

## Northern Ireland

**A**rlene Foster a minister in Northern Ireland [DUP] tells the Inquiry that whilst civil emergency planning lay within the NI Executive, pandemic planning lay with the Department of Health.

She was aware that an influenza pandemic was regarded as the greatest risk.

There was an effective cross border emergency planning group. The absence of ministers after the collapse of the power sharing agreement had generated problems and slowed progress in a whole range of areas including pandemic planning.

The UK government should, in her view, have played a bigger role in filling the gap.

She would be in favour of integrating the NI civil service into the Home civil service.

This would enable an integration of skills and resources in an emergency. Plans to transform the NHS in the province had stalled. [The plan was to strengthen primary care and included the introduction of centres for elective surgery].

**Richard Pengelly**, the permanent secretary at the Department of Health and Chief Executive of NHS NI agrees that contingency planning was complex, but it brought government departments together and avoided them retreating into

silos. NHS NI had been squeezed by austerity policies.

The absence of ministers after the collapse of power sharing had generated problems but had not stopped contingency planning behind the scenes. Counsel questions first day briefing for ministers, by civil servants, which said little about pandemic planning or risk registers.

They were high level briefings. The follow up to operation Cygnus had been actioned but not completed as some recommendations were not relevant to NI.

*Our witness flags when asked about events over ten years ago. He will not be alone.*

**Michelle O'Neil** [Sinn Fein] had been Minister for Health for a time.

The first time she had been briefed about pandemic planning was five months after her appointment with a high level brief about the outcome of Operation Cygnus.

She had never seen the departmental risk register.

She agreed that progress in transforming the NHS in NI had been slowed down by the absence of an Executive. Relationships with UK ministers were more about them telling what had already been decided rather than sharing a problem and a



search for solutions.

**The Chief Executive of the NI Public Health Agency**

agrees that the province was not properly prepared for the pandemic.

Another Chief Executive of a public health agency without a public health background!

He agrees that the emergency planning team was under resourced and had no epidemic modelling resources.

Plans were afoot to integrate public health and microbiology laboratories into the NI Blood Transfusion Service.

In an interesting aside he reports that NI was developing Integrated Care Organisations without legislation.

Next the Kings Fund and Michael Gove.

