

# NOTICE OF DETERMINATION CORE PARTICIPANT APPLICATION MODULE 3 - UK MEDICAL FREEDOM ALLIANCE

## Introduction

- In my <u>Opening Statement</u> 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 8 November 2022, the Inquiry opened Module 3 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 5 December 2022
- 2. The Inquiry has published the Provisional Outline of Scope for Module 3, which states that this Module will consider the impact of the Covid-19 pandemic on healthcare systems in England, Wales, Scotland and Northern Ireland. Further Modules will be announced and opened in due course, to address other aspects of the Inquiry's Terms of Reference.
- On 2 December 2022 the Inquiry received an application from UK Medical Freedom Alliance ("the Applicant") for Core Participant status in Module 3.
- 4. I made a provisional decision dated 9 January 2023 not to designate the Applicant as a Core Participant in Module 3, thereby declining its application ("the Provisional Decision"). The Applicant was provided with an opportunity to renew the application in writing by 4pm on 16 January 2023.
- 5. The Applicant did not renew the application by the prescribed deadline. Accordingly, this Notice sets out my final decision on the application.

### **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 <u>Core Participant Protocol</u>, 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 3.

#### **Summary of Application**

8. The Applicant states that it was founded in October 2020 in response to the Government's policies that it says undermined medical ethics and medical choice. The Applicant identifies itself as the UK's most recognised and respected organisation advocating for every individual's right to informed consent, bodily autonomy and medical choice. The Applicant has written over 50 open letters to the Government as well as publishing other open source material. The Applicant focuses on informed consent for Covid-19 vaccination and mandating of medical interventions such as mandatory vaccines for care workers and NHS workers, facemasks and Covid-19 testing. The Applicant is also concerned about extensive and serious breaches of the NHS Constitution around informed consent and bodily autonomy. The Applicant

asserts that human rights have been ignored and violated during the pandemic by Government policies.

#### **Decision for the Applicant**

- 9. I have considered with great care everything that is said in the application. Having done so, I consider that the Applicant does not meet the criteria set out in Rule 5 for designation as a Core Participant in Module 3 and, therefore, I have decided not to designate the Applicant as a Core Participant in Module 3.
- 10. Module 3 will consider the impact of the Covid-19 pandemic on healthcare systems in England, Wales, Scotland and Northern Ireland. This will include consideration of the healthcare consequences of how the governments and the public responded to the pandemic. It will examine the capacity of healthcare systems to respond to a pandemic and how this evolved during the pandemic. It will consider the primary, secondary and tertiary healthcare sectors and services and people's experience of healthcare during the pandemic, including through illustrative accounts. It will also examine healthcare-related inequalities (such as in relation to death rates, PPE and oximeters), with further detailed consideration in a separate designated Module.
- 11. The application is put on the basis that the Applicant has a significant interest in an important aspect of the matters to which Module 3 relates (Rule 5(2)(b)) and identifies a number of paragraphs of the Provisional Outline of Scope for Module 3 in respect of which the application is made. Although the application does not refer to Rule 5(2)(a), I have nevertheless gone on to consider whether Rule 5(2)(a) or Rule 5(2)(b) is met.
- 12. I do not consider that the Applicant played a direct and significant role in relation to the matters to which Module 3 relates (Rule 5(2)(a)). The focus of the application is vaccines. Vaccines are undoubtedly a very important aspect of the response to the Covid-19 pandemic but the focus of Module 3 is on healthcare systems. A later Module will consider vaccines. The application is also put on the basis of informed consent, bodily autonomy and medical choice in relation to vaccinations, masks and PPE. In that regard, I also do not consider that the Applicant has demonstrated it has a significant interest in an important aspect of Module 3, per Rule 5(2)(b) of the 2006 Rules.

- 13. However, while I am bound to consider the factors set out in Rule 5(2), it is also open to me to take into account other relevant factors. I am not obliged to designate any particular person or organisation as a Core Participant. I have granted Core Participant status to a number of healthcare professional organisations and Trade Unions. I consider that the matters raised in the application are sufficiently addressed through the designation of the aforementioned groups as Core Participants. I am determined to run the Inquiry as thoroughly and as efficiently as possible, bearing in mind the Inquiry's wide-ranging Terms of Reference and the need for the Inquiry process to be rigorous and fair. Given the vast numbers of people who were involved with, or adversely affected by, the Covid-19 pandemic, very many people in the UK could potentially have an interest in the Inquiry. Not everyone can be granted Core Participant status for the purposes of the Inquiry hearings.
- 14. It is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. The Applicant may have relevant information to give in relation to the 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 perspectives on the issues raised in the Modules and, where appropriate, to ask for witness statements and documents.
- 15. For all of those reasons, having considered all of the information provided by the Applicant, in light of the Provisional Outline of Scope for Module 3, I have decided that the Applicant should not be designated as a Core Participant in Module 3 and I confirm that this is my final decision.
- 16. I will keep the scope of Module 3 under review. My decision not to designate the Applicant as a Core Participant in Module 3 does not preclude it from making any further applications in respect of any later modules. I will consider any future applications the Applicant 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

13 February 2023