Eluned Morgan AS/MS Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services



Our ref: WQ84187

Andrew R T Davies MS Senedd Regional Member for South Wales Central.

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20 July 2022

Dear Andrew,

Thank you for your recent written question asking me to provide an update on what has been the effectiveness of COVID passes.

Further to my response to WQ84187, I agreed to write to you with an update on the effectiveness of the covid pass. Please accept my apologies for the delay in providing a substantive response.

The Covid Pass Scheme formed part of a range of measures to mitigate the spread of COVID-19 through the community, and the associated harms that brings. The Covid Pass was introduced to reduce – not remove – the risk of hospitalisation and serious illness. The Welsh Government has been transparent on the evidence base for its decision and has published the scientific information that has been submitted to Cabinet for consideration.

Isolating and attributing the impact of a single intervention amongst the varied and changing measures in place to reduce the risks associated with Covid and new variants is therefore not possible. However, we have taken a range of steps to ensure that we are able to assess the impact of the Covid Pass on the organisations where it is required to be used, including regular and frequent engagement with relevant sectors where the Covid Pass has been utilised.

This issue was covered in the updated advice from the Technical Advisory Group and Chief Scientific Advisor for Health on the evidence for the use of COVID Passes on the 2nd December 2021. the advice is contained in the following link:

https://gov.wales/sites/default/files/publications/2021-12/updated-advice-from-the-technical-advisory-group-and-chief-scientific-advisor-for-health-on-the-evidence-for-the-use-of-covid-passes.pdf)

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

The advice noted "that the lack of evidence to demonstrate the impact of vaccine passports in relation to reducing transmission risk (or vaccine uptake). This will remain a challenge when attempting to attribute change to a single intervention operating alongside several other measures. While applying COVID passes alongside other protective measures has the potential to reduce the number of infectious people in the relevant settings, at the time of writing there remains no peer-reviewed published evidence to demonstrate this. However, it is important to recognise an absence of evidence of impact should not necessarily be interpreted as evidence of absence of an impact.

While finding no published evidence of the impact of the implementation of COVID passes that have been deployed in several countries to reduce the risk of transmission, like other non-pharmaceutical interventions (NPIs), evidence on their effectiveness may become available in the future.

Like face masks and improved ventilation, COVID passes are likely at the lower end of interventions in terms of their impact on risk reduction benefits and harms as compared to other measures (e.g. closure of venues, reduction in number of people in a setting). TAC have previously recommended layers of lower impact measures in a 'Swiss cheese' model that have lower associated harms (e.g. economic) and greater combined marginal gains. For example: when testing, face coverings, hand washing, self-isolation and vaccination are applied consistently and together these could help control COVID rates with minimum indirect harm (compared to stringent measures applied due to uncontrolled epidemic growth). This 'marginal gains' model only works if the measures are understood and there is a proportional uptake (e.g. wearing face coverings in closed settings, or isolating on symptoms). For all protective measures, identifying and reducing the introduction of inequalities is key, as is understanding public acceptance and providing a clear narrative and evidence as to why measures are necessary. It is important to add that there are no harm-free options to reduce the impact of COVID-19 on society and that any public health measures should only exist whilst there is a real likelihood of measurable societal harm (e.g. from overwhelming healthcare provision) and that every step should be taken to measure the benefits and harms of protective measures and seek to improve their effectiveness through iteration, and to reduce associated harms (e.g. economic support) or remove them if they cannot be evidenced as affording proportionate protection.

As outlined previously, well-defined epidemiological studies or comprehensive systematic reviews of evidence will be required to provide robust understanding of the impacts of COVID passes on reducing the risk of infection. This is difficult due to the basket of protective measures, complex pathways and behaviours involved. Even then, findings will not establish a causal link between the COVID Pass and associated measures".

Yours sincerely,

Eluned Morgan AS/MS

M. E. Maga

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