



29 March 2021

RCGP response to Cabinet Office COVID-Status Certification Review call for evidence

In your view, what are the key considerations, including opportunities and risks, associated with a potential COVID-status certification scheme?

It is essential that general practice is fully consulted at all stages of the development of a potential Covid-19 status certification scheme. While in principle the College has no objections to the development of a vaccine certificate or 'passport', and indeed there have been other examples of this to support safe international travel, the fine detail of how this is implemented will be critical. Below we have set out our views on the principles relating to a number of the key areas listed.

Operational/delivery considerations

General practice is already facing worryingly high workload pressures, and this is expected to continue to rise as we deal with the fallout of COVID-19, including backlogs of non-COVID related care and emerging issues such as 'Long Covid'. As such, any system put into place for vaccination certificates should have a zero-impact on GP workload and thus ensure GPs can focus fully on patient care. We understand that initial planning for certification aims to use the NHS Digital data processing services (DPS) data set which is positive in terms of having no impact on primary care IT. However, alternative solutions for those not digitally enabled, and for those requiring proof of exemption, must also be developed to ensure there is no addition to GP workload. As general practice is often the first point of contact for patients, easy alternative routes must be in place, such as a national helpline.

As a four nation College, we are keen to ensure there would be comparable systems across the UK if certification is taken forwards in England. It is essential that devolved nations are fully consulted as part of this process.

Considerations relating to the operation of venues that could use a potential COVID-status certification scheme

While we await further details on the certification proposals, our recommendation would be for the vaccination certificate to be used primarily to enable safe international travel, rather than for domestic use, due to the risk of unintended consequences in terms of the diversion of healthcare resources from patient care and in terms of equalities as explored below.

Equalities considerations

Digital equality

If the NHS App or another digital platform is used as the primary mechanism for the certificate, alternative systems must be put in place to support equal access, including for those without the relevant digital access or sufficient digital literacy. Without this, there will be an unfair access divide in the population. As outlined above, these options must not increase workload for general practice, and GPs need to be consulted on any alternative solutions to make sure this is the case.

Socio-economic equality

Given the lower rates of vaccine uptake amongst some BAME communities and lower income groups as compared to the national average, we would have significant concerns about the equalities implications of domestic use of vaccine certification for access to venues and services for example.

Privacy considerations

The COVID-19 pandemic has seen a rapid expansion of national data stores of healthcare data. This has been important for the pandemic response but should not in the longer-term lead to the holding of identifiable central registers such as of vaccination status. As such any system that is implemented for vaccine certification should be as privacy respecting as possible with clarity that the data will only be used for the purposes of allowing individuals to provide evidence of their own vaccination status.

The certification system must also be as technically hard to fake as possible, and of course it should be optional for patients.