**Disabled woman’s needs ignored as she is ‘treated like prisoner’ at quarantine hotel**

A disabled woman has described how the government and its contractors failed to make any allowance for her impairment and treated her like a prisoner during her stay in a “managed quarantine hotel”.

Because she was placed in an unsuitably small room, she was unable to complete the vital stretching exercises she needs to carry out every day to control the symptoms of the muscular dystrophy she was diagnosed with 18 months ago.

Julia\*, an international consultant, was repeatedly shouted at by the G4S security guards who police the 15-minute exercise slots outside the London Heathrow Radisson Hotel, where about 500 quarantined travellers are staying at a cost of £1,750 each.

She had been transported to the hotel by bus following eight hours in a queue at Heathrow airport, after arriving from an east African country.

Julia said the food at the Radisson was “absolutely appalling”. For the first five days of her 10-day stay, the evening meals the hotel provided were just “rice with some slop with curry powder and floaty bits of meat”. She said she barely saw a vegetable for five days.

At first, she was restricted to just two exercise slots a day, but after talking to an on-site paramedic, this was increased on the fourth day to three periods of exercise and a total of one hour a day, although like the other travellers she was still restricted to walking up and down a small section of car-park outside the hotel.

Despite complaining to the hotel about her treatment from the day of her arrival, her ordeal only eased after five days, when her MP, who is also a cabinet minister, intervened.

As a result, she was moved to a larger room, and began to receive a sizeable serving of salad with two of her meals every day.

Among her concerns is that she says there is no way for a disabled traveller arriving in England to highlight on the government form they have to fill out what their access needs are.

There is a small box on the form for “other information”, but although she stated that she had muscular dystrophy, she believes that was disregarded by the hotel, and G4S.

Julia said: “It wasn’t considered at all in terms of where I was housed or the conditions which I had to battle against.

“I wasn’t put in a room suitable for someone with a mobility issue. I have to use my muscles or lose them. Exercise is really important.

“I am a tax-payer, I am doing this willingly and I am being treated as if I am in a POW camp.”

She is concerned that other disabled people might not feel able to complain as loudly and effectively as she did, “particularly if English is not their first language or they are not used to complaining or they don’t have the confidence to complain”.

Despite her own treatment eventually improving, her concerns appear to have been confirmed by another disabled woman she spoke to this week.

The woman, who has a mobility impairment, told her that she and her husband had been placed in a room that was too small to allow her to do the exercises she needs to do, and that although she has coeliac disease – where a person’s immune system attacks their gut if they eat gluten – she had not had a single gluten-free meal provided by the hotel.

Julia said: “They need to treat people with respect and not treat us like criminals.

“My message to the government is to create a system that is fit for purpose but does not infringe on people’s basic human rights.

“It’s just wrong. They take absolutely no consideration for the welfare of the guests. None.

“I am convinced the only reason my treatment changed is because my MP is a cabinet minister.

“My treatment has not improved because of my complaints, it has not improved because I am disabled, it has not improved for any of those reasons, it is purely because I am lucky that my MP is somebody who has influence.”

Julia, who was due to return home last night after her 10-day ordeal, has now called on the government to review conditions [in its quarantine hotels](https://www.gov.uk/uk-border-control/self-isolating-when-you-arrive).

Under England’s quarantine scheme, anyone who has travelled in or through a country on the banned travel “red list” has to stay in a “managed quarantine hotel” for 10 days.

Those who arrive from other countries only need to quarantine in the place they are staying in England.

Although the east African country was not on the COVID-19 red list when Julia flew there for work, it had been placed on the list by the time she left the country.

A spokesperson for the Department of Health and Social Care, which runs the quarantine hotel scheme, said he could not comment on individual cases.

He declined to comment on the apparent failure of the scheme to include a way for disabled people to highlight their access needs, or on Julia’s call for the system to be reviewed to ensure it does not breach people’s human rights and does not “treat people like criminals”.

But he said in a statement: “Our top priority has always been protecting the public and the robust border regime we introduced is helping minimise the number of new variants imported into the UK.

“The government continues to ensure every person in quarantine gets the support they need and all hotels providing facilities are accommodating the vast majority of people's requirements.

“Hotels take all necessary steps to address concerns raised by guests.”

A G4S spokesperson said she was unable to comment on the shouting security guards as the company had not received a complaint about the claim.

But she said in a statement: “Our priority is the safety and wellbeing of those on site and both staff and quarantined travellers are expected to adhere to social distancing rules in place for their safety, which include allocated slots allowing guests to safely access outdoor areas.

“A medical professional is available on site to make further recommendations and adjustments.”

A Radisson spokesperson said she could not comment on individual cases.

But she said the company took its role in the quarantine programme “very seriously” and worked with DHSC to provide a service “based on the parameters set by the government”.

She said that, when possible, the hotel provides “bigger rooms for guests who, based on identified medical needs, need more space to exercise”, and that the food menus are “revised on a weekly basis” and where possible “we implement our guests’ feedback on the menus to ensure it is satisfactory for all our guests”.

She added: “Our team is working in partnership with the UK government-contracted security staff at the hotel.

“The security team manage all guest movements at the property to help keep them safe and secure.

“A team of DHSC-contracted risk management professionals, including a DHSC medical professional, is also present on a 24-hour basis at the hotel, is able to provide an initial assessment of any risks or mental or physical health needs related to the quarantine guests and has an escalation process in place.

“We continuously take all feedback from guests on board to help continue to meet the standard of service in our property whilst complying with the requirements set by the DHSC.”

*\*Not her real name*

\*\**For sources of information and support during the coronavirus crisis, visit the*[*DNS advice and information page*](https://www.disabilitynewsservice.com/advice-and-information/)

**22 April 2021**

**Confusion as government and COVID test event organisers disagree over entry bans**

A programme of events testing how crowds can safely return to venues was thrown into confusion this week as the government and event organisers disagreed with each other on whether “clinically extremely vulnerable” (CEV) people are banned from attending.

At least two of the sports and cultural events have publicly made it clear that anyone who is clinically extremely vulnerable to COVID-19 cannot attend.

These include the world snooker championships and [a live music event at Sefton Park](https://www.gov.uk/government/news/festival-republic-joins-government-pilot-programme-with-a-live-gig-to-trial-the-safe-return-of-fans), Liverpool, on 2 May, organised by Festival Republic, which was added to the programme of test events this week.

The confusion over these bans came as the UK Disability Arts Alliance described them as “blatant discrimination” and “fundamentally at odds with the values of the cultural sector”.

Festival Republic has said that those who have been told they are CEV “cannot attend this event”, while the organisers of the snooker championships have told CEV people that “it is not possible for us to allow you to attend this event”.

Another event, football’s Carabao Cup final, has stopped just short of an outright ban, [with supporters warned](https://www.tottenhamhotspur.com/news/2021/april/carabao-cup-final-ticketing-details/) that they “should not apply to attend this fixture if they are clinically extremely vulnerable”.

The Department for Digital, Culture, Media and Sport (DCMS), which is overseeing the Events Research Programme (ERP), refused last week to say if there was an outright ban on CEV people attending the test events.

But yesterday (Wednesday), a DCMS press officer finally confirmed that the government had not imposed a ban but was instead advising CEV people not to attend the events, in line with Public Health England and Department of Health and Social Care guidance.

He said this was a decision made by the Science Board, whose members are cross-government chief scientific advisors and leading external scientists.

He pointed to [the government guidance](https://www.gov.uk/government/publications/guidance-about-the-events-research-programme-erp-paving-the-way-for-larger-audiences-to-attend-sport-theatre-and-gigs-safely-this-summer/guidance-on-the-events-research-programme), which states that CEV people are “advised not to attend the pilot events given the fact that some of the pilots in the ERP will be testing non-social distancing and the safety risk associated with the relaxation of NPIs [non-pharmaceutical interventions]”.

The guidance says the Science Board has “agreed that given the nature of the pilot programme it would not be possible for those high-risk categories to safely participate”.

Organisers of some of the test events are insisting that this advice means that CEV people are banned from attending.

Festival Republic, which has banned all CEV people from the Sefton Park event, insisted that this is “following all protocols as directed by the DCMS”.

A Festival Republic spokesperson later insisted: “As advised by the Science Board, clinically vulnerable people cannot attend the event.

“This is not a decision made by Festival Republic.”

The World Snooker Tour – which runs the world snooker championships, and has also banned CEV people – had failed to comment on its ban by noon today (Thursday).

But last week, when asked to comment on the ban, it referred Disability News Service (DNS) to a DCMS statement which stated that “it would not be suitable on health grounds for the Clinically Extremely Vulnerable to attend”.

Last year, the UK Disability Arts Alliance launched [#WeShallNotBeRemoved](https://www.weshallnotberemoved.com/), to campaign for an inclusive recovery of the cultural sector, and to ensure that Deaf and disabled people do not face discrimination as the industry reopens.

[The alliance has described](https://twitter.com/WSNBRUK/status/1379846771841638401) the world snooker championships as an “inaccessible and discriminatory event” which “sends disability rights back decades”.

[Andrew Miller](https://twitter.com/AndrewM_Arts), co-founder of the alliance, who has just completed three years as the government’s disability champion for the arts and culture sector, has himself described the decision of the championships to ban pregnant women, under-18s and CEV people as “absolutely discriminatory and unacceptable”.

Last year, the alliance produced its [Seven Inclusive Principles](https://www.weshallnotberemoved.com/2020/09/15/seven-principles-to-an-inclusive-recovery-for-the-arts-creative-sector/) guide to support the sector in achieving a recovery from pandemic lockdowns that was “inclusive of disabled people”.

The alliance told DNS this week: “The principles are clear that reopening must comply with the requirements of the 2010 Equality Act – there can be no exceptions to this, it is the law.

“We think it is right for the government to take a lead in testing event environments to identify safe models to allow the cultural sector to reopen.

“But we question the extent the government takes account of disabled people’s views in its Events Research Programme and why this programme appears entitled to break the law.

“Given that two thirds of the pandemic’s death toll have been disabled people, we are deeply disappointed that our already traumatised community is facing such immediate and blatant discrimination.”

Meanwhile, football’s FA Cup final on 15 May at Wembley Stadium is also part of the ERP.

A Football Association spokesperson said this week that it was too early to answer detailed questions about the event and whether CEV people would be banned.

But he said in a statement: “We continue to work with the DCMS and all our stakeholders in the lead up to the FA Cup final.

“We are aiming to be as inclusive as possible, while ensuring that the limited number of spectators can attend safely during the ongoing pandemic.

“The clubs and their supporters’ groups will also be contacted during this process and we will provide further details as soon as possible.”

\**For sources of information and support during the coronavirus crisis, visit the*[*DNS advice and information page*](https://www.disabilitynewsservice.com/advice-and-information/)

**22 April 2021**

**Prime minister ignored accessibility of media briefing room, his office admits**

The prime minister’s office has admitted that it made no attempt to ensure that a new £2.6 million Downing Street media briefing room would be accessible to disabled people.

Disability News Service (DNS) [revealed last month](https://www.disabilitynewsservice.com/boris-johnson-spends-2-6-million-on-media-facilities-with-an-inaccessible-stage/) that the platform in the room was not step-free and that civil servants or ministers with a mobility impairment would have to use a removable ramp if they wanted to address the media.

It later emerged that the prime minister and his team of civil servants had also failed to ensure that the facilities would allow an on-platform British Sign Language (BSL) interpreter.

Now the Cabinet Office has admitted – in response to a DNS freedom of information request – that it has no record of any discussions about the accessibility of the new facility in the 12 months leading up to its unveiling.

It also admits in its response that it has no record of seeking advice on the plans from any access experts.

Instead, it left this work to its contractors, who it claims “have ensured that the relevant provisions in building regulations on access were followed”.

Baroness [Sal] Brinton, former president of the Liberal Democrats and herself a wheelchair-user, said last month that the access at the briefing room was “an absolute disgrace” and “a practical demonstration of the barriers to the most senior political offices in this country”.

The crossbench peer Baroness [Jane] Campbell, another wheelchair-user, said last month that the failure “sends out a clear message that, yet again, disability access is an afterthought”.

The failure to consider access comes despite the prime minister, Boris Johnson, finding himself at the centre of three separate legal actions relating to his continuing failure to provide on-platform BSL interpreters at vital televised briefings on the pandemic.

Deaf viewers first began to raise concerns about the lack of an interpreter in March 2020, a year before the media briefing room was used publicly for the first time.

Lynn Stewart-Taylor, founder of the [#WhereIsTheInterpreter](https://www.facebook.com/WhereIsTheInterpreter/) campaign, who has been trying for the last year to persuade the government that it must provide an on-platform interpreter at its pandemic briefings, and not rely on an in-screen interpreter on the BBC News channel, said she was disappointed but not surprised by the prime minister’s latest failure.

She said: “The fact is, broadcasting with a live on-platform interpreter saves money because only one camera is required and fewer technicians.

“In addition, it guarantees that the broadcasts are transmitted across every media channel.

“Clearly, the government is taking away access to reduce diversity, hide and segregate deaf sign language people.

“It’s very clear that sign language people are excluded from society. Our community is highly marginalised, under-represented, and under-researched.

“The government has failed us big time.”

Vicky Foxcroft, Labour’s shadow minister for disabled people, said: “The findings from this FoI are yet another example of how disabled people continue to be afterthoughts by the Conservatives.

“The prime minister has been asked several times why his press conferences remain inaccessible, his continued failure to answer is completely unacceptable.

“If the government want to get serious about making disabled people’s lives better, important press briefings with safety information should be accessible for all.

“Disabled people have had enough of feeling like an afterthought.”

The freedom of information response says that access to the briefing room is through a Whitehall building which has step-free access and accessible toilets, while “reasonable adjustments have been made to the briefing room itself, including incorporating a removable ramp into the design”.

It also says that government officials have worked with the BBC to ensure there is BSL interpretation for televised No 10 coronavirus press conferences, while the Cabinet Office has access to a BSL interpreter, based in a separate studio, for use on its social media channels, a resource which is made “freely available to key broadcasters”.

A spokesperson for No 10 declined yesterday (Wednesday) to comment on the freedom of information response.

**22 April 2021**

**Meeting ‘could lead to groundswell of support’ for independent living campaign**

Disabled activists and allies are meeting today (Thursday) to plan how to generate a “groundswell” of support for a national independent living service that would be available free of charge to anyone in England who needs it.

The online meeting, organised by the [Reclaiming Our Futures Alliance (ROFA)](https://www.rofa.org.uk/) and [Inclusion London](https://www.inclusionlondon.org.uk/), comes against the background of [repeated broken government promises](https://www.disabilitynewsservice.com/johnson-ignores-working-age-care-again-and-suggests-further-delays-to-reform/) to reform the crisis-ridden social care system.

They hope to use the meeting to build support for disabled-led proposals for a National Independent Living Support Service (NILSS).

They also want the government’s eventual reforms to comply with [article 19](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-19-living-independently-and-being-included-in-the-community.html) of the UN Convention on the Rights of Persons with Disabilities, which describes disabled people’s right to live independently and be included in the community.

February’s health and social care white paper said the government would bring forward “proposals” for social care reform later this year, but it has been making such pledges ever since promising four years ago that a social care green paper would be published by the end of 2017.

ROFA and Inclusion London believe it is vital that disabled people have a strong and “distinct” voice that can be used to influence the government’s social care reforms.

They hope that disabled people’s organisations and allies that are committed to the proposals for a National Independent Living Support Service (NILSS) will be able to work together to pressure the government.

NILSS would see a national service, running alongside but separate from the NHS, providing a universal right to independent living, with support provided free to those who need it, funded by general taxation, managed by central government, and delivered locally in co-production with disabled people.

Mark Harrison, from ROFA, said this week that the aim of today’s meeting was “to create momentum to pull a group of people together who have concerns around social care reform and the right to independent living”.

He said that some of the NILSS elements might have been controversial a couple of years ago, but the deepening of the social care crisis and the impact of the pandemic on disabled people had now shown why it was needed.

He said the government’s attempts at reform had descended into “chaos”.

He said: “Local authorities are going bust, and others are not meeting their legal duties under the Care Act and the Children and Families Act, because austerity is still very much alive and kicking in local government.”

ROFA has submitted evidence to the Commons housing, communities and local government committee’s [inquiry into the funding of long-term care](https://committees.parliament.uk/work/1080/long-term-funding-of-adult-social-care/news/149731/new-inquiry-longterm-funding-of-adult-social-care/).

In its submission, ROFA calls for a “new universal right to independent living, enshrined in law” through an independent living bill of rights, and delivered through NILSS.

It says that measures that have been “imposed through ‘austerity’ and devastating cuts in social care” are having “serious adverse impacts” on disabled people’s rights and freedoms.

It adds: “Only by taking social care into a national independent living support service managed by central government alongside the NHS in the public and the not-for-profit sector will stability be achieved.”

Meanwhile, Inclusion London [has issued a new film](https://www.youtube.com/watch?v=3I2MqxwHui8) that makes the case for scrapping all social care charging.

In the film, disabled campaigner Iyiola Olafimihan says: “We should not be paying for our right to live, our right to be independent, and our right to want to just be humans.

“We should not be paying for that.”

Another, Jenny Hurst, says: “Charging isn’t just cruel, it’s not cost efficient.

“If you have a disabled person who’s saying that they can’t afford the care charges, care that they’ve been assessed as needing, so they cut back on that care that they vitally need.

“That leaves a whole host of health issues that can then show themselves further down the line.”

Anne Novis, a former chair of Inclusion London, says in the film: “It’s a battle, it’s a fight, the same as it is with everything for us as disabled people.

“From getting care, to care charges, to accessing any benefit, proving and evidencing, repeatedly, again and again, that we are who we are, that we have these certain impairments and health conditions.”

Inclusion London [has also launched a petition](https://you.38degrees.org.uk/petitions/scrap-social-care-charging?share=b7f267d2-e87e-495c-a707-99c4f1c8305d&amp;source=email-share-button&amp;utm_medium=socialshare&amp;utm_source=email) that calls on the government to abolish all social care charging as part of its social care reforms, and meanwhile to ensure disabled and older people are not forced to pay for social care out of their benefits.

**22 April 2021**

**Peers and MPs hear fierce attack on government’s disability employment record**

The government’s record on disability employment has come under fierce attack during a parliamentary meeting.

MPs and peers on the all-party parliamentary group on disability heard from experts from business, academia and the disability movement on Tuesday on the employment proposals they would like the government to adopt in its forthcoming national disability strategy.

They heard particular concerns about the government’s Access to Work and Disability Confident employment schemes.

They were also briefed on research – [first reported by Disability News Service last October](https://www.disabilitynewsservice.com/the-truth-about-the-governments-disability-jobs-miracle/) – that dismisses the government’s claim that it has reduced the disability employment gap over the last decade.

Justin Tomlinson, the minister for disabled people, has [repeatedly bragged](https://questions-statements.parliament.uk/written-questions/detail/2020-07-09/71805) that official figures show the government has slashed the disability employment gap (the difference in the proportion of disabled and non-disabled people of working-age in jobs).

But Professor Kim Hoque, from the [Disability@Work](https://www.disabilityatwork.co.uk/) group of researchers, told the meeting that research by his colleagues Professors Victoria Wass and Melanie Jones showed the gap had actually remained stable in recent years, once account was taken of the increasing number of people identifying as disabled when they would not have done so in previous years.

Hoque and his colleagues argue that the government should focus on reducing the “disability prevalence adjusted gap”, which “essentially allows you to take into account that fact that disability prevalence is increasing”.

This was one of five key proposals he and colleagues made to officials from the Cabinet Office and the Department for Work and Pensions (DWP) at a meeting in February.

The proposals were also included in [a report by the Centre for Social Justice’s Disability Commission](https://www.centreforsocialjustice.org.uk/library/now-is-the-time-a-report-by-the-csj-disability-commission), which reported in March and was chaired by Lord [Kevin] Shinkwin, the disabled Tory peer who chaired this week’s meeting.

Hoque said that further work by the Disability@Work group suggests there is “very little evidence” to suggest that employers that sign up to the government’s [Disability Confident employment programme](https://www.disabilitynewsservice.com/dwp-admits-coffey-and-duncan-smith-both-snubbed-disability-confident/) “are any better than non-Disability Confident employers in terms of policies and practices that are introduced to support disabled people”.

He said there was also no evidence to suggest that Disability Confident employers were any more likely to employ disabled people than non-Disability Confident employers.

Hoque recommended that employers signing up to the top two levels of the three-tier scheme should have to employ a certain proportion of disabled people in their workforce.

He said that other proposals put to DWP and the Cabinet Office included the introduction of mandatory reporting by employers on their disability pay and employment gaps; and further measures to ensure that organisations that win public contracts must demonstrate a track record, and pledge to make further progress, on disability employment.

He also said that research by Disability@Work showed that employers that recognise trade unions typically have more advanced disability policies and practices.

He suggested the government should ensure legal rights for trade union equality representatives and disability champions to have time off to perform their duties, as their research showed that they “have quite pronounced effects in terms of supporting disabled people in the workplace”.

He said that representatives from other organisations at the February meeting supported the five disability employment proposals, including senior figures from [Disability Rights UK (DR UK)](https://www.disabilityrightsuk.org/), the Business Disability Forum, the TUC and the NHS.

Angela Matthews, head of policy and research at the Business Disability Forum, was heavily critical of the way the Access to Work (AtW) scheme is run.

She told this week’s meeting: “Employers are currently telling us it is taking between two and nine months from the point of application to an employee getting what they need.

“That’s a lot of stress for everyone involved while waiting for adjustments.”

She told the meeting of a young Deaf woman who uses British Sign Language and had to switch from securing support through disabled student’s allowance to AtW for the third – industry-based – year of her four-year PhD course.

It took AtW six months before it would stop trying to contact the woman by telephone.

Matthews added: “Her Access to Work support was not in place before her year in industry was over. That’s a really sad story.”

She said that Access to Work must improve how it is used by those in “different job and work structures”, such as those in the gig economy, contractors, start-up businesses and those who are self-employed.

Fazilet Hadi, head of policy for DR UK, told this week’s meeting that they should “continue to be shocked by the employment gap between disabled people and non-disabled people” and that this had probably widened during the pandemic.

She called on the government to co-design plans and engage with disabled people on disability employment, and “understand what the barriers are to our employment”.

She said: “That’s not difficult, but they don’t do it on employment.”

She also called for a government plan to get one million more disabled people into work and to keep disabled people in jobs, as well as for better joined-up working between DWP and the Department for Education.

She was another to criticise the Access to Work scheme, telling the meeting: “When we are in work, we need support, we need an Access to Work scheme that works, and we don’t have to wait nine months for.”

Hadi said the scheme “feels like you’re in the 19h century, not the 21st”.

She also criticised Disability Confident, which she said needed to be based “on outcomes and not on thin air and just aspiration”.

Lord Shinkwin [later told fellow peers](https://hansard.parliament.uk/Lords/2021-04-20/debates/9FC84A3D-8F5F-4679-B52A-9C3AFAD4A416/Covid-19EconomicRecovery?highlight=shinkwin#contribution-A2F0B1C5-10A3-4445-B891-4D6F2A7C75DD) in the House of Lords that the national disability strategy must be used to ensure “a radical reset of policy and policy-making” rather than “yet more tokenistic tinkering or tweaks to policy”.

The Tory peer said he had been “horrified” by the government’s [“offensive and inept” national disability survey](https://www.disabilitynewsservice.com/government-faces-legal-action-over-disrespectful-strategy-consultation/).

And he called on the prime minister to listen to the many business leaders who signed a letter to Boris Johnson backing the conclusions of the Disability Commission.

He said: “I hear that some ministers continue to argue against mandatory workforce reporting on disability by large firms with 250 or more employees, citing that old chestnut of having a philosophical objection as Conservatives to using the stick, as well as the carrot, to bring about progress.

“Well, this Conservative has a philosophical objection to failure.

“Some 26 years have now passed since the Disability Discrimination Act was passed. If the carrot alone was ever going to work, it would have worked by now.”

**22 April 2021**

**Hundreds of thousands may have ‘slipped through the net’ of COVID support, say MPs**

Hundreds of thousands of disabled people in England may have “slipped through the net” and missed out on vital support in securing food, medicines and basic care in the early months of the COVID-19 pandemic, according to a new report by MPs.

The public accounts committee said yesterday (Wednesday) that a contact centre set up by the government was unable to reach about 800,000 people who were clinically extremely vulnerable (CEV) to the virus.

Many of them could not be contacted because of missing or incorrect telephone numbers in their NHS records.

Their details were eventually passed to local authorities to try to contact them, but the report says that the Ministry of Housing, Communities and Local Government (MHCLG) still does not know if councils were able to reach any or all of these people.

The government first told CEV people to shield themselves on 22 March 2020, and it developed a scheme to provide them with food boxes, medicines and basic care.

But the report says that the government’s “quickly drawn-up” scheme experienced the “problems of poor data and a lack of joined up systems that we see all too often in government programmes”.

It also says that the Department of Health and Social Care (DHSC) and NHS Digital “took too long to identify some clinically vulnerable people at a time when their need was urgent”.

And it says that, when deciding on criteria for identifying CEV people, DHSC initially excluded several key factors which made people more vulnerable to the virus, such as ethnicity, postcode and body mass index.

This has now been corrected and has resulted in an extra 1.7 million CEV people being identified and added to the list in February 2021.

The committee also raised concerns about the significant and “unacceptable” postcode lottery that emerged when GPs and hospital doctors were asked to add patients to the list of people eligible for support.

The lists grew by as little as 15 per cent (in Carlisle) or as much as 352 per cent (in Hounslow) in different local authority areas, with an average of 73 per cent, and it more than doubled in 33 areas.

The committee’s inquiry was based on an earlier report by the National Audit Office, [which concluded in February](https://www.disabilitynewsservice.com/planning-failure-meant-government-had-to-start-shielding-scheme-from-scratch/) that the government’s failure to prepare for disabled people needing to shield from a pandemic meant they had to develop a shielding scheme from scratch at the beginning of the COVID-19 crisis.

The government’s centrally-led system of support for CEV people has now been replaced by one that focuses on access to supermarket deliveries and ensuring local authorities can also offer food where needed.

The report says MHCLG must ensure that local authorities “continue to have the capacity and resilience to support the needs of clinically extremely vulnerable people” because of the rise in the number of people advised to shield in February 2021 from 2.2 million to 3.9 million people (the government says there are currently 3.8 million people on the shielded patients list).

Meg Hillier, the committee’s chair and a Labour MP, said: “The shielding response in the COVID pandemic has particularly exposed the high human cost of the lack of planning for shielding in pandemic planning scenarios.

“It also highlights the perennial issue of poor data and joined up policy systems.”

She added: “There are questions still to be answered about the balance between central decision making and local knowledge – the increase in numbers of those advised to shield demonstrate the challenges of trying to deliver this programme centrally, as well as with the data held by the NHS.

“Plans were eventually, sensibly devolved to local authorities.

“There needs to be a clear plan ahead for those with serious health conditions so they can access the support they need when they have no other support network.”

But in its response to the report, the government described its findings as “disappointing and misjudged”.

A government spokesperson said: “During this globally unprecedented emergency, we worked across multiple government departments to build and deliver an urgent national scheme in record time, identifying 1.8 million clinically extremely vulnerable people and providing them with vital food and medicine to help them shield effectively.

“We made significant efforts to contact people by letter, text and telephone and worked closely with councils to ensure we reached them.

“Many people chose not to take up the offer of government support as they felt they didn’t need it.

“The initial shielding guidance was agreed by the four UK chief medical officers on the basis of the latest available evidence.

“Since then we have learned more about the virus and adapted our approach, which has enabled us to protect those most vulnerable by providing them with shielding guidance and prioritising them for vaccination.”

\**For sources of information and support during the coronavirus crisis, visit the*[*DNS advice and information page*](https://www.disabilitynewsservice.com/advice-and-information/)

**22 April 2021**

**NHS allows G4S to force disabled patients to share ambulances during pandemic**

A controversial British outsourcing company has admitted forcing disabled patients to share non-emergency ambulances throughout the COVID-19 pandemic.

G4S insists that it is following [NHS guidance](https://www.gov.uk/government/publications/covid-19-guidance-for-ambulance-trusts/covid-19-guidance-for-ambulance-trusts#conveyance-and-patient-handover), which says that two patients can be carried together in an ambulance if neither of them has COVID or is displaying any symptoms and as long as a distance of at least one metre can be maintained between the patients.

But there are questions over the safety of that NHS guidance.

[Separate NHS guidance on social distancing](https://www.nhs.uk/conditions/coronavirus-covid-19/social-distancing/what-you-need-to-do/) makes it clear that, to stop the spread of coronavirus, “you should… try to stay at least two metres… away from anyone you do not live with (or anyone not in your support bubble)”.

One disabled patient, Rachel\*, has described her regular trips to hospital for appointments with G4S’s Kent and Medway service as a “lottery” because she never knows if she will be forced to share her ambulance with another patient, and if that other person has asymptomatic coronavirus.

She said: “One metre is not safe. The guidance is two metres for good reason. If you are within distance of a cough hitting you, you are in danger.”

She said she was concerned that G4S was “mixing households within journeys, when people using patient transport are generally more vulnerable to viruses.

“Journeys should be single household only for maximum safety.”

Rachel said that some of the ambulances run by G4S as part of its non-emergency patients transport service (NEPTS) contracts do not have screens separating the driver from the patient area, while some vehicles do not have windows that can be opened to lessen the risk of contracting the virus.

She also said that, even when there are shields separating the driver from the patients, there are still unsealed areas around that shield.

Although drivers are told to wear gloves and masks when outside the vehicle, she said, they previously had to remove them when driving, although she said this is no longer happening.

Rachel, a wheelchair-user who has had to take numerous journeys to hospital with G4S during the pandemic, said the company’s policies were putting disabled people’s lives at risk, although she said her concerns had eased since the autumn.

On one trip last year, she was forced to share the passenger part of the vehicle with a powerchair-user, their carer and a third person.

One of the trio was exempt from having to wear a mask and was “a coughing splutterer”, she said.

She estimates there was spacing of no more than 40cm between them.

On another occasion, Rachel was forced again to share the passenger part of the vehicle with another service-user and insisted on having the windows open, only to be told by the driver: “I’ll have to ask her, she might not want them open, it might be too cold for her.”

Rachel said: “I volunteered her the options of cold or death, and she chose cold.”

G4S has contracts with a number of NHS trusts – it would not say this week how many – to provide non-emergency patient transport, including across Kent and Medway.

The company says on its website that it transports patients to and from hospital “safely, comfortably and on time” and that its vehicles “are clean and well equipped to maintain or improve quality of life whilst patients are in our care”.

A G4S spokesperson declined to say how often patients were asked to share ambulances.

He also declined to say if some ambulances have windows that cannot be opened, if there are unsealed areas around the division shields, and if patients are told in advance if their trip will be shared.

But he said in a statement: “Since the start of the pandemic, G4S Patient Transport Services has taken significant measures to ensure that we continue to provide a safe service.

“Our crews are tested for coronavirus twice a week and adhere to strict rules regarding the use of PPE [personal protective equipment] when in contact with passengers.

“We’ve installed screens approved by the NHS in the majority of our vehicles, and additional PPE requirements for crew members are in place in vehicles where screens are not available.

“We have specific ambulances designated for use with COVID patients only, and we never schedule COVID patients on journeys with non-COVID patients.

“Pre-screening of every passenger takes place prior to journeys to assess if they have COVID symptoms or any other special requirements.”

Rachel said that this pre-screening “consists of a call the day before to ask if you have a temperature, cough or loss of taste or smell”, which “is not a reliable indicator of whether or not somebody has asymptomatic COVID”.

The G4S spokesperson said: “While it is sometimes necessary for passengers to share ambulances with other passengers in accordance with NHS England guidance, we take every effort to ensure that social distancing is adhered to during our journeys wherever possible.

“While we have not been provided with sufficient details to look into the circumstances around this specific complaint, we regret any situation where a passenger is not completely satisfied with the service they’ve received.

“A well signposted feedback service is available to all our passengers that helps us to look into any concerns and learn from them.”

A spokesperson for NHS Kent and Medway Clinical Commissioning Group said it had had “no indication that the Kent and Medway service run by G4S did not meet the national NHS guidelines” and that the information provided by Disability News Service (DNS) “does not have the necessary detail for the instances described to be properly investigated”.

G4S is one of the country’s most controversial and discredited outsourcing companies.

Separately this week, DNS is reporting how G4S security guards at a hotel being used as part of the government’s quarantine scheme for air passengers arriving in the UK repeatedly shouted at a disabled woman as she was taking her daily exercise (*see separate story*).

But its track record also includes claims of assault and racism [at immigration detention centres](https://www.bbc.co.uk/news/uk-13802163), the [failure to provide enough security staff](https://www.theguardian.com/uk/2012/jul/24/london-2012-olympics-g4s-military) for the London 2012 Olympic and Paralympic Games, a [coroner’s verdict of “unlawful killing”](https://www.theguardian.com/uk-news/2015/sep/30/g4s-sued-by-ex-flight-attendant-who-witnessed-jimmy-mubengas-death) at the hands of G4S staff after the death of Angolan deportee Jimmy Mubenga in 2010, and [serious allegations concerning G4S staff at secure training centres for children](https://www.theguardian.com/business/2016/jun/09/scandal-of-g4s-run-medway-youth-jail-deepens-as-five-further-people-arrested).

*\*Not her real name*

*\**\**For sources of information and support during the coronavirus crisis, visit the*[*DNS advice and information page*](https://www.disabilitynewsservice.com/advice-and-information/)

**22 April 2021**

**Activists question council’s decision to build supported housing on contaminated site**

Disabled activists have raised concerns that a local authority has granted planning permission for a new supported living housing development for people with learning difficulties that will be built on a site contaminated with toxic materials.

The site, part of a six-metre-deep former railway cutting which was filled in with building rubble in about 1930, is also in an area of high risk for “unexploded ordnance”.

Previous planning applications for mainstream housing on the site in Greenwich, south-east London, were rejected, in 2014 and 2017.

But Labour-run Greenwich council, which owns the site, has granted permission for the supported living development, despite being told of the contamination in a report it commissioned itself.

The report, by consulting engineers MLM, found that the site was contaminated with potentially dangerous levels of toxic materials such as asbestos, arsenic, lead and cancer-causing PAHs (polycyclic aromatic hydrocarbons).

The report concluded that the site, on a former police car park in Royal Hill, contained toxic materials “at concentrations which could potentially significantly affect human health during the construction and/or operation of the proposed development”.

And it warned that “future site users… could come into contact with contaminated soils in gardens areas”.

The council notice which gave planning permission for the development says that measures will have to be taken to make the area safe, and to carry out further investigation to ensure there is no “unacceptable” risk to health from potential contamination.

A council spokesperson said that planning permission had been granted “subject to an acceptable and approved remediation strategy being developed and implemented”, and that this will “consider the health and safety of all surrounding residents, as well as future residents of the scheme”.

The strategy will need to be signed off by the council if it is satisfied the development will pose no harm.

But a spokesperson for [Greenwich Disabled People Against Cuts](https://twitter.com/GreenwichDpac) said: “We are concerned by the news that the council has approved a development for people with learning difficulties, when two previous applications for housing on the same site were rejected.

“We accept that the council has promised to take the necessary measures to make the site safe for local residents and future disabled residents of the scheme, but we will be watching to ensure that they keep this promise.

“We also question why such land would even be considered as suitable to build a property for disabled people.

“When such third-rate land is considered by Greenwich council as a place to build such accommodation for us, disabled people, that gives a clear message that we are of less value than others.

“Why could not such a resource be built on land that’s not contaminated?

“Greenwich has many other property developments at this time, yet none of them are on contaminated land.

“These other properties are mostly private with a few housing association flats.

“Greenwich council needs to listen to our voices, understand the objections, and realise the long-term impact on community confidence.

“It needs to remember: ‘Nothing about us without us’, thereby preventing some of the negative impact of some of its work which denigrates us and gives the impression that we are of less value.”

The council spokesperson said: “The suggestion that the council is less concerned about the health impact on people who are disabled or who have learning difficulties is incorrect.

“Every planning application is judged individually on its own merit by the planning board.

“The reasons for refusal of both the 2013 and 2016 applications were on the grounds of over-development due to scale and massing, and failure to complement the character and appearance of the street scene, and that of the West Greenwich Conservation Area.

“The current scheme is for a smaller development of six high-quality, safe and sustainable new homes built around a shared garden space for nine residents.”

She said the council’s Learning Disability Housing Strategy had concluded that “more adapted homes needed to be built” in Greenwich.

Asked if the council had felt pressured to grant planning permission because of the shortage of such housing in the borough, she said: “Each planning application is judged on its own individual merit.”

She added: “This development will help us to provide more good quality, local housing to those people that need and will benefit from it.”

It plans to commission a specialist service-provider to manage the development on the council’s behalf.

**22 April 2021**

**News provided by John Pring at** [www.disabilitynewsservice.com](http://www.disabilitynewsservice.com)