For the attention of core participants



NOTE: Dr Croft's presentation

We wanted to take the opportunity to provide a brief update in advance of next week's presentation taking place in Dundee.

As you are aware, the Inquiry considered it appropriate, prior to commencing hearings, to explore the scientific position at the relevant time. We instructed Dr Ashley Croft to provide an account of this, and the Inquiry will hold a presentation from Wednesday next week to take Dr Croft through the material he has prepared.

Dr Croft has been instructed as an Epidemiologist. He is also a Consultant Public Health Physician. The report was commissioned to form the basis for future discussion in the Inquiry and to provide some scientific context for the work to follow. This will sit alongside other existing academic research that the Inquiry has received and will receive in future covering specific areas in more detail.

The publication of this report last week was intended to provide you as core participants, and other interested parties, the information underpinning Dr Croft's conclusions. You were also provided with 22 scientific papers identified by Dr Croft as necessary to reflect the sources on which he has based his conclusions.

A number of queries have been raised about next week's presentation, and as such we wanted to take the opportunity to clarify a few points of procedure.

We have been asked specific questions about the way in which Dr Croft's material will be utilised by the Inquiry. Dr Croft was instructed to provide his professional views as to the state of science on various topics pertaining to the COVID-19 response. As you are aware, we have not provided an opportunity at this stage for questions to be put to Dr Croft – next week's proceedings will be led by our Senior Counsel, Stuart Gale KC, taking Dr Croft through his material and putting questions to him.

We wanted to make clear that an opportunity will be provided in due course for core participants to apply to the Inquiry for questions you may wish to put to Dr Croft with regard to his presentation. This will necessarily take place at a later date to enable you as core participants and your representatives to fully absorb the information set out by Dr Croft, and any additional information brought out in the course of the presentation.

SCOTTISH COVID-19 INQUIRY

Requiring you to formulate questions you might wish to put to Dr Croft prior to the conclusions of next week's proceedings, or drawing any conclusions regarding the evidence, in our view would have been premature and potentially unreasonably onerous given the volume of material in question.

We have received queries as to Dr Croft's expertise. Core participants are of course entitled to question the expertise of any and all persons who provide information to the Inquiry. Where there are particular matters of substance that you would wish to address with Dr Croft, this can be dealt with through an application to the Inquiry to have questions posed in due course. Until Dr Croft completes the oral part of his presentation formulating questions etc. would be premature. Further information will be provided in this respect as appropriate.

We have also received queries as to why we did not commission the same expert as the UK Inquiry. In line with our Memorandum of Understanding, we opted not to duplicate costs in commissioning a very similar exercise to that undertaken by the UK Inquiry. We will of course have regard to the material produced by Professor Heymann.

Dr Croft is providing a presentation, as he was instructed to do. His work will be viewed and considered alongside other academic research received and planned for future commission. He will be asked by Senior Counsel to the Inquiry to clarify matters in his report when providing the oral part of his presentation. Like all commissioned advice and research, the Chair will have regard to all relevant material. He will assess it and afford it the weight he considers appropriate in all the circumstances.

The Inquiry acknowledges that scientific information will be challenged and contradicted throughout the Inquiry and that is inevitable in any fact-finding investigation. It is important to reiterate that the views of this expert do not represent the concluded views of the Inquiry. The Inquiry at this stage makes no further comment on the substance of Dr Croft's report.

The Inquiry team remains committed to undertaking a thorough and independent Inquiry which it is hoped will assist the people of Scotland.

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