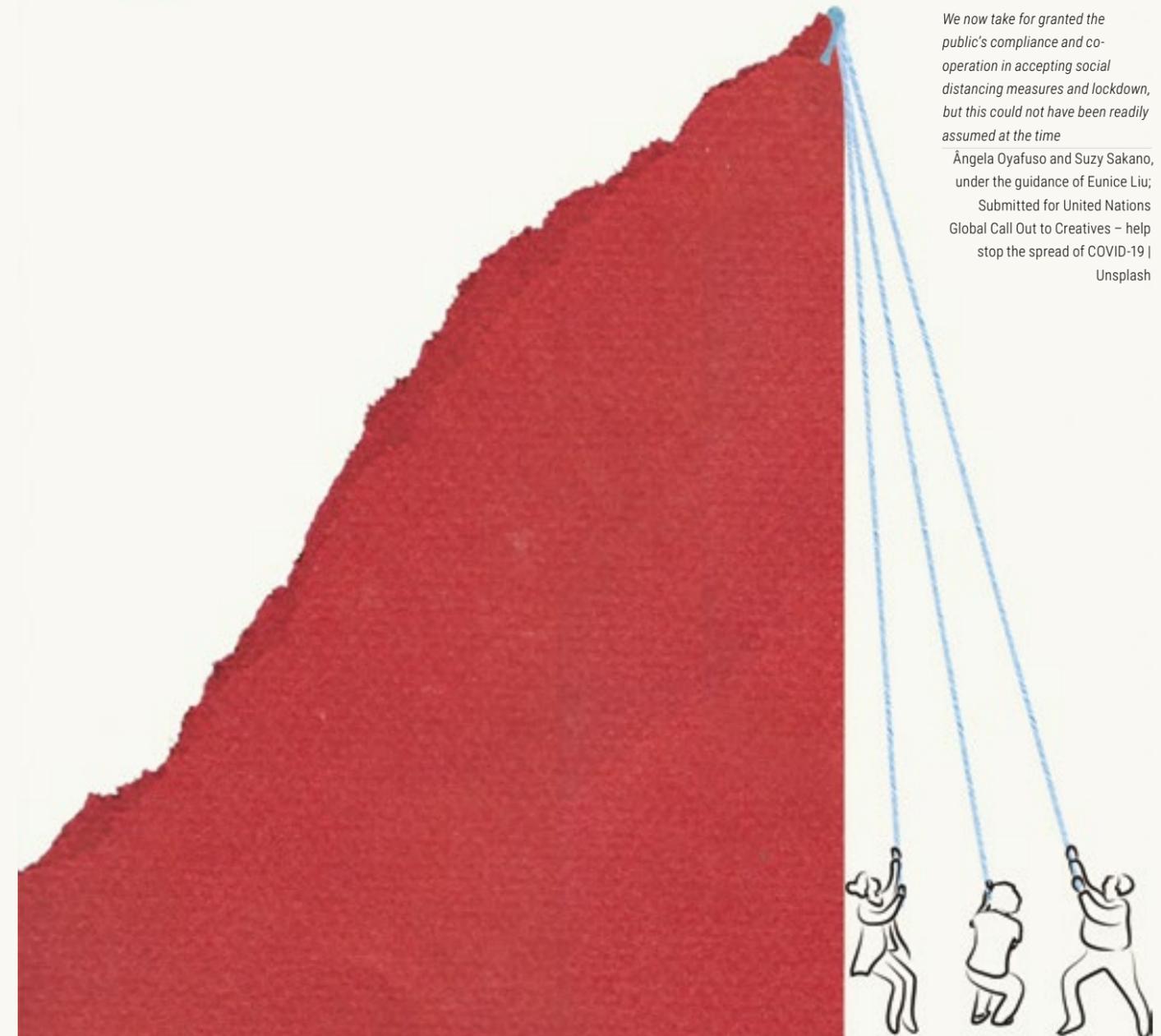
What we need now is not perfect wisdom, but enough practical wisdom. We should have an independent inquiry established in the New Year, whether a vaccine or effective drug treatments have been found and introduced, or otherwise. We will also know by then if the performance of the economy has followed a V curve (sharp fall, then bounce back), a U curve (prolonged downturn), or a W curve (ups and downs within and between sectors, depending on continued restrictions, business resilience and consumer spending). We can but hope that national and world economies do not follow an L curve, whereby they do not recover for some time.

We need a judge as inquiry chair, or someone of equivalent standing such as a board chair, who is suitably above the political fray, experienced in analysing evidence and judging between competing and conflicting accounts, calm, clear and measured, and able to deliver a verdict without fear or favour.

Past senior civil servants are not necessarily the right candidates for this role. Some could provide testimony based on their role in acting or not acting on the *UK National Risk Register* which, as far back as 2008, gave priority to a respiratory epidemic as the top threat. In so far as we could have anticipated this specific coronavirus, we had an unknown. But with regard to anticipating a respiratory epidemic, we had a known. We might not have been able to order specific numbers of ventilators and PPE, but agreed plans for shifting production could have been in place. It is difficult to see at this stage how some collective responsibility does not fall on all those in receipt of those findings and who did not do enough to follow through on them. The Opposition and media showed little interest at the time.

The composition of any panel conducting the inquiry would need to draw on a range of expertise and experience from science and medicine, through to policy development, business planning, communication and operational delivery. The scope needs to be multi-faceted within defined parameters. It should ask and try to address five question areas:

- **Quantity and quality of information and insight available:** What exactly was known, and when, about coronavirus; what advice was given to ministers, and what further information and advice were sought?
- **Basis for decision-making and range of policy considerations:** Who was part of the decision-making, what was the range of considerations, what was the rationale for decisions on assessment of risk and opportunity, and what was decided when and implemented as a result?
- **Review of ongoing implementation and use of learning to inform further decisions:** What learning was in evidence at the time of a fast-moving and prolonged crisis, how did tactical and operational learning inform emerging decisions, and



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Ángela Oyafuso and Suzy Sakano,
under the guidance of Eunice Liu;
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how much learning was strategic and forward-looking?

■ **Communications and engagement:** What strategies were in place at the outset, or developed in the course of the crisis, to communicate and engage directly with the public, key population groups, stakeholders and media? What was the multiple stakeholder engagement strategy; how were stakeholders informed and involved, and how was their input used? What was the relationship between message development, alignment and delivery and policymaking? What learning can be derived from the policies, systems, processes and experience of communicating science during this crisis? How much did public trust develop or recede at different points of the crisis, and what learning emerged as a result? Based on my experience in 2003 of devising the public debate on the commercialisation of GM crops, I suggest that the inquiry explore whether the Government could have engaged the public directly on the range of policy options available once the UK was past the peak of the epidemic.

■ **Quality of contingency planning, emergency response and recovery planning:** How robust and well-resourced was the contingency planning process developed over the past 20 years, since foot-and-mouth disease (FMD) in 2001 and the global financial crisis of 2008, as well as other crises? What was in place before the epidemic and what needed scaling up to provide lessons for anticipating and handling future threats? How were the expertise, experience and networks of crisis and emergency planning professionals harnessed?

Any UK inquiry will not be able to establish the truth of how and why the epidemic started, but will be able to ascertain how well prepared the UK was and how fast the Government took action. It could add weight to international pressure to ensure that the world regulates its relationship with nature more effectively, especially in relation to deforestation, destruction of natural habitats and the trade in wildlife. Medical and scientific experts and indigenous communities had warned of such dangers, but to no avail. At the heart of this crisis was a human made environment crisis waiting to happen, with far-reaching consequences for human health and the global economy.

However well prepared the UK could have been at the outset of the epidemic, the Government might ultimately receive some credit for focusing on the scientific advice and not wanting to be drawn on next steps for fear of diluting simple messages. However, for a significant period, it struggled to give enough of a vision or route map of what the future could be. The Opposition found it difficult to add enough value in terms of ideas and options of what it would do differently, other than to offer scrutiny.

On balance, the UK Four Nations structure with all the devolved administration, including leadership of four Chief Medical Officers, appeared to help rather than hinder a concerted UK effort, but this area will be on the agenda too. The consensus supported by First Ministers in the Nations seemed to come unstuck when the core message 'stay at home' shifted to 'stay alert', adding to a perception that political engagement with the Nations developed in fits and starts. The message was necessarily a more subtle one, to continue to support emergency measures yet take small, considered steps to ease the lockdown. Critics provided no alternative plan as to how the UK could transition to a return to normal – albeit a new normal.

The main areas of probing will be less the strategy itself, putting public health first and managing upsurge on National Health Service (NHS) demand. Of greater interest will be what constituted the winning formula for tackling the epidemic, the way that the strategy was communicated, the speed with which it was implemented and how the lockdown was eased.

At the time of writing, it is difficult to reach an overall verdict, but

three main phases will be closely scrutinised: what was or was not done in February, not least the apparent confusion between putting emphasis on controlling the spread of the virus and accepting herd community; whether the decision to declare a lockdown on March 23 could have come any sooner; and whether in April and May the UK Government, far from exercising too much control of messages and engagement with opinion-formers and media, could have done more to engage on the policy considerations governing extending the lockdown and easing it, and made the advisory process more transparent.

Saving human life had to be the priority, but politicians, policymakers and their advisers also had to weigh up trade-offs: NHS capacity; what it would take to have the economy moving again; and how far the public was ready to compromise its way of life. We now take for granted the public's compliance and co-operation in accepting social distancing

measures and lockdown, but this could not have been readily assumed at the time. This inquiry will have to consider these decisions in context: Lives; livelihoods and way of life; and public tolerance to prolonged emergency measures.

Saving life was the single most important aim, but this was not unconditional. For a good part of the immediate crisis, it was weighed against overwhelming the NHS and the strategy, at least to begin with, prioritised the NHS at the expense of care homes. That was a tough call. Was it right, or were other decisions possible in the circumstances?

Systemic threats call for a deeper appreciation of the dependence and interdependence of different factors. Just how well equipped is society to live and work with ambiguity and uncertainty?

Clarity, certainty and consistency seem to resonate well with our deep need for order in the face of crisis, but the scientific method pushes more in the direction of weighing up the known and unknown, developing hypotheses that require further testing, and not reaching firm conclusions until there is sufficient evidence.

We find it much more difficult to stay with uncertainty and work through ambiguity. The UK Government showed leadership in conveying that some choices were not a matter of either-or, but both. One such tension was moving from 'stay-at-home' to the more nuanced 'stay alert' message.

One undeniable benefit arising from this tragedy is a renewed appreciation of expertise, especially medical and scientific. As far as we can determine for now, such advice informed decisions, but did not dictate or drive them, not least because no single element of scientific advice was sufficient. Government communication was remarkably clear and consistent on this point, but left one important aspect not properly analysed or made transparent at the time: what was the process for weighing up a range of evidence and perspectives, what were the steps taken to take a consensus or majority decision and who ultimately made the call, and on what basis?

Contrary to misleading media reports claiming the Government's Scientific Advisory Group for Emergencies' (SAGE) secrecy and political influence, the group published some of its most important findings on March 20, just before lockdown. These findings still stand the test of time. The importance of R0, the rate of infection, and the need for varying degrees and phases of lockdown until an effective vaccine or drug treatments are found, were spelled out clearly.

An inquiry would need to attach importance not just to inputs and outputs of scientific deliberations, but how these were assessed against a wider set of considerations. This is one reason why it was naïve or disingenuous for critics of the SAGE process to question the presence of senior Downing Street advisers whom one would expect to ask questions about the science and its implications. The only issue that an inquiry would need to determine is whether scientists felt

that they could not offer their judgement, and whether independent experts or civil servants felt they could speak without fear or favour.

There were slightly mixed signals in the communication of decisions about risk, which could have led – and might still lead – to a temptation to pin responsibility on those who gave advice, rather than those whose role is to make decisions based on that advice. This is the biggest single piece of learning that the inquiry could throw light on, which might help to inform future understanding of assessment and decision-making on risk. Tasks can be delegated, but accountability cannot. We saw this in the 2008 financial crisis, and we see it again now. The anticipation and management of risk is integral to the responsibilities of those who hold leadership positions and must sit at the top of government and at board level.

Circular questioning

The UK media also has to be held to account. It has produced some incisive analysis and thoroughly researched investigation – especially on care homes. We have also had speculative journalism. Three weeks into full lockdown, we often heard circular questions at the daily briefings about when we could expect an exit strategy and what it could entail.

Then, as the easing of lockdown loomed, questions were asked about whether we were ready to take the risk. Such questions did not elicit more information, but added to a sense of restlessness for change, which was not borne out by public sentiment. The emphasis on caution, which the Prime Minister kept reinforcing, resonated with most of the public.

To conclude, the order, scale and impact of Covid-19 leave some fundamentals in place, yet in other respects they will usher in irreversible change.

Policymakers know that for all the disruption, society adapts to a combination of continuity and change, with the policy focus being

about how much needs to stay the same and how much needs to be altered. Discussions are already emerging about how societies need to learn from their handling of this systemic threat towards anticipating and responding to others, principally climate change and being in balance with the natural world. That can only be for the good.

Almost 20 years ago, in 2001, I had first-hand experience of running crisis communications at the height of the FMD outbreak which, at that point, was the UK's single greatest civil contingency crisis since the Second World War. I contributed evidence to a lessons learnt inquiry, had my decisions and actions scrutinised, and organised the government's response to its findings.

One single phrase was memorable, and I expect it to make a difference to any inquiry into the handling of the Covid-19 epidemic: the benefit of hindsight. But then, as now, that should not be an excuse for establishing the facts and what was known by whom and when, how information was assessed, what advice was given, how that assessment and advice informed decisions, and what was implemented, resourced, reviewed and changed as a result. Dr Paul Martin's recent book, *The Rules of Security: Staying Safe in a Risky World*, is focused on security, rather than crisis response. But if we are committed to effective governance in the broadest sense, we can learn from one of his rules: "Know who's in charge". Good security requires good governance, which means clear lines of responsibility, an integrated structure, good leadership, independent assurance, and sufficient bandwidth.

Above all, the usual cry, 'Never again', cannot be left in a vacuum. Government, business, civil society, universities and the media need to forge a new social contract that requires national threats to be reviewed regularly and visibly, the public is kept informed about risks and how to respond, and contingency planning is robust and given a higher order of priority in government and in board rooms.



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Only buy what you need: Crises can produce heroes and villains, winners and losers, voices that are heard and voices that are marginalised or suppressed
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