

DÁIL ÉIREANN

AN COMHCHOISTE UM SHLÁINTE

JOINT COMMITTEE ON HEALTH

Dé Céadaoin, 21 Iúil 2021

Wednesday, 21 July 2021

Tháinig an Comhchoiste le chéile ag 9.30 a.m.

The Joint Committee met at 9.30 a.m.

Comhaltaí a bhí i láthair / Members present:

Teachtaí Dála / Deputies	Seanadóirí / Senators
Colm Burke,	Lorraine Clifford-Lee,
David Cullinane,	Martin Conway.
Bernard J. Durkan,	
Gino Kenny,	
Róisín Shortall.	

Teachta / Deputy Seán Crowe sa Chathaoir / in the Chair.

Update on the Roll-out of the EU Digital Covid-19 Certificate

Chairman: Good morning everyone and we will start our meeting now. Apologies have been received from Senators Hoey and the Black.

I will introduce our witnesses, who are going to provide an update on the roll-out of the EU digital Covid-19 certificate, DCC. They are: Ms Liz Canavan, assistant secretary general, Department of the Taoiseach; Mr. David Gilbride, head of immigration service delivery, Department of Justice; Mr. Muiris O'Connor, assistant secretary general, Department of Health; Mr. Derek Tierney, assistant secretary general Department of Health; Mr. Damien McCallion, national lead Covid-19 vaccination programme HSE; Mr. Fintan Towey, assistant secretary general, Department of Transport; and Mr. Barry Lowry, chief information officer, Office of the Government Chief Information Officer, OGCIO.

Before we hear our witnesses' opening statements, I need to point out to them that there is uncertainty that parliamentary privilege will apply to their evidence from a location outside of the parliamentary precincts of Leinster House. If, therefore, they are directed by me to cease giving evidence on a particular matter, they must respect that direction.

Before I call Ms Canavan to make her opening remarks - she has five minutes in which to do so - on behalf of the members I wish to state that we have just received the 17-page document from our witnesses. It is very disrespectful to our committee members that we are only receiving this document at the last minute. It does not do justice to the information in the document and makes it very difficult for members to ask questions on matters that may already be dealt with within the document. I ask that that be noted. This is bad form, and many members have expressed dissatisfaction with receipt of this document a number of minutes before we started our official meeting. I call on Ms Canavan now to make her opening remarks.

Ms Elizabeth Canavan: First, I thank the Chairman and the committee members for the invitation to meet with them today. In respect of the late arrival of the opening statement, this is a very fast-moving situation and we are trying to give the joint committee the most up-to-date information on the situation. My apologies for that which has occurred on my end in trying to get the latest picture for the joint committee.

I am here this morning in my capacity as chair of an *ad hoc* sub-group of senior officials on Covid-19 that the Government established at the end of May. I will not introduce my colleagues as the Chairman has already done so.

As the joint committee is aware, the EU digital Covid certificate regulation was developed to facilitate safe free movement of citizens in the EU and the regulation became directly applicable to member states on 1 July. On 29 June, Ireland joined the gateway, meaning that certificates issued in Ireland are recognised by authorities in other EU member states and that Ireland can verify DCCs for travellers arriving from other EU member states. On 1 July, go live day, as a pilot run, we issued initial DCCs, including the digital signature attesting to the fact that it was issued by the issuing authority here in Ireland. On the same day, we had a team working at our ports and airports verifying quick response, QR, codes. On 9 July, Ireland published its travel rules. We were one of only four countries to do so at that stage.

The certificate is now fully operational. Since Monday, 19 July, the Government advisory on non-essential travel has been lifted. Passengers are encouraged to check the public health advice and restrictions in place in the destinations to which they are travelling. The public health measures in place for those arriving in Ireland will depend on their vaccination or recovery status and travel history. If a person is not vaccinated, however, the public health advice remains to avoid high-risk activities, including international travel.

Our approach to implementation of the DCC cuts across a number of Departments and Government agencies. The role of the group I chair has been to: develop a unified project co-ordinating respective efforts of colleagues around the system; identify potential risks and gaps; and progress mitigations and alternative solutions. Thanks to my colleagues, we have made significant progress to date on implementing what is a large and complex programme that has required delivery in a very tight timeline.

On behalf of my colleagues, I will give an overview of the approach adopted and progress to date. Our primary focus was to fulfil our EU obligations in a robust and effective way. In doing so, we had to be very mindful of developing the certificate in a way which provides the greatest assurance in line with data protection as regards what is sensitive personal information.

First, considering the pressures on the HSE and particular ICT teams following the cyber-attack, the OGCIO has undertaken to do the certificate-generation process on behalf of the Government. DCCs for vaccination and recovery are being produced by the OGCIO using data provided by the HSE. Vaccination certificates are being pushed out. This approach has enabled us to get certificates out to as many people as possible as quickly as possible.

Where verified email address are available, vaccine certificates are being sent out by email. Where email addresses are not available, certificates will be posted out to home addresses. This relates mainly to those vaccinated by GPs. To date, more than 2.1 million vaccination certificates have been issued, 1.15 million by email and 952,000 by post. As additional people become eligible for vaccination certificates, these will be issued automatically shortly after their second vaccination approximately five days later. Where there is insufficient contact information to send out a certificate, the call centre is available where a vaccine certificate can be requested once a person's identity and eligibility has been verified.

Is important to note that the certificates are generated based on available information. Data to support certification is the purview of the Department of Health and the HSE. The HSE has multiple data sources for vaccine and data recovery and the data quality is varied. Extensive data quality work was carried out in advance to ensure sufficient and fully accurate information was available to support both certificate generation and the issuing of them.

There will be circumstances where information needs to be updated on certificates and this can be done through the call centre. Significant work on data relating to persons who have recovered has been undertaken. Given the quality of this data and the relatively smaller numbers involved, we decided to provide recovery certificates on a request rather than on the push-out basis. This will allow us to ensure that we can complete missing data fields, authenticate identity and ensure that address and email details for issuing of the certificates are up-to-date and accurate. Recovery certificates will also be available on request through an online portal, which we hope to open later this week, or through the call centre, subject to verifiable evidence of recovery from a prior infection within the previous 180 days.

DCCs for negative tests will be provided through private operators which meet minimum

entry requirements. To provide citizens with EU digital Covid test certificates, providers of Covid-19 tests will be provided with access to the EU digital Covid test certificate service operated by the OGCIO. Access to this service will allow test providers to generate EU digital certificates for all negative or not-detected test results, in line with national and EU regulations. Approved access to the system is contingent on test providers being compliant with the relevant regulations and certain standards and obligations, which are detailed in the standard operating procedures. Prior to receiving access to that system, providers are required to review and digitally sign the standard operating procedures. A small number of private operators have already signed up to provide DCCs and further information on these providers will be available shortly.

An upgraded version of the Covid tracker app now allows people to upload their certificate, regardless of whether they received it in paper form or as a PDF, to a wallet on their phone. The tracker app serves as a pandemic response tool and carries a number of functions. These are independent of each other. It is possible for people to disable other features and use the tracker solely as a digital wallet for their DCC on their phone if they want to do so.

It is worth emphasising that the issue of privacy has added to the complexity of the task and has been given paramount importance by everyone working on the project. Data governance has been the subject of ongoing engagement with the Data Protection Commission to ensure the process is fully compliant with the general data protection regulation, GDPR. The requisite data controller and data processing agreements are all in place.

Discussions are ongoing between the European Commission and third countries with a view to facilitating interoperability and mutual recognition of certificates. The first country to achieve an equivalency decision was Switzerland on 9 July. It should be noted that the EU digital Covid certificate is not a travel document and the possession of the certificate will not be a precondition to exercise free movement rights. Therefore, travellers who do not have a DCC can provide other verifiable forms of proof of vaccination or a valid negative test in Ireland. Members will be aware of media reports in respect of travellers who have travelled to EU countries without a DCC. The Department of Foreign Affairs has been liaising with authorities and has been in direct contact with a number of affected citizens. Our understanding is that Malta has indicated that the digital Covid certificate is a requirement on the Re-open EU website and it has indicated that it will not accept handwritten certificates. The situation underlines our advice to all travellers that it is essential that they familiarise themselves with the rules relating to inbound travel and the process requirements for their destination. A great deal of information is available online and I urge anyone who is travelling to check on the online resources before they finalise their plans.

Passengers entering Ireland must fill in a passenger locator form before they arrive in Ireland. Failure to do so is an offence. The Covid-19 passenger locator form is now an online form. As of 12 July, carriers are obliged to check for a completed electronic passenger locator form, ePLF, before allowing passengers to board or embark. Through enhancements to the electronic passenger locator form, which are being finalised this week, travellers will be required to make a statutory declaration as to their travel status, whether they are vaccinated, recovered or in possession of a negative test and form of proof. This determines what other public health advice, quarantine or testing measures will be applicable to passengers, depending on the country they are arriving from. Once operational, the enhanced ePLF receipt will identify those that have a certificate of a European Medicines Agency approved vaccination, recovery or negative PCR test, or who are otherwise exempt from the requirement to have a negative PCR test. For those travelling on a vaccine or recovery certificate, no further pre-departure checks are required by

carriers. Passengers travelling with a test result will be required to provide proof to the carrier of a test taken not more than 72 hours prior to arrival or will be denied boarding or embarking. The ePLF is not reliant on the DCC but complements its use. The ePLF applies to all EU and non-EU passengers, with or without a DCC. Passengers arriving from designated states who have pre-booked a place in mandatory hotel quarantine will be met at the aircraft and escorted separately from other passengers through the airport building for check-in as required. Children aged 11 and under do not need to take a RT-PCR test prior to travelling to Ireland. Children of any age, travelling with accompanying vaccinated or recovered adults will not be required to self-quarantine post arrival. However, where one accompanying adult needs to self-quarantine, then all children must also self-quarantine, unless vaccinated or recovered themselves.

A verifier app has been developed to support checks of the DCC, which allows a mobile device to scan the QR code. The border management unit and An Garda Síochána are conducting spot checks of public health documentation, including the DCC, at ports of entry to the State for the purpose of ensuring the integrity of the enhanced public health regime. The verifier app has been made available to carriers, should they wish to avail of it.

It is acknowledged that there is considerable complexity associated with travel at the moment given the impact of Covid-19 worldwide. Part of the work of the group has been to provide a unified source of information to the public. There is comprehensive information on both the DCC and international travel in general on gov.ie/travel and www.dfa/travel. Both websites will be kept up to date with all the latest information. I cannot emphasise enough the importance of checking on these online resources if you can in preference to contacting the call centre this week.

The call centre has been created at an exceptional pace to manage the required workflows and communications. This has required an incredible effort across multiple Government agencies to put in place the people, processes and technology required. An interim emergency line was put in place from 13 July in advance of the contact centre going live on 19 July, given the level of public interest as soon as the first certificates began to issue. We know there have been long waiting times for many callers and the centre has not been able to meet the level of demand, which involved over 40,000 calls in the past two days and more than 34,000 calls yesterday alone. This far exceeds estimates of call centre demand based on an assessment of travel bookings and survey or insights data on travel intentions that Government or industry have access to. Unlike at many industry call centres, these are complex queries, with over 150 scripts developed to assist agents to answer queries. The rapid issuing of 2.1 million certificates in just over one week has inevitably bunched inquiries to the centre into these initial few days.

The centre ramped up to 55 agents between Monday and Tuesday, with a further 30 to be added on Wednesday. As agents become more familiar with the complexities of queries, we anticipate that the number of calls handled will increase. We had technical capacity issues on Monday and increased technical capacity from Tuesday morning through a second freephone number that will cater for a significantly higher number of calls. An increased number of agents are available to answer calls, but the call volumes are at unprecedented levels and the call centre remains exceptionally busy. We are adding further agents on a planned basis after training over the next two weeks. We urge people to only call the call centre if they have an urgent query and they are travelling in the next ten days. It can only support queries about vaccination certificates and recovery certificates. We have emphasised this in the communications but the centre is still getting calls from people with requests for certificates for PCR or antigen tests. These certificates are generated by third party providers and details of how that system works

are available on gov.ie/travel. Current demand suggests that many people who are calling are not due to travel in the short term. These non-urgent calls are adding significant waiting times to all calls and preventing many urgent calls from getting through. We urge people to only call the contact centre if they need to and are travelling in the next ten days.

Between Monday and Tuesday, the call centre initially handled approximately 2,800 calls. Many of these calls involved dealing with multiple requests so they are complex and take time. For example, there were requests for details for a full family. More than 1,000 certificate details have been sent for regeneration and it is expected that these will be reissued within five days. A further 700 queries have been sent to the HSE requiring further investigation before a certificate can be issued. The call centre will continue to evolve over the coming days with new services added to meet emerging concerns and demands from the public. A new online form to request recovery certificates for eligible persons will be released this week. We regret the delays some people are experiencing and we are learning and continuing to improve the service each day. For anyone who did not receive their certificate yet who is not travelling in the short term we suggest they wait a few more days as we are working hard to clear the final batches of certificates not yet issued, which is due to incomplete data. In addition, undelivered certificates by email and post are being reviewed and this may address some of the queries people may have. These are being proactively managed so that we can reissue as quickly as possible.

We appreciate that any member of the public who has not yet received a certificate or has an error on the certificate that may need to be corrected may be anxious. We are satisfied, however, that we will be in a position to resolve queries quickly and unless a person needs his or her certificate urgently we would encourage people to wait a few more days. The likelihood is that certificates not yet issued will arrive and as the call centre further ramps up we will be in a position to deal with all calls more quickly.

In summary, significant work has been undertaken over recent weeks including the technological developments that were required to be stood up at pace, complex data governance arrangements and the scaling up of all operational matters throughout the end-to-end solution. The process will remain under on-going consideration with a view to further refining and enhancing over time.

I commend colleagues across the system for the extraordinary effort and collaboration that has allowed for the data collection, certificate generation and the issuing of more than two million certificates from a standing start in just over six weeks. Again, I assure the public that every effort is being made to ensure that they can get certificates in good time to travel and that no effort is being spared to resolve delayed certificates and any certificate errors as quickly as possible.

Chairman: I thank Ms Canavan. There was a lot of information in that. Ms Canavan referred to the 34,000 calls yesterday, and 40,000 phone calls over the past two days. There is huge public interest in this. The purpose of today's meeting is to try to answer some of the questions that member of the public have. As public representatives, we have been getting many phone calls from people who are desperate for information. Hopefully, this meeting will bring some sort of clarity in respect of some of the questions people have. I thank all of our witnesses who have made themselves available today.

Deputy Colm Burke: I thank all of our guests and I also thank all of the people involved in the Government Departments and in the HSE for the work that has been done in trying to meet the timelines involved. I am aware that there are many challenges, but there are also concerns

among member of the general public.

I will open up by commenting on the issue of the call helpline. It just does not appear to be working. It does not seem to be able to deal with the volume of callers. Was any consideration give to whether this could be done by email rather than by having people waiting on calls? My office in Cork has been contacted by people who were waiting on the phone for two and a half hours and who still did not get an answer. Can we look at a better system rather than people having to wait for two hours on the phone?

In media coverage this morning, we heard of the people who had arrived in Malta and who are now required to go into quarantine, a matter to which Ms Canavan referred. They had cards proving vaccination, but that was not acceptable in Malta. What can be done to deal with that issue via diplomatic channels? Do we have someone on the ground in Malta to deal with the challenges involved? It must be extremely difficult for a family to arrive there and find that they are all obliged to quarantine for the next ten or 14 days.

The committee has received correspondence on the breach of the whole issue of the fundamental rights, the infringement of rights, and what is contained in the app. Perhaps Ms Canavan or one of her officials will go through that for us. The correspondent sent a very detailed letter. The civil liberties group raised a lot of issues, namely that we are not complying with people's personal rights with regard to the data being stored on the app. Maybe the witness will start with those three questions.

Ms Elizabeth Canavan: On the helpline, we carried out some analytics prior to the setting up of the call centre. We were doing it very rapidly, so we were always under pressure with the build. Notwithstanding that, any data we had on intentions to travel and bookings made certainly would not have given us cause to think we would have the numbers of calls that we have had. There is no doubt that this volume is way beyond what we would have anticipated. We were on a very tight schedule.

Industry colleagues who have been guiding and helping us have been telling me that it is pretty unprecedented to start up in six weeks. That is not an excuse, it is just the reality. We did our best to anticipate the level of demand but the indications did not give us any sense of that. Notwithstanding that, we would like to further automate the process. As I have said, we pushed out as many certificates as possible for that reason and so most people who wanted a certificate got one. We acknowledge that there have been some bounce backs and we must deal with those. There is a small number still being issued over the next day so.

We are setting up the recovery portal that will actually divert most of those calls online, where a person can complete the form online and fill in the data in their own time. We can generate a certificate based on that. We are looking to further automate the system as we work through and assess what are the kinds of queries that people have so we can process some of those calls quicker.

There is a lot more information available than people may realise. We are trying to direct people to the website also. Mr. Tierney may want to add to this on the stand-up on the all centre. We are adding capability every day.

Mr. Derek Tierney: Good morning Chairman and members. We stood up the call centre using a mixed model of existing call agents across our system. We are also using support from a private partner. As Ms Canavan said, we opened yesterday with 55 staff. We will increase

that to 85 by tomorrow and to more than 100 into next week.

In fairness, the Deputy has raised an important point regarding other channels. We did look at email but our agents have functionality to fix queries at source. We can resolve the query at source within the existing HSE data systems rather than just creating another backlog that needs to be resolved. Where we cannot fix data it is escalated to the HSE to resolve.

We hope to launch a recovery portal tomorrow that will allow people to self-serve queries around recovery certificates, and over the coming weeks we will increase additional channels such as SMS, chat, and callback. This will be over the next two to three weeks. Hopefully, this will give other avenues or other channels by which members of the public can engage with the call centre.

Ms Elizabeth Canavan: The Deputy's second issue was around people who had travelled to Malta. We do not have anyone on the call this morning from the Department of Foreign Affairs but we have been assured that people are getting every assistance that can be given on the ground there. Obviously, I will not comment on individual cases but this situation does very much underline the need for people to check. This is a highly volatile situation worldwide. The rules are available online about what is required. If one looks at the rules for entering Malta, the requirements around the DCC are very clear. They do not accept handwritten certificates. The rules are either being updated on a regular basis by ourselves and by other countries. We would really urge people to check with their destination before they finalise their plans.

Senator Colm Burke: Can we get more information out to people on that? The Department and the HSE have advised people to check but I am not sure whether the messages strong enough. It is difficult now when people arrive with the family and suddenly find that they are not complying with the regulations.

Ms Elizabeth Canavan: Our landing page is *gov.ie/travel* has a fairly easy and intuitive drop-down menu. Included in this is access to the Re-open EU website. This allows a person to insert the information on where he or she is travelling from and to. It has all of the up-to-date information. We will make sure to amplify this over the course of today also.

Last of all, on the app, we have been very careful about the development of all the data flows around the issuing of certificates. Everything we have been doing has been done in conjunction with our having conversations with the Data Protection Commissioner. I will hand over to my colleague, Mr. Lowry of the OGCIO, who is most familiar with the app and its development.

Mr. Barry Lowry: I thank the Deputy for his question. The app was developed on a privacy-first basis. It was developed in a format we call a decentralised solution. In other words, Government does not know what people are doing with the app on their phone. The data collected on location and so on is very broad so an individual cannot be identified. The app was actually developed to meet the best principles of privacy right the way through and it was developed through consultation with the public. As Ms Canavan said, there are three main parts to the app. An individual can choose to switch off one, two or all of three if he or she wants. He or she can choose to use any part he or she wants, so it is very privacy-oriented.

On the Deputy's first question, we looked at various channels to support the public but unfortunately most of the requests coming through the service desk are about getting certificates fixed. Obviously the same issue applies as it is an issue of privacy and therefore some questions must be asked.

Deputy Colm Burke: The letter we got from the Irish Council for Civil Liberties, ICCL, says this new functionality would go far beyond the app's original scope and would, *prima facie*, not be in accord with the European Data Protection Board guidelines in respect of tracking apps. That is what ICCL is saying to us. What is the officials' response to that?

Mr. Muiris O'Connor: I can come in there if that is okay with the Deputy and Ms Canavan. The Covid tracker app was always more than an exposure notification app and always had multiple purposes, as Mr. Lowry set out. It is technology deployed as a pandemic response tool and it already carries the function of exposure notification, as the committee knows. There is also the check-in function, and it is an information platform. What we are doing here is adding a digital wallet that allows people to carry the EU digital Covid certificate electronically. Its architecture is decentralised and it has been built on the basis of privacy by design. I, as well as the HSE, am in receipt of the correspondence from the ICCL and Digital Rights Ireland. We will be responding to them and have engaged with them over the last while. An important thing is that as a pandemic response tool, all this infrastructure will be dismantled at the end of the pandemic.

Deputy Colm Burke: I am raising it because I do not want to have a situation where-----

Chairman: The Deputy needs to conclude.

Deputy Colm Burke: -----something we are using will suddenly have to be stopped. I want to ensure we have clarification on that. The ICCL and Digital Rights Ireland are saying that it is not in accordance with the European Data Protection Board guidelines. They have set this out in writing and that is why I am raising this issue.

Mr. Muiris O'Connor: There may be a misunderstanding. If the app was set out with a scope and purpose confined to exposure notification at the start then the advice from the European body would be relevant. Instead, we set the app up very deliberately and in public, through the data protection information notices and the data protection impact assessment, as a pandemic response tool with a number of functions. We worked very closely with Mr. Lowry, across Government and with our data protection office so that was understood. The functions are entirely separate. One can turn off exposure notifications, one does not have to check and one does not have to read the update information. One can choose to carry any or all of those functions.

Due to the vaccine roll-out and the fact the central database was established in April and that the HSE was deploying vaccines as best as possible before that, we had to issue, as the committee knows, almost 1 million paper certificates. The digital wallet facility on the app is very convenient. It is completely at the discretion of the individual. It is completely private where what every individual does is concerned but is a facility to have a digital version of one's certificate. That was part of our obligations, as we understood them, under EU law.

Chairman: I thank Mr. O'Connor. I need to move on. Deputy Cullinane is next.

Deputy David Cullinane: I have a number of very simple questions for Ms Canavan to begin with. I am trying to get a sense of what line Department has overall responsibility for the DCC.

Ms Elizabeth Canavan: As I have outlined, it is distributed with respect to the work involved in order to get it done. In terms-----

Deputy David Cullinane: Does any Department have overall responsibility?

Ms Elizabeth Canavan: In terms of, say, data control, the management of the call centre and the policies from that point of view, it is the Department of Health. As I said, the OGCIO has, under data processing agreements, developed the certificates.

Deputy David Cullinane: My time is very limited. Ms Canavan is saying the Department of Health has elements of it and other Departments have other elements but that there is no Department with overall responsibility.

Ms Elizabeth Canavan: It is a cross-Government project.

Deputy David Cullinane: I understand that but what I am saying is no Department has overall responsibility.

Ms Elizabeth Canavan: With the DCC and its requirement, it is generally, in most countries, considered to be within the scope of the health department and-----

Deputy David Cullinane: Okay, so the Department of Health is the lead Department.

Ms Elizabeth Canavan: It is for most of the elements, yes. Certainly for data control, which is very important, it is the data controller along with the HSE.

Deputy David Cullinane: Okay. What Department is responsible for the travel element?

Ms Elizabeth Canavan: In terms of the policy?

Deputy David Cullinane: Yes.

Ms Elizabeth Canavan: As the Deputy knows, the Government is responsible for deciding on the travel policy.

Deputy David Cullinane: Yes, but which Department is responsible? What of the queries, like those from people who are stuck in Malta, for example? There are questions of whether or not you need a DCC to travel in the first place or if other forms of vaccine proof may be acceptable. Which Department is responsible for that?

Ms Elizabeth Canavan: These are policies of other European countries. To ensure that citizens are getting the information they need, we are using the *gov.ie* platform. That is supported by the Department of Health, ourselves and the Department of Foreign Affairs. We are ensuring we have the latest information, particularly in respect of other jurisdictions, available on that platform.

Deputy David Cullinane: Okay. I move to Ms Canavan's opening statement and some of what she said about call centres. She said:

We know there have been long waiting times for many callers and the centre has not been able to meet the level of demand, which involved over 40,000 calls in the past two days and more than 34,000 calls yesterday alone. This far exceeds estimates of call centre demand based on an assessment of travel bookings and survey or insights data on travel intentions that Government or industry have access to.

I am sure Ms Canavan is aware the DCC is also being used for domestic purposes. Thus when people are calling the call centre, it is not just in relation to travel queries. People will

also have had queries about its use for domestic purposes. Why was that not built into the officials' assumptions about how many calls were anticipated?

Ms Elizabeth Canavan: As the Deputy knows, the issue of the use of DCCs in other settings, including hospitality settings, was only decided by Government last week. The task set before us was in the context of our European obligations, the free movement obligations and the travel between states. That was our primary focus and that was what we built on.

Deputy David Cullinane: I apologise to Ms Canavan but I must stop her there. We have had Ministers say that the DCC is also being used for domestic purposes. We have had many people making queries about when they will receive their DCC but also about proof of recovery. We know that was one of the reasons the helpline was being set up, or at least it was one of the uses of the helpline. What Ms Canavan is saying that a number of weeks ago, when she and others first looked at this it was for travel purposes. However, because there have been discussions with industry we have known for a long number of weeks that it was going to be used for domestic purposes as well. What Ms Canavan stated earlier is that we based our assumptions on how many calls we would receive on international travel alone and not on people making inquiries about the certificate's use domestically. Does she then agree that it is no wonder the system was overwhelmed?

Ms Elizabeth Canavan: Yes. In the past fortnight the Government made a decision on the use of certification in the context of hospitality. I acknowledge that. Regardless of what our information was at that point, however, we could not have built the call centre faster than we did, which was within six weeks. We have stood it up in an incredibly short period and we are continuing to add to it, but, regardless of the additional information we had in the past two weeks and the expected demand, which we could have of course anticipated in the past fortnight, it would not have allowed us to build the capability and capacity any faster than we had already planned. We have continued to accelerate that capacity. We put in an emergency line last week to try to spread out some calls. We have also developed the portal for recovery certificates for later this week in response to what we now know was a much larger likely demand than we had anticipated when we started.

Deputy David Cullinane: It would not have taken a rocket scientist to figure out that there would be very high demand. I am not putting all of this on Ms Canavan. However, the communication has been absolutely appalling. People anticipated that they would be able to make a call and get a response and that has not happened. I want to drill down into the information. Ms Canavan said that 40,000 calls were made on Monday and Tuesday. Is that right?

Ms Elizabeth Canavan: More than 40,000.

Deputy David Cullinane: That was the number of calls made. Is Ms Canavan saying that only 2,826 calls were handled on Monday and Tuesday?

Ms Elizabeth Canavan: That number of calls were processed, which means that the callers spoke to an agent and had their specific query dealt with. There would also be people who got information as part of the interactive voice response, IVR, system, which allowed them to either be redirected, get the information they were looking for or be directed to the Department of Foreign Affairs' lines.

Deputy David Cullinane: Is there a breakdown of those figures?

Ms Elizabeth Canavan: Not at this stage.

Deputy David Cullinane: That is part of the problem. We can take it for granted that 2,826 people had their calls processed and their information processed. I would imagine that there are thousands of people who did not. Would it be fair to assume that there are many people who simply did not get processed on Monday and Tuesday?

Ms Elizabeth Canavan: We acknowledge that. We are working very hard to ensure that people get the information in the easiest possible way. There are also people calling at the moment about matters with which the call centre cannot deal. For example, some people call looking for test certificates, a matter which the call centre does not handle, or inquiring about recovery certificates, even though they are not eligible for them. We have a raft of different calls and we are analysing all of that to reconfigure the call centre, manage our scripts and look to see what else we can automate in order to manage that better.

Deputy David Cullinane: How many staff members are working in those call centres at this point? Are they all based in Ireland or are some based outside Ireland?

Ms Elizabeth Canavan: I will hand over to my colleague Mr. Tierney to answer that.

Deputy David Cullinane: I just need the numbers because I have very little time.

Mr. Derek Tierney: As I said earlier, we have 55 agents on our books today. We will increase that number to approximately 100 by this day next week. We are going from 55 today to 85 tomorrow and more than 100 next week. The majority are based in Ireland across existing agencies. They are Government and contracted staff. Our initial call agent volumes were based on travel booking data. The Deputy makes a fair point, and there is a wider societal debate on the use of the DCC. We have already booked up call agents in excess of those initial demands. As I have said, we have added staff-----

Deputy David Cullinane: I just needed the figures so I thank Mr. Tierney for that. My final question relates to a tweet that was put out by the Minister of State, Deputy Ossian Smyth, on Monday. He said: "... the DCC is not essential for travelling, you can still travel on your vaccine card or a negative PCR test!" As we know, however, and as people in Malta found out, that is in fact not the case. Those people now have to quarantine. What is the advice from the Department? Should people be travelling without a DCC? Are there other countries where it might be problematic and where people might get into difficulty if they travel? This is all part of the confusion. To say that we could not have anticipated the volume of calls is to stretch people's patience. To then not build into the assumptions about the number of calls that the certificate would also be used for domestic purposes, which would drive up the demand and the pressure on the system, will also stretch people's patience. Then there are the contradictory statements coming from Ministers. A Minister of State indicated that people could travel without the certificate and that their vaccination cards would be sufficient. Now, however, people have ended up in quarantine. Can one of the witnesses clarify what the actual advice from the Department is for people who are travelling?

Ms Elizabeth Canavan: Of course we were anticipating a greater number of calls as of the past couple of weeks. We acknowledge that. We bumped up our numbers and put in additional resources to try to respond to that. To be clear, we anticipated that and did our best to meet that need.

As regards people travelling, it is very important that people do not conflate their right to travel or their right to board with their DCC. The DCC is an accreditation that is verifiable and

accepted across the EU, which tells the country into which people are arriving what their status is. Those countries have their own quarantine rules and their own domestic policies about what they accept as verifiable proof. What we are saying to people is that the most important thing they have to do is check what the country requires. Most countries require a passenger locator form in advance and many countries require people to indicate their vaccination status, or test or other status, as part of that. All countries that are participating in the DCC-----

Deputy David Cullinane: I accept all that, but my point is that a Minister of State said that a DCC is not essential for travel. I am simply asking if that is good advice.

Ms Elizabeth Canavan: We must be very clear that the European initiative is there to facilitate travel, not prevent it. No country is allowed to prevent anyone from travelling on the basis of whether they have a DCC. What countries can do have are domestic rules about public health restrictions and what they accept as verifiable proof. That is the difference between the two and that is what people have to be conscious of. The Re-open EU webpage is helpful in this regard. People can put in where they are coming from and where they are going and it will set out all the rules in detail as to what is accepted, what is not and the various quarantine, test or other rules that apply at the destination to which they are travelling. This is a highly volatile situation and it is very difficult for us to give definitive advice on any particular country on any given day. We ask people to make sure they check before they finalise their plans or travel to make sure they have everything they need.

Senator Lorraine Clifford-Lee: I thank the guests for coming in. Like my colleagues, there are a number of issues I wish to raise about the certificate and the helpline, but I will focus my questions on the Irish language and how it relates to the certificate. I am sure the witnesses are aware that the spelling of names containing a síneadh fada has been completely incorrect. Scrambled versions of people's names were printed on the certificates and this has caused great upset and distress for people across the country, but particularly in Irish-speaking communities. When will a correct version of people's certificates issue to them?

Ms Elizabeth Canavan: I will hand over to my colleague Mr. Lowry to explain what happened and where we are at with remedying that issue.

Mr. Barry Lowry: I thank the Senator for her question. First, I would like to explain what happened. How the process works is that we receive-----

Senator Lorraine Clifford-Lee: I am sorry to interrupt Mr. Lowry. I have a number of questions so I ask him to answer directly because we have limited time. I just want to know when those people will get their correct certificates.

Mr. Barry Lowry: Okay. The issue has been fixed but we do not know who has received an incorrect certificate. There is a process of resolution whereby those people will need to phone the call centre and the call centre can reissue their certificate with the proper spelling on it.

Senator Lorraine Clifford-Lee: That is completely unacceptable. The mistake was not made by those people and they should not have to go out of their way to correct it. Can Mr. Lowry put a remedy in place? It should be easily identifiable in terms of who got the incorrect certificate.

Mr. Barry Lowry: That is why I will try to explain what happened at the beginning, because it is important to the resolution. In some cases, there were issues with the data input from some of the GP systems. In others, it was how the file was set up for processing for print. The

second of these has been resolved. As regards the first, we simply do not know where data is incorrect and where it is not. If people fall into that category and if they let us know, we can investigate and reissue their certificates.

Senator Lorraine Clifford-Lee: In terms of the category in respect of which Mr. Lowry stated that the printing issue has been resolved, can those people be identified?

Mr. Barry Lowry: What we are trying to do is identify which people might have fallen into that category. The difficulty is that the vast majority of certificates that were posted, as opposed to emailed, related to people who were vaccinated at GP surgeries. We are not always clear as to the instances where it is the data entry issue arising or where the data is correct but the error arose in the preparation for printing. We are trying to investigate but it is a slow process.

Senator Lorraine Clifford-Lee: Given the number of difficulties you are having with the call centre, will there be a dedicated line set up for people to correct this mistake?

Mr. Barry Lowry: We have a resolution process. As Ms Canavan explained at the start, if we could be in a position in which priority calls, first of all with regard to travel, are coming to the call centre, then we can get those addressed as a matter of priority. The difficulty is we do not know. We are dealing with health data and we do not know the priority of individuals when we are sending them their certificates. Some people have no intention of travel. Some people have urgent travel coming up, but there is no way to discern that from the data we have.

Senator Lorraine Clifford-Lee: In view of the upset that has been caused by this and the complete lack of respect for the first language of this country, I suggest that a dedicated line be set up. In light of the fact that the mistake was not made by the people calling - is due to the system and relates to both categories Mr. Lowry has identified - can I suggest that consideration be given to establishing a dedicated line for people to contact? The DCC is not completely bilingual, as is required. There is a big section of information, approximately eight lines in total, for which there is no corresponding Irish translation. As it happens, the name of the country is incorrect on the certificate. It says Republic of Ireland and we all know that the name of country is Éire or Ireland. Why and how did this happen? Will these lines be completely translated going forward for any digital certificates yet to issue?

Ms Elizabeth Canavan: I will hand over to Mr. O'Connor.

Mr. Muiris O'Connor: I acknowledge the error in the incorrect use of the name of the country. It is being corrected going forward. With the Covid tracker app, if people choose to scan their paper certificates and load electronic versions into digital wallets on their phones, the error relating to the name of the country will be corrected automatically. I take a personal responsibility for what happened here because the Department of Health is the issuing authority. This happened as a result of the pace at which the work was being done and it is an oversight I am sorry for.

The structure of the form otherwise is fixed. We have a balance of Irish and English in the form and it would be unwise to adjust this. The form is the one recognised all over the European Union-----

Senator Lorraine Clifford-Lee: It is supposed to be completely bilingual but there is a large section of eight lines that is just in English. When will the Irish translation of these lines be made available? It is a legal requirement.

Mr. Muiris O'Connor: I will have to come back on that. There would be many considerations to take account of in adjusting the form. It is shared across the European Union. It is interoperable and it contains many features.

Senator Lorraine Clifford-Lee: The requirement to have the form completely bilingual was flagged as far back as April. It is completely inconceivable that this was not issue when the form was being planned. I know it is probably difficult to do it now, but does Mr. O'Connor not see the big error there by not making the form bilingual?

Mr. Muiris O'Connor: There is a balance of Irish and English in the forms. I do not have one in front of me-----

Senator Lorraine Clifford-Lee: There is not a balance. It is supposed to be translated in its entirety. There are some bits of Irish but it is not completely in Irish. While I am on that topic, the translation is not even correct and there are a number of big errors within it. What is stated does not make sense. The phrase "disease or agent targeted" is completely incorrectly translated. The Irish meaning of that is that the person who holds the certificated has Covid-19. Is Mr. O'Connor telling me that the whole form will not be available bilingually and that the big errors in the translation will not be rectified?

Ms Elizabeth Canavan: Can I suggest that we come back to the Senator on those points?

Senator Lorraine Clifford-Lee: It is a simple "Yes" or "No" answer.

Mr. Muiris O'Connor: All of the essential pieces of information on the form specified by the regulation in Europe are in both languages. We will look into it. I do not have the form in front of me right now. We will look into it and see what we can do.

Senator Lorraine Clifford-Lee: I am not satisfied with those answers. Mr. O'Connor stated that it will not be changed, basically. The form is supposed to be completely bilingual. With regard to having a bad translation, I want to know how the language used on the form was translated as badly as it was.

Mr. Muiris O'Connor: We will take it away and have a look at it.

Senator Lorraine Clifford-Lee: Was it translated in-house or was there an outside translation company used?

Mr. Muiris O'Connor: I do not have that information right now. I think it was an outside company contracted to the civil service.

Senator Lorraine Clifford-Lee: I ask the witnesses to get back to me on those specific questions. Will there be any call centre agents available to take queries through the Irish language? There are currently no Irish-speaking agents available.

Ms Elizabeth Canavan: I am not sure if Mr. Tierney has any information on that to hand.

Mr. Derek Tierney: I do not have it to hand. I will revert, through the Chair, to the Senator.

Senator Lorraine Clifford-Lee: With regard to the situation in which people's names on their digital certificates do not exactly match the names on their passports, my digital certificate, when I eventually get my second shot, will have Lorraine Clifford-Lee as that is the name I registered with but my passport is in my name prior to marrying. It is just Lorraine Clifford.

Will I be able to use that?

Ms Elizabeth Canavan: What we are saying to people is we know what we can look at in the context of people arriving back to Ireland but we do not want to give any false assurances to people travelling elsewhere. There will be facility to amend that to match the passport. That can be dealt with and the certificate can be reissued on that basis.

Senator Lorraine Clifford-Lee: There is a tradition in Ireland of people sometimes being known by their middle names but their first names are different or people use the Irish versions of their names. A person's name might be John but he might go by Seán and registered for his vaccine as Seán. There will be a facility to rectify that.

Ms Elizabeth Canavan: We are assuming that what most people will want to do is have their certificates match their passports for travel purposes. If we can authenticate that people are using their known names, we will be able to facilitate that.

Senator Lorraine Clifford-Lee: I would appreciate if the witnesses could get back to me on the questions I asked. I will leave it at that.

Deputy Róisín Shortall: I thank all our guests for attending. My first question relates to the Covid tracker app and the decision to allow the DCC information to be uploaded on to that. The witnesses might explain how the Department of Health and the HSE made these changes to the app without a proper data impact assessment having been carried out.

Ms Elizabeth Canavan: I will hand over to Mr. O'Connor and Mr. Lowry with regard to the app.

Mr. Muiris O'Connor: I thank Deputy Shortall. I can assure her that we did not make the changes without an assessment of the data protection implications. The app advisory group, which I chair, met and considered the matter and after deliberation approved the addition of the additional function.

The data protection impact assessment has been updated accordingly and it is publicly available on our websites. The data protection impact notice - a shorter, more accessible document - has also been updated. We have, therefore, fulfilled all our obligations under data protection in respect of the app.

Deputy Róisín Shortall: The Data Protection Commission, DPC, is satisfied with that.

Mr. Muiris O'Connor: The DPC does not ever confirm satisfaction but we have engaged with it. It is fully aware of what we did and that we were intending to do it. One does not get approval from the DPC. It reserves the right to maintain its role as regards the operation of the app and hold us to account for the data protection responsibilities that we have. We treat those very seriously and the app is absolutely privacy preserving.

Deputy Róisín Shortall: Is Mr. O'Connor saying that no issues were raised by the DPC?

Mr. Muiris O'Connor: In the context of the delivery of Ireland's obligations under EU regulations on the operation of the digital Covid certificate, no issues were raised with us.

Deputy Róisín Shortall: I am sorry; I mean specifically the decision to upload the digital Covid certificate, DCC, information on the tracker app. Mr. O'Connor is saying no questions were raised on that action.

Mr. Muiris O'Connor: Yes, that is correct.

Ms Elizabeth Canavan: For clarification, it is a wallet facility. It is a convenience facility. A person does not have to give that information to anybody he or she does not want to give it to and nobody else can see it apart from that person, to be very clear.

Deputy Róisín Shortall: I want to go back to that issue of the Minister of State, Deputy Smith, and the tweet saying that the DCC is not essential for travelling. There is much confusion around this generally. I full appreciate that as officials, the witnesses have been asked to do many things in a very short space of time and some of them questionable. What now is the advice that Ms Canavan would give to people travelling with regard to the need for having a DCC? Can she say that in one sentence?

Ms Elizabeth Canavan: If a person is eligible for a DCC, our advice would be to for him or her to use the DCC when travelling, absolutely.

Deputy Róisín Shortall: Would Ms Canavan say to people it is not essential to have that?

Ms Elizabeth Canavan: Again, it is actually part of the EU regulation that it cannot be a barrier to travel. It cannot be a requirement to travel, just to be clear. We do not want to conflate those two things. It is actually a requirement under the regulation that it cannot be used to prevent travel. It is there to facilitate travel. It is a proof that all countries understand its validity, how robust it is and that it is verifiable. That is what it is. Some countries are saying that is the standard they require. We cannot determine what other countries will say but the information on what standard they require is available on that re-open EU website. We would say to people that it is the highest standard of proof for travel within the EU.

Deputy Róisín Shortall: I will pose the question a different way. Can the vaccine certificate or negative test results be used in place of the DCC?

Ms Elizabeth Canavan: It will depend on the country a person is travelling to. That is what I am saying to the Deputy. If she goes into that website, it will tell her. Some countries will accept it but not all.

Deputy Róisín Shortall: That needs to be clarified.

Ms Elizabeth Canavan: Yes, absolutely.

Deputy Róisín Shortall: That is saying the DCC is not essential, which has caused a lot of confusion and inconvenience to people.

Ms Elizabeth Canavan: We have this information up on our landing page and we are continuing to bring forward and amplify the issues that are arising. We will continue to do that in the coming days. I absolutely agree.

Deputy Róisín Shortall: I thank Ms Canavan. Are there plans for a public information campaign in that respect, given the bad experiences people have had over recent days?

Ms Elizabeth Canavan: We have run a print advertisement campaign and a radio campaign in the last week to ten days. What I can say is that there is so much complexity, it is not possible to give a whole lot of information in those types of campaigns.

What we are really doing is directing people to the *gov.ie* travel advice section. There is re-

ally detailed information there. We have tried to make it as intuitive as possible. We have tried to answer as many questions as we can. We are updating that on a daily basis, in real time, in terms of any issues that are coming up. It is, therefore, a really good resource for people and anyone who can access the online information should do so. It is very up to date. That is our primary focus. It is very difficult to make general statements in a print or radio advertisement but we are trying to direct people to that source.

Deputy Róisín Shortall: People should be very wary of the different rules for travelling to different countries-----

Ms Elizabeth Canavan: Absolutely.

Deputy Róisín Shortall: -----when some sources are saying a person does not need a DCC. That is the point I am making.

With regard to text documents, Ms Canavan said there will be verification of the digital Covid certificate and that the board of management unit and An Garda Síochána will be conducting spot checks. There is much concern about these proposals regarding travel but also with regard to indoor hospitality and whether the systems will actually work and whether there will be real enforcement. I believe many people doubt whether there will be. Have the board of management unit and the Garda been provided with additional resources to carry out these spot checks?

Ms Elizabeth Canavan: I will hand over to my colleague, Mr. Gilbride, from the Department of Justice.

Mr. David Gilbride: Good morning, Oireachtas colleagues. I thank the Deputy for the question. The EU guidance is very clear that the check should be made in the country of departure, in the first instance-----

Deputy Róisín Shortall: I am sorry; if Mr. Gilbride does not mind, can he answer that question? Have those two agencies been provided with additional resources?

Mr. David Gilbride: With regard to the board of management unit, two types of additional resources have been provided. First of all, we have provided additional technology to it in terms of the verifier app and the hardware required to allow them to do that. We are also providing additional staffing at the airport to ensure that we have adequate staffing to make sure all our emigration ports are open at all times and that the additional work associated with checking is properly resourced.

An Garda Síochána has equal-----

Deputy Róisín Shortall: Because the effects on travel have been so incredibly lax over the past year or so, can Mr. Gilbride send us on the details of the additional resources, including staff resources, that will be available to both of those agencies?

Mr. David Gilbride: Certainly, with regard to the management unit. I will contact colleagues in An Garda Síochána regarding the matter.

Chairman: I thank Deputy Shortall. Deputy Gino Kenny is next.

Deputy Gino Kenny: I thank all our witnesses today. I know this is a very complex issue and we are living in unprecedented times. The opening statement referred to certificates for

persons not vaccinated in Ireland. How can somebody from Britain who is coming to Ireland as of now, for example, access indoor hospitality as of next Monday if they have been vaccinated in Britain? How can that person actually get a DCC in order to access indoor hospitality?

Ms Elizabeth Canavan: The regulations and rules that will apply to hospitality are currently in development. They are not the work of this particular group in terms of the standard that will be required. It is fair to say that as it stands, we have been recognising the NHS certification. A person, therefore, does not need an Irish certificate in order for it to be recognised. It simply needs to meet a certain standard and that will be set out in regulations. For the purposes of travel, that standard is set out in regulations.

Deputy Gino Kenny: Ms Canavan in her statement said the discussion regarding third country passengers is ongoing. Take, for example, an Irish passport holder who is living in the United States, Canada, certain parts of the Middle East or anywhere else. If Irish people living abroad come back to Ireland, and in the context of the equivalency granted in this regard to Switzerland in July, what will the time aspect look like for them? Some of this may be outside the remit of Ms Canavan, of course.

Ms Elizabeth Canavan: It is helpful if the EU takes a view on interoperability, but it is of course open to us to determine what standard we set and what we consider to be robust and verifiable proof. It will be possible, therefore, for people to meet a standard without the EU having declared that there is entire interoperability in this respect. Our travel regulations allow us to accept certificates once we are satisfied that they are verifiable, robust and of a standard equivalent to what we are getting in the EU digital Covid certificate system. We have the capacity to do that without waiting on the EU, but obviously interoperability gives us even more confidence.

Deputy Gino Kenny: Turning to vaccines that have not been approved by the EMA, a cohort of Irish people living in the United Arab Emirates, UAE, were vaccinated with such vaccines. What will happen to people in situations like that? Irish people in the UAE were administered a vaccine called Sinopharm. What will happen when those people come back to Ireland?

Ms Elizabeth Canavan: I will hand over to Mr. O'Connor to address the EMA standard.

Mr. Muiris O'Connor: In short, the EU certificate only applies to the suite of vaccines approved by the EMA. Vaccines not on that list would not count towards vaccination status under the EU system. Regarding third-country equivalence, as the Deputy is aware, Switzerland has an EU-level equivalence. Some 40 other countries are discussing this matter with the EU and have submitted applications for equivalence decisions, so I expect there will be quite a bit of development in this area. As Ms Canavan said, it is best that this process is done at EU level, but we do have discretion to recognise appropriate certificates.

Deputy Gino Kenny: Is Britain one of those 40 applicant countries?

Mr. Muiris O'Connor: Yes, along with the US, Canada and many others.

Deputy Gino Kenny: Senator Clifford-Lee already raised the issue of those who have been vaccinated and who have different names printed on their vaccination certificates and passports. Someone in that situation will then have to ring the hotline. What process will be followed in this regard and what will the timeframe be to have such a change made? I refer to the time from the initial phone call being made to the certificate being re-examined and reissued by email or

post. I ask this question about the timeframe involved because there is great demand and a high volume of phone calls.

Ms Elizabeth Canavan: If a call is processed and if the change requested is not complex, and even if it is necessary to go right back through the system to make that change, then our view is that we should be able to reissue that certificate within five days. The process may be a little faster if a situation is more straightforward, but we are aiming for five days. I ask Mr. Lowry to comment on whether that is a fair summation of the situation.

Mr. Barry Lowry: Yes, the target we are working to is five working days. However, as Ms Canavan said, there may be instances, and there may be many of them, where we can reissue certificates faster. When people are enquiring, it would be preferable if they could give us an email address, because it cuts out the need for post.

Deputy Gino Kenny: That is fine. The change being made could be as easy as altering a name from “John” to “Seán”. It could be as simple as that.

Mr. Barry Lowry: Some changes which are relatively simple to make, such as a different email address. However, if a fundamental change is being requested, then further investigation must be undertaken to ensure that the health record of someone else is not compromised. That is why Ms Canavan said that some requests can be a little more complex. In the majority of instances, if the changes required relate to something like people’s email or postal addresses, as does happen, then those requests should be pretty straightforward to fix and it should be possible to get the replacement certificate sent out quickly.

Ms Elizabeth Canavan: I will just add that we must be satisfied that we can verify that the change being requested is a valid one and that the person calling is the person concerned. Therefore, we would have to assure ourselves regarding such matters in cases where, for example, an identity change is required. We must be careful in that type of situation.

Deputy Gino Kenny: How much worry is there about potential fraud in respect of these change requests? How worrisome are situations where people’s identities could potentially be compromised? Nothing is bulletproof and that could conceivably be done, so how concerned are the witnesses about the possibility of fraudulent certificates being issued and people’s identities being compromised as a result?

Mr. Barry Lowry: We are always extremely worried about attempts at fraud in all matters of digital transactions with State agencies. That is why one of the things we have in development is a self-help portal. However, one of the things we must do is to ensure that the portal is not an easy target for fraud or third-party attack. As the Deputy will be aware, health systems are often seen to be easy targets for such third-party attacks. Therefore, part of the time required to build this self-help portal has been devoted to creating adequate security around the whole process, whether that concerns individuals making contact by phone or online.

Deputy Gino Kenny: I thank Mr. Lowry.

Chairman: I call Senator Conway.

Senator Martin Conway: I thank our guests for attending. I ask them to confirm how many certificates had been issued as of the close of business yesterday.

Ms Elizabeth Canavan: We were at 2.1 million then. Mr. Lowry may perhaps have up-

dated figures.

Mr. Barry Lowry: No, I am using the same figures as those at the close of play last night. The total number of certificates issued then was 2.1 million. Of those, 1.1 million had been emailed, 950,000 had been posted and 77,000 were due to be processed overnight. We expect that those latter certificates will go out safely today.

Senator Martin Conway: So approximately 2.2 million certificates will have been issued as of the close of business today. What is the shortfall remaining? How many certificates remain to be done now? How many have had complications? How many emails have bounced back?

Ms Elizabeth Canavan: I ask Mr. Lowry to comment on the bounce backs relating to emails and letters, and then Mr. McCallion may wish to contribute regarding what we think are the number of certificates outstanding.

Mr. Barry Lowry: That is fine. Of the 1.1 million certificates emailed, 7,500 have bounced back, that is, the email addresses are no longer in use. Therefore, we know we have had a delivery failure with those certificates. We can only assess the first 500,000 of those certificates which have been posted, but 7,920 of those were not successfully delivered. If we double that figure up, we will then be talking about 15,000 to 16,000 certificates that did not deliver properly from the total of 935,000 posted.

Senator Martin Conway: Is An Post aware of the importance of these envelopes and what they contain? Are protocols in place with An Post concerning what happens to undelivered letters? Moving to those certificates that bounce back via email, then, will those certificates now be posted out to the people concerned? I ask those questions because this is a critical piece of State documentation that gives people liberties and freedoms and access to indoor dining, etc. I am interested in knowing, therefore, what procedures are in place to deal with issued certificates that are not successfully delivered by email or post.

Mr. Barry Lowry: Mr. McCallion may wish to add to this, but our process is to investigate each instance of an undelivered certificate. In the case of many of the posted certificates, for example, we have been told that the addressee has simply gone away, and that might mean the person has left the country altogether or that he or she is now living at a different address. If we do not have the new address for such a person, or his or her email, then it will be a case where we really need that person to contact the service desk and provide us with information to allow us to resend the certificate.

Senator Martin Conway: What happens if a certificate is delivered by email but it happens to be a work email and it goes into the junk folder? There is no way of knowing that happened. The individual recipient may not realise it has gone into the junk folder either. Is there any way of dealing with that?

Mr. Barry Lowry: One of the advices that we have online and that people at the call centre ask is if callers have checked their junk email. It is in the communication that we put upfront as well because we appreciate that can happen.

We went through a very robust process to make sure that the emails that we sent would not end up being treated as spam by email servers. There is a process of assurance one can go through to minimise the chances of that happening and we followed that process. That is why we did not issue all the emails in one block but over a period of several hours.

Senator Martin Conway: Most fair-minded people realise that the task the witnesses were given by the Government was enormous. Given that not far off 70% of the population have now been vaccinated, we are probably ahead of a lot of other European countries. I am interested to know what communication the witnesses have with other European countries. Given that this is an international document, is there a central office to co-ordinate the digital Covid certificate among countries? I am interested to know if the witnesses are fine-tuning problems in co-operation with other countries.

Mr. Barry Lowry: An EU health grouping was set up specifically to look at the digital Covid certificate and Ireland was represented on the grouping. We have been involved all the way through in getting early prototypes of the design of the certificate and, as Mr. O'Connor said earlier, making sure that our certificate met the EU standard. The other big area of involvement is what is called the interoperability gateway. What happens is that we download the latest public keys every six hours from the other states. That enables us to read the QR code of another state. Every time someone in the BMU or in An Garda Síochána switches on the app he or she downloads the newest version of the public keys, which means that if a certificate from another country cannot be read, it is an issue with the certificate not with the Irish verification process.

Senator Martin Conway: Okay, that is me done. I thank the witnesses.

Deputy Bernard J. Durkan: I thank the witnesses for coming before the committee this morning. Like everybody else, I recognise the enormity of the job they have in hand. We should acknowledge and compliment them on taking on the job, notwithstanding that there were a number of glitches, as that was to be expected. We acknowledge the magnitude of their task. It is not that we want to deliberately poke holes in what is happening, it is better for everybody if we can have a seamless, smooth operation of any process.

I commend the European Union digital certificate. The presumption is that it would be universally recognised but that is not true because countries have the option of introducing rules of their own. As we know, Malta, which is an EU country, has decided on a different set of standards. Nobody goes on holidays to be quarantined in a hotel. It was a huge blow to people who have gone on holidays and may have found themselves in that kind of situation. Is it possible to identify countries with different interpretations of the rules and to alert the travelling public to that in advance, by way of an announcement or the dissemination of information on electronic media or by whatever other means? That could eliminate a lot of double-checking or crossing over.

Ms Elizabeth Canavan: To be very clear, Malta is part of the EU digital Covid certificate system and does recognise the DCC. As we understand it, in the cases in question some of the travellers did not have a digital Covid certificate and they were relying on a paper vaccination card or other proof. Malta's information on the *reopen.europa.eu* website is very clear that it does not accept handwritten proof of vaccination and that it requires the digital Covid certificate. To be clear, Malta has done that.

Deputy Bernard J. Durkan: How then can we prevent a repetition? Is it possible to identify countries well in advance so that a tourist from Ireland intending to travel to some other country can see at a glance that there are problems here and that it is not the same and he or she can go to another country?

Ms Elizabeth Canavan: Unfortunately, given the range of countries and the volatility of the situation we cannot give that information all day, every day. It really does depend on what

the countries are doing. What we have done on our landing page on *gov.ie/travel*, is provided a link to the website of the Department of Foreign Affairs, which has the top ten destinations with as much up-to-date information as possible on the requirements for those countries. We have attempted to filter out information on the most popular places but the most up-to-date information on any given day on the destination a person is travelling to is on the *reopen.europa.eu* website. It is really easy to use. One puts in the country one is travelling to and where one is coming from and it explains the rules at both ends. The best advice we can give to people is to check that before they travel, as they are making their plans and right before they depart, because rules are changing. The digital Covid certificate requirements are one thing but people must separately also check whether quarantine, testing or other requirements may change in different countries. All we can do is make sure that people understand that information is available, it is being updated in real time and it is their safest bet to check those resources online before they travel.

Deputy Bernard J. Durkan: Is it possible to update and streamline the helpline? When we get to a situation where the helpline becomes a need, in so far as the traveller is concerned, can we separate out the ones that require to be dealt with instantly or refer them to a position where they can be dealt with? We hear stories of people waiting for between half an hour and three or four hours. That should not happen. It does not work. We all know that calls can be backed up and it is impossible to track them with any kind of veracity. Can we do something there?

Ms Elizabeth Canavan: Mr. Tierney may be able to add a bit more information about what we do in the call centre. We have agreed with the provider that we will review on a daily basis, and even during the day, what the level of demand is and how best to configure our teams in terms of the different types of queries that are arising so that we can filter them and put the right number of operators on the different types of calls. We have only had a couple of days so we are analysing that as we go, but it will change. There is no doubt that people are understandably a bit anxious if they get a State document and something on it is not correct or if they are travelling or perhaps they are calling because they worry about using it in another context in the coming weeks. If people have not received their certificate yet, we urge them not to panic because certificates are still being issued. We ask people to check the website and over the coming days, unless they have an urgent need, they should leave the lines free for people who are travelling urgently and who need to get their certificate regenerated or to receive it. We will do our utmost to turn those around as quickly as possible. We would like to get to a more steady state, but we do understand that people are anxious. We are urging them not to panic. We have a very good system for turnaround so unless a person has an immediate need in the next five to ten days we say people should not panic, things will settle down, we will continue to look at what is coming through in the call centre, reconfigure on that basis and we will have the online portal which will again draw people who are looking for recovery certificates away from the call centre. That is our intention. Perhaps Mr. Tierney could add something else to that.

Mr. Derek Tierney: No, I think Ms Canavan has covered it. The first advice to those wishing to travel is go to the Re-open EU website in order to understand and educate themselves on the rules that apply in destination countries. Ms Canavan is right; we are looking at the shape of the calls coming in every day. When a person rings the phone number, they are, depending on their query, prompted into a stream. We monitor the shape of those calls over the day. We readjust with extra resources. Today and yesterday, we have put in more agent support. As Ms Canavan stated, we have 150 different individual scripts for our call agents. They need support as well, so we have increased both our support to our call agent staff and overall numbers. Tomorrow, and in the coming weeks, we will add different channels to allow people to engage

with the service and to meet their needs.

Deputy Bernard J. Durkan: We heard that the system information and system problem areas are updated on a on a six-hourly basis. Can that be improved upon? I would think that six hours is at the outer extremity of the tolerance of what would be expected in a situation like this. Six hours could quickly become 12, depending on the time of day in which the update took place. Instead of an update occurring every six hours, could it happen every three hours? Would that make an improvement?

Ms Elizabeth Canavan: I am not quite sure of the six hours to which the Deputy is referring. Could he say that again?

Deputy Bernard J. Durkan: One of one of the witnesses mentioned that updates occur every six hours.

(Interruptions).

Ms Elizabeth Canavan: Does this relate to Mr. Lowry's work?

Mr. Barry Lowry: Yes. It was in connection with changes in the public keys, where countries maybe changed the QR code or another health authority was added. That is the information that is updated every six hours, but this information does not relate to health advice.

Deputy Bernard J. Durkan: My query is about the information that is updated every six hours. Could it be updated every three hours? What would be the benefits of an update every three hours? I suspect that they would be considerable.

Ms Elizabeth Canavan: To make this clear to the Deputy, the information that is updated is every six hours relates to technology keys. This is so that the verifiers can read the information accurately. It is not an update for the general public. These are technical questions.

Deputy Bernard J. Durkan: I accept that, but my question remains. There is an update every six hours. The problems of reinterpretation or new interpretations of regulations or recognition-----

(Interruptions).

Deputy Bernard J. Durkan: -----every six hours. Can the system be improved upon by updating it every three hours?

Mr. Barry Lowry: The Deputy is right. There are two parts to the process. The first is the recognition of the QR code in a country. The second is that they update their travel rules. The Deputy is right. However, we are entirely dependent on other countries to go through the process correctly. In the early days when there were teething problems, we found that they do not always do that. Without naming specific countries, people from some countries came in with certificates that were not correct. We could not read the certificates with our verifier app. When we investigated that, we found that they had not engaged with the EU system properly. The error was at their end. We are dependent on countries keeping the EU interoperability portal current. There is not a lot Ireland can do, other than to make that representation by means of our health engagement through the committee, which we can do.

Deputy Bernard J. Durkan: We can point out to all other countries that it is helpful to have accurate and reliable updates. Incidentally, the opening statement Ms Canavan circulated is 17 pages long. There is a lot of information contained in that document, yet it does not contain all the minutiae that are both available and necessary. My broader point is that, for everyone concerned, the document will eliminate a lot of the initial difficulties. How fast can we gather all the necessary information that relates to EU countries and put it together in such a way that will prevent the kind of thing we read and heard about in the past few days?

Ms Elizabeth Canavan: We will update the *gov.ie/travel* and the Department of Foreign Affairs will be updating the information on their website. We will look at that again today. We looking at it constantly to try and put as much information there as we possibly can. We will review that again today. I thank the Deputy.

Chairman: I have a couple of questions. I am one of those people whose name is in Irish on their on the vaccination card. I changed it mid-stream because I realised that was the direction in which we were going. Many people have been in touch with me about this matter. Their names are different on their passports and so on. I have raised this with Ministers. It was as if they were hearing it for the first time. It is not unusual for Irish people to have different names on their passports, birth certificates or whatever. Part of the difficulty is that people could have three different names and any of those could be on their documentation.

I also wanted to ask about people from the North of Ireland. Questions have been asked about other jurisdictions. Consider, for example, a person from the North of Ireland who could have been vaccinated there but who lives in the South or someone from the North travelling through Dublin or whatever. We were told that they would have their own digital certificate which would suffice. Do we have any more up-to-date information for those people who are travelling? Many of them travel through Dublin, Cork, Knock, or wherever else; they travel around southern airports to get to European destinations. Is there information for that cohort of people who regularly use Irish airports? They are Irish citizens, but they may have been vaccinated in the North or elsewhere.

Ms Elizabeth Canavan: Our understanding is that anybody who has been vaccinated in Northern Ireland or Great Britain will have an NHS certificate. This is a digital certificate. That is our understanding. We consider that to be of equivalent standard and, therefore, we accept it. I will check that that information is on the website. However, we are satisfied that it is clear. There are other issues relating to people who have been partially vaccinated or who may have received their first vaccination shot in one jurisdiction and their second in the other. We are looking at that. Would Mr. McCallion like add anything?

Mr. Damien McCallion: If someone has had their second vaccination in Ireland, we will issue the digital certificate on the basis that they have contacted the HSE through their GP. We will then have evidence of the first vaccination. We provided the second vaccination so we can provide the certificate as normal. If someone had a first vaccination in Ireland and gets the second vaccination in another member state, we would expect that member state to treat the matter in the same way.

Chairman: That is great. There are reports that airlines that have not been checking for PCR or antigen tests. Have you been made aware of this? What are you doing to address it? The system operates effectively, and people have confidence in it. Again, the reports are from people who travelled and who were not checked for their PCR tests or for digital certificates on the Irish side.

Ms Elizabeth Canavan: Is the Chair talking about checks on arrival?

Chairman: No, I am talking about people who have travelled out of Ireland. Again, we have seen difficulties in respect of Malta. There was mixed information there. It would be, I imagine, much better for people if everything was checked on the Irish side, before they actually land in another country and are faced with all those difficulties.

Ms Elizabeth Canavan: To be clear, almost all countries operate in the same way; the carriers check at the at the point of departure. Carriers are doing what the other countries have asked them to, in terms of their destination. What we can tell you is in terms of what we have asked the carriers to here, in terms of anyone travelling into Ireland. Would Mr. Towey be able to provide an update on what we have been saying to carriers, and what they have been checking for us? After that, Mr. O'Connor can talk about the enhanced passenger locator form. The latter will assist carriers further in filtering the passengers for whom they need to see the test results.

Mr. Fintan Towey: For several months now, carries have been implementing certain checks at the point of boarding in order to safeguard the public health requirements. I suppose the first issue that the carriers address is in terms of the online check-in. They require travelling passengers to complete a checklist in terms of not having symptoms of Covid and being aware of the requirements relating to travel. At the point of boarding, all carriers are checking that travellers have evidence that they have completed the passenger locator form. They are also checking that there is evidence that a person has a negative PCR test, which is the primary public health control that we have been implementing for some time. Of course, the new requirements in respect of travel that have been applied since Monday mean that persons who are vaccinated or who have recovered and have confirmation of that through a DCC do not require a negative PCR test. We are now expanding the passenger locator form to capture passenger declarations according to the specificity of the health status under which they are travelling, which could include a DCC, other evidence of vaccination that is acceptable, evidence of recovery, etc. The airlines and ferries will continue to check at the departure that those declarations have been made and, where applicable, they will continue to check evidence of negative PCR tests.

Chairman: The certificates are being emailed or posted out. What is the system there? Is it based on the length of time since someone got the second dose of vaccine? Some people are saying that they were only vaccinated a week ago and have got the certificate, while there are others who were vaccinated a number of weeks ago, more than a month ago or even longer, and they have received nothing in the post. What is the system we are using?

Ms Elizabeth Canavan: To begin with, we effectively had a massive backlog of everybody whom we had information on. Some of the people who maybe were vaccinated earlier who did not received their certificate yet may either, most likely, have been a bounce back - an incorrect postal address - or be one of a small number remaining in a category that I will let Mr. McCallion talk about in a moment. Once a person receives his or her second dose, that data is now being updated and that data file is being made available for the purposes of generating the certificates. On an ongoing basis, we are releasing that information once the second dose of vaccine has been administered. People are seeing a reasonably quick turnaround once that data gets into the OGCIO system. That is where we are at on that.

A person is not eligible for a certificate of recovery until 11 days after being tested. Once a person has passed that milestone, he or she is eligible and can apply. That certificate will be valid for 180 days.

Does Mr. McCallion want to say a little about the other certificates we have not been able to issue yet?

Mr. Damien McCallion: Yes. There are two key points. The first is that there is a process for all those who have been vaccinated. Every day we have new people getting their second dose and, as Ms Canavan said, it is a record of a medical event. We turn those around to Mr. Lowry's team and the people involved then get their certificates. There is a process in terms of any rebounds, be they email or letters, which can be dealt with from there. Hopefully, as we get over this initially hump, that will be much smoother for people in terms of the timeframe. If we take it that most EU member states are insisting that people wait that period, be it for 14 days, before using it, that should not present any issues on an ongoing basis.

On the certificates we are still working on, we still have a small proportion, particularly going back to the early days of the programme when there was pressure on hospitals, long-term care, healthcare workers, etc., and where minimal information was, perhaps, provided or incorrect data may be there that we are working through. There are approximately 150,000 of those left and we are working through them. We have a team involved, and the number outstanding is decreasing every day. The number would have been much larger at the start. We take the data from GPs, pharmacies, the National Ambulance Service and community vaccination teams.

The public portal is much easier because we have verified email addresses for people. We still get some rebounds from that, maybe where people have changed email address or whatever, but, in the main, it is quite a reliable pathway. The other pathways are more complex. Obviously, it depends on the information that is collected at the point of vaccination. Clearly, there was no minimum data set required, for example, for the digital certificate when the vaccination programme commenced in January.

We are working through those fairly quickly. There are some complex cases in terms of names, addresses and other information. We have teams working to validate that information with GPs, hospitals, long-term care facilities and other such settings.

As already stated, nearly 2.2 million certificates have been issued. That number will certainly be reached today. The vast majority of those are out. We will deal with those that come back through the post and email, as Mr. Lowry outlined. We are still working through the final group with which there are issues in terms of the data that was collected. That might be the reason, as the Chairman stated, a person who was vaccinated four to six weeks ago has not received a certificate and someone who was vaccinated in the past four or five days would have received his or hers. That is the sort of mix. Once we get over this hump, there is a smoother process that will allow the production of certificates to run on an ongoing daily basis. As stated, given the requirement for that sort of period after the vaccine to be extended, that will not present any issues for people. This is just a critical phase to get through.

Chairman: One of the members already asked that there be a dedicated hotline put in place. The HSE might also consider providing an email address for elected representatives because of the volume of cases that we are getting. We have an issue in relation to people with literacy skills, difficulties with using information technology, IT, etc. People go to elected representatives or others. It would be useful if there was some sort of hotline or way for people making those representations.

There are a couple of the members looking to get back in. Deputies Shortall and Cullinane have indicated. I call Deputy Shortall.

Deputy Róisín Shortall: I have two quick questions. Following on from the previous question, I have had a few complaints from people who are in their 70s and who were vaccinated by their GPs at an earlier enough stage. These would seem to be straightforward cases, but those involved have not yet received their certificates. Is there an issue with GPs? I am wondering why it would be the case that the people to whom I refer have not received their certificates yet.

Mr. Damien McCallion: There is not necessarily an issue globally with GPs, but there, for example, be a problem with some of the details around the addresses. We parsed all the addresses to see did we have a number of lines and an Eircode, and we released certificates where we had one address line and an Eircode. As the Deputy will understand, we have had cases where, for example, a person might be living in Santry and where the only address line provided was Main Street. Someone might know where that person lives, but, in terms of feeding the information through our system, the certificate would not be sent out. Those are the types of cases we are working through and trying to get closed off.

People will get their certificates. If there is an immediate requirement, as Ms Canavan and others have said, they can contact the helpline. If not, we are still working through the cases in question. In terms of that process that we are going through in the context of the data, the Deputy can rest assured that they will get them. We have a team which is linking back with GPs to verify that the information is accurate in circumstances where it is not comprehensive or where it comes back into the call centre because the postal address or email address has not been sufficient. We used some email addresses from GPs as well to try and accelerate the process. We knew there was a slight risk that some of those would come back. Those will be posted or we will go and try and find the postal address if there is none there by working with the GPs on that.

Deputy Róisín Shortall: That is new information. Most people who received the vaccine from their GPs expected to get letters. That is what they were being told initially, but Mr. McCallion is saying that some of those will get emails instead.

Mr. Damien McCallion: Yes, if there was one provided. The vast majority though, I would say to the Deputy, are postal. As a general rule, the GP addresses in the main are postal, but there would have been a small proportion where an email address might have been provided and we would have used that where we felt it safe to do so.

Deputy Róisín Shortall: It is important that people know that, particularly in view of the danger of it being delivered into a spam folder. They should check that.

There is one other point I wanted to raise with Ms Canavan. It has been reported that in the case of hospitality the DCC on its own may not be sufficient and that consideration is being given to requiring people to produce identification along with a DCC. Could Ms Canavan comment on that?

Ms Elizabeth Canavan: I am not up to speed on exactly what discussions are ongoing. Those discussions are happening with representatives of the hospitality and the relevant Departments and when they conclude, we will have to look at regulations. It will be a matter for the Department of Health to draw up those regulations. That is all still in play, as I understand it, and I do not have further information at this stage on it.

Deputy Róisín Shortall: When is it expected that it will be clarified?

Ms Elizabeth Canavan: Again, we are waiting for a Government decision on timing. The Bill has not yet been signed by the President. I cannot really give the Deputy any further update

at this stage.

Deputy Róisín Shortall: I thank Ms Canavan.

Deputy David Cullinane: I will follow up on those points. All our questions today relate to travel, and we know the certificate will also be used for domestic purposes. Many of the details are still being finalised, but the system is to come into operation on Monday. I ask that a briefing be given to members of the health committee, if they so choose, on the matter. There will be many questions about how this will work. We had a briefing some weeks ago but there have been changes in the guidelines that seem to have been agreed with the industry and so on. There is also the question of how the app will be used. These are reasonable questions so I ask that a briefing would be arranged for us, if possible.

There is the question regarding the issuing of the DCC to people who are Irish citizens but who live abroad. There is also the matter of Irish citizens living in the North. I have heard the witnesses indicate that a citizen who lives in the North and who has an Irish passport will get an NHS proof of vaccination. That does not answer the question as to whether such people can avail of a DCC here. Is the latter possible? The EU website indicates that EU citizens who have been vaccinated in a non-EU country can request certificates from the member state of their nationality or residence. It also indicates that certificates will be issued if there is proof of vaccination and if the structure of the health system allows for it. Is that possible here in respect of citizens in the North? What will be possible for people who live outside the State?

I made an important point earlier. It was not a criticism of any of the officials, who are doing their best. In answering questions on advice for people who are travelling, the witnesses gave very good advice that people should check the website and travel advisory criteria for the countries they are travelling to. The witnesses indicated that this is complex and that while there is a DCC system in place which should ensure that people are not prevented from travelling, each member state will have its own criteria for points of entry. I go back to the messaging from the Government, and not necessarily just the tweet that was mentioned. It seems to suggest that if a person does not have a DCC, he or she will be okay with just a vaccine card. It seems incredibly risky for people to take that advice and travel with just a card. To be clear, is it the view of the witnesses that people should really look at travel advisory criteria for the country to which they are travelling, rather than take it for granted that a vaccine card will be accepted? Is that the advice from the Department?

Ms Elizabeth Canavan: On the Deputy's first point, he has heard from Mr. McCallion about what we are doing with people who are vaccinated between the two jurisdictions. The possibility of issuing certificates is there. We have not yet put in train an option for citizens residing elsewhere. We just have not got to it. From a logical point of view, we are conscious that a vaccination is a medical event and that those who can certify that medical event are the authorities in the state in which it occurred. We have not yet had the chance to look at the possibility of issuing certificates to Irish citizens where we can verify that the event happened in another state. We intend to look at that, but we just have not got to it yet.

Deputy David Cullinane: Could I get clarification on what I mentioned earlier regarding the criteria listed on the European website? It is stated that an EU citizen vaccinated in a non-EU country should be able to request an DCC in the member state of which he or she is a citizen. Have we just not got around to it?

Ms Elizabeth Canavan: That is our intention.

Deputy David Cullinane: It is intended to do it at some point.

Ms Elizabeth Canavan: Yes, it is something we have said we will consider further in the context of the European regulations. That is absolutely the case.

On the second point, I stated earlier that people should be very clear that this is complicated. On the one hand, there is the standard of proof that a country might require, which is the problem in the Malta case. The second issue relates to the rules applying on arrival into a country, depending on a person's status. These are two different aspects and people must be really clear in their minds about the requirements, whether they are vaccinated, recovered or certified with a test result. That is the first point. People must also look at what proof a country requires. Some countries do not accept test results, for example, and they only let in people without quarantine if they are vaccinated. They do not accept people who have recovered from the virus. If a person is relying on one of these elements, he or she must determine the standard of proof. It is all there on the Re-open EU website, which is very helpful. That is my best advice to people.

Deputy David Cullinane: I thank Ms Canavan.

Chairman: I thank the witnesses. This has been very helpful and much information has been given today. If we have a message for people thinking of travelling, it is that they should not think of travelling without a DCC. People may be able to travel but might have to quarantine and we must get that message to people. The information is useful.

There is a request for additional information as this rolls out. We have touched on some of the issues but the situation is unfolding, as everybody has admitted. Part of the difficulty is that this matter crosses a number of Departments and that different Ministers were giving different information on who is in charge, including the Department of the Taoiseach and the Departments dealing with health, travel, etc. If the witnesses could have a briefing for elected representatives - it does not necessarily have to be for health committee members - it would be useful when there is some sort of clarity, particularly with regard to indoor dining and so on.

There will still be many questions about the possibility of people travelling and so on. The demand is there, and we have seen the number of phone calls. Any criticism is not of the officials. We could be critical of the Government if we are trying to determine who is in charge and how it is being rolled out. Ultimately, some really useful information has been imparted this morning.

We will be adjourning now until we meet again in public session when the Dáil resumes after the summer recess. I wish everybody a happy and safe summer.

The joint committee adjourned at 11.30 a.m. *sine die*.