



**NOTICE OF DETERMINATION
CORE PARTICIPANT APPLICATION
MODULE 1 - CLINICALLY VULNERABLE FAMILIES ('CVF')**

Introduction

1. In my [Opening Statement](#) on 21 July 2022, I explained that Modules would be announced and opened in sequence, with those wishing to take a formal role in the Inquiry invited to apply to become Core Participants for each module. On the same day, the Inquiry opened Module 1 and invited anyone who wished to be considered as a Core Participant to that Module to submit an application in writing to the Solicitor to the Inquiry by 16 August 2022.
2. The [Provisional Outline of Scope](#) for Module 1 provides that this module will examine the resilience and preparedness of the United Kingdom for a Coronavirus pandemic. Further modules will be announced and opened in due course, to address other aspects of the Inquiry's Terms of Reference.
3. On 15 August 2022 the Inquiry received an application from Clinically Vulnerable Families ('CVF') for Core Participant status in Module 1.
4. I made a provisional decision not to designate CVF as a Core Participant in Module 1, thereby declining their application ("the Provisional Decision"), on 7 September 2022. CVF was provided with an opportunity to renew the application in writing by 4pm on 16 September 2022.
5. On 16 September 2022 CVF submitted a renewed application for Core Participant status in Module 1. This notice sets out my determination of their application for Core Participant status in Module 1.



Application

6. Applications for Core Participant status are considered in accordance with Rule 5 of the Inquiry Rules 2006, which provides:

5.—(1) The chairman may designate a person as a core participant at any time during the course of the inquiry, provided that person consents to being so designated.

(2) In deciding whether to designate a person as a core participant, the chairman must in particular consider whether—

- (a) the person played, or may have played, a direct and significant role in relation to the matters to which the inquiry relates;*
- (b) the person has a significant interest in an important aspect of the matters to which the inquiry relates; or*
- (c) the person may be subject to explicit or significant criticism during the inquiry proceedings or in the report, or in any interim report.*

(3) A person ceases to be a core participant on—

- (a) the date specified by the chairman in writing; or*
- (b) the end of the inquiry.*

7. In accordance with the approach set out in my Opening Statement and the Inquiry's [Core Participant Protocol](#), I have considered whether the application fulfils the requirements set out in Rule 5(2) in relation to the issues set out in the Provisional Outline of Scope for Module 1.

Summary of Application

8. CVF's original application states it is a campaign group, founded in August 2020. They are said to represent people with all manner of medical conditions and clinical vulnerabilities across all four nations of the UK. CVF estimates their current combined membership at approximately 31,800 persons, based on the membership numbers of its private Facebook group and Twitter followers and adding a multiplier to account for multiple occupancy households. CVF's purposes are stated primarily to be to support,



educate, assist, advocate and campaign for clinically vulnerable families in the UK due to the risks posed by Covid-19.

9. The original application was made on the basis that CVF has a significant interest in public health services and the planning for future pandemics and that the collective knowledge and experience of CVF's members will prove beneficial to the Inquiry. CVF is said to be keen to ensure that the Inquiry considers the full impact of the pandemic on the clinically vulnerable, their families and households.

10. CVF's renewed application explains that as the most at risk group, the most disadvantaged and therefore the most impacted by decisions taken by Government and other specialist bodies during the pandemic, they have a direct and significant role in relation to Issues 4 and 6 of the Provisional Outline of Scope for Module 1. In particular, they submit that the actual experiences of clinically vulnerable people, who during a pandemic would rely heavily on the decisions of public health services, should be properly heard in order for the Inquiry to fully examine the readiness of public health services for the pandemic, their capacity and resources and also the way in which relevant bodies monitored and communicated about emerging disease. Indeed, CVF go further and submit that I cannot comprehensively examine these issues without the full participation of those experiencing the public health services directly. CVF make similar submissions about the importance of seeking input from the 'lived experience' and expertise of the clinically vulnerable in relation to future planning for pandemic.

11. The renewed application also cites guidance and legislation in the field of health and social care in relation to integrated decision-making and the methodology of co-design, by which Government and specialist bodies engage with patients and the public affected by decisions in the course of policy development. In light of that context, it is submitted that recognising CVF as Core Participants in Module 1 is required to ensure the credibility of any future recommendations the Inquiry may



make. CVF's renewed application may perhaps be summed up by the views they provide from Matt Hancock MP, Secretary of State for Health and Social Care before and during the Covid-19 pandemic, who is quoted as having said "*The vulnerable know how to look after themselves*". It is on that basis that CVF submit they have experience and an expert understanding that makes them uniquely positioned to assist the Inquiry in Module 1.

Decision for the Applicant

12. I have considered with great care all of the information provided by CVF. I acknowledge the increased risk posed to the clinically vulnerable and those suffering from medical conditions as a result of Covid-19 and the significant and important work carried out by CVF. I wish to repeat my ongoing commitment, as set out in the Terms of Reference and repeated in my Opening Statement, that inequalities will be at the forefront of the Inquiry's investigations. This will include a focus on the disparities evident in the impact of the pandemic on different categories of people.
13. I am grateful to CVF for taking the time and care in their renewed application to elaborate about how they consider themselves to have an interest in applying for Core Participant status in Module 1, which I have found very helpful. I also appreciate that CVF brings a representative and valuable voice to those who suffered during the Covid-19 pandemic by virtue of being clinically vulnerable. However, given the wide impact of the pandemic there will inevitably be a very significant number of organisations and groups whose members were impacted by the pandemic and accordingly, and understandably, have a very real interest in understanding how that impact could or should have been mitigated by planning in advance.
14. I do not doubt that CVF is an organisation with a deep and genuine concern in how past planning for pandemics considered the potential impact on clinically vulnerable individuals. However, it is intended that Module 1 will consider the core systems and



structures within the United Kingdom for preparedness and resilience for an event such as the Covid-19 pandemic. Module 1 is primarily concerned with high-level pandemic resilience, preparedness and planning across all four nations. It will examine whether the correct structures, bodies, procedures and policies were in place at UK and at regional and national levels and look at their history, development, co-operation, and performance. In terms of inquiring into pandemic planning, this will include examination of the forecasting processes, the extent to which lessons were learned from knowledge of actual events and simulated exercises, the degree of readiness preparation, and the general resources that were available. The Module is concerned with how the relevant entities prepared and whether they were ready by way of general response.

15. In order to manage the work of the Inquiry in as proportionate manner as possible and to ensure the timely publication of my findings, lessons learned and recommendations for the future, it is not possible for Module 1 to consider the state of preparedness by reference to the potential impact of an event such as the Covid-19 pandemic on all kinds of eventualities. I will of course keep the Provisional Outline of Scope for Module 1 under review and, as I explained out in my Opening Statement, other aspects of the Inquiry's Terms of Reference will be covered in future modules for which Provisional Outlines of Scope will be prepared and published in due course.

16. I have considered with great care the submissions made in the renewed application about the importance of CVF as representing the voice of clinically vulnerable people and their argument that Core Participant status is required in order to ensure the credibility of any recommendations I may make. In particular, I note the submission made by CVF that if they are not granted Core Participant Status in Module 1, then the Inquiry *“risks falling into the same trap as the government and other state bodies have done previously. If the Inquiry fails to fully appreciate how much CVF can contribute to the understanding as to how a future pandemic can be planned for, there is a risk that mistakes will be repeated”*. Whilst I acknowledge CVF's



perspective, I am unable to accept this contention. I have not yet made any findings and retain a completely open mind at this stage as to whether or not the Government did make any mistakes, as alleged by CVF or otherwise. More generally, however, and to the extent that the issues raised by CVF are intended to be addressed by Module 1 as opposed to later modules, I have every confidence in the Inquiry's independent legal team to pursue all legitimate lines of inquiry with the investigatory and analytical rigour that a statutory inquiry of this scale and importance demands.

17. With that in mind, I have taken into account the fact that there are a number of ways in which CVF can participate in Module 1 without being a Core Participant. For example, it is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. CVF may have relevant information to give in relation to matters being examined in the Inquiry and the Inquiry will be reaching out in due course to a range of individuals, organisations and bodies to seek information, to gain their perspective on the issues raised in the modules and, where appropriate, to ask for witness statements and documents.
18. The Inquiry will also listen to and consider carefully the experiences of bereaved families and others who have suffered hardship or loss as a result of the pandemic, through the listening exercise. I made clear in my Opening Statement that this listening exercise is a significant and important task which will lead to summary reports of the impact of the pandemic to be used as evidence during the Inquiry's module hearings. CVF, and those they represent, will have the opportunity to contribute to the Inquiry, through the listening exercise if they choose.
19. For all of those reasons, having considered all of the information provided by CVF in light of the Provisional Outline of Scope for Module 1, I consider that CVF did not play a direct and significant role in relation to the matters to which Module 1 relates, nor do they have a significant interest in an important aspect of the matters to which Module 1



relates. I have therefore decided that CVF should not be designated as Core Participants in Module 1 and I confirm that this is my final decision.

20. My decision not to designate CVF as a Core Participant in Module 1 does not preclude them from making any further applications in respect of any later modules. CVF may wish to consider making an application for Core Participant status in future modules likely to deal directly with health inequalities and the clinically extremely vulnerable. I will consider any future applications that CVF may wish to make on their merits at the time they are made.

Rt Hon Baroness Heather Hallett DBE

Chair of the UK Covid-19 Inquiry

28 September 2022