



**NOTICE OF DETERMINATION
CORE PARTICIPANT APPLICATION
MODULE 9 - ECONOMIC RESPONSE
FEDERATION OF ETHNIC MINORITY HEALTHCARE ORGANISATIONS (FEMHO)**

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 9 July 2024, the Inquiry opened Module 9 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 6 August 2024.
2. The Inquiry has published the [Provisional Outline of Scope](#) for Module 9, which states that this module will examine how economic support was delivered by the UK Government, the Devolved Administrations and Local Government by examining a broad range of economic interventions in response to the Covid-19 pandemic. This includes economic support for business, jobs, the self-employed, vulnerable people and those on benefits. It will also consider additional funding given to relevant public services and the voluntary and community sectors.
3. On 6 August 2024, the Inquiry received an application from the Federation of Ethnic Minority Healthcare Organisations (FEMHO) ("the Applicant") for Core Participant status in Module 9. This Notice sets out my determination of the application.
4. I made a provisional decision not to designate the Applicant as a Core Participant in Module 9 on 13 September 2024 (the "Provisional Decision"). The Applicant was provided with an opportunity to renew the application in writing by 20 September 2024 at 4pm.

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 [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 9.

Summary of Application

8. In making this determination, the fact that I have not referred to every matter or detail which is set out in the application does not mean that I have not considered it. The points addressed below are intended to capture what appear to be the most important points made in support of the application.
9. This is an application from the Federation of Ethnic Minority Healthcare Organisations for Core Participant status in Module 9, pursuant to Rule 5(a) and (b) of the Inquiry

Rules 2006. The Applicant is a consortium that represents over 55,000 individual health and social care workers and 43 organisations and networks. The application is made on the basis that its members played a direct and significant role in the matters to which Module 9 relates and, as a consortium, has a direct and significant interest in those matters.

10. The Applicant submits that its members, as health and social care workers, have a significant interest in the economic interventions identified in the provisional scope for Module 9. The Applicant further submits that it is uniquely placed to assist the Inquiry with examining the extent to which structural inequalities affected the capacity of economic interventions to address the disparate impact and hardship experienced by black, Asian and ethnic minority healthcare workers. The Applicant submits that its members can speak to these issues through their lived experience within the healthcare systems of the UK, have been directly and significantly affected by the economic challenges of the pandemic, have been actively involved in addressing the economic challenges within their communities and have suffered significant personal and economic hardships.
11. The Applicant draws attention to its insight into the adequacy and effectiveness of economic interventions for ethnic minority healthcare workers, including a lack of publicity, discrepancies and systemic barriers to uptake. It also points out its insight into disparities in services and support and failures of econometricians to devise appropriate metrics to capture race and ethnicity. The Applicant submits that its members come from economically vulnerable backgrounds and have suffered the effects of the pandemic disproportionately, including financial hardship. The Applicant draws attention to its members who were in outsourced or agency roles, who were excluded from the protections given to directly-employed NHS staff. The Applicant submits that Module 9 must examine how the economic interventions contributed to the disproportionate impact experienced by its members and their wider communities.
12. The Applicant submits that it has a direct and significant interest in ensuring that the unique economic struggles of minority ethnic healthcare workers are recognised and addressed. The Applicant says its involvement is vital to provide an understanding of how economic interventions affected the structural economic disadvantages associated with race and ethnicity.

13. The Applicant submits that it can provide insight into the effectiveness and communication of economic support, including barriers to accessing the economic support for ethnic minority healthcare workers and businesses. The Applicant submits that it can assist in relation to the implementation of business rates reliefs and grants aimed at supporting small businesses and whether they reached ethnic minority healthcare workers who ran small healthcare-related enterprises. The Applicant submits that it is crucial to identify, measure and analyse whether economic support considered and addressed the specific needs of different demographic groups. The Applicant specifically draws attention to grants that were made available to Filipino nurses but not to nurses of other nationalities. The Applicant gives examples of where interventions failed to adequately support black, Asian and ethnic minority healthcare workers, such as insufficient sick pay, delays in accessing funds, and lack of targeted support for those in precarious employment.

Decision for the Applicant

14. I have considered with great care everything that is said in the application. Having done so, I have decided, in my discretion, not to designate Federation of Ethnic Minority Healthcare Organisations as a Core Participant in Module 9. I wish to extend my sympathy to those who have suffered, and continue to suffer, from adverse health, illness and disability or financially as a result of the Covid-19 pandemic.
15. Whilst I appreciate that the Applicant's members have first-hand experience and knowledge of the economic interventions and were affected by the economic effects of Covid-19, I do not consider that as a result the Applicant necessarily played, or may have played, a direct or significant role in the matters being investigated in Module 9.
16. I have also considered whether the Applicant satisfies Rule 5(2)(b). The Applicant states that as a consortium, it has a direct and significant interest in the matters relevant to Module 9. Whilst I acknowledge that ethnic minority healthcare workers may have an interest in the economic interventions which were introduced, I have concluded that this interest is not so significant as to grant the Applicant Core Participant status in Module 9 because it relates most particularly to only one group of workers. The Applicant also says it has an interest on behalf of small businesses in the

implementation of business rate reliefs and grants but as it is principally a healthcare worker representative body there is insufficient information on the extent to which it is able to provide that perspective on behalf of a wide range of such businesses.

17. Even if that were not the case, in the exercise of my discretion, and having regard in particular to the need to manage the Inquiry effectively and efficiently, I would decline to designate the Applicant as a Core Participant. 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 in, or adversely affected by, the Covid-19 pandemic, very many people in this country could potentially have an interest in it and not everyone can be granted Core Participant status for the purposes of the Inquiry hearings. Therefore, I have, in my discretion, decided not to designate the Applicant as a Core Participant in Module 9.
18. It is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. The Inquiry will also hear and consider carefully the experiences of those who have suffered hardship as a result of the pandemic, through the listening exercise, Every Story Matters. The Applicant and its members may wish to contribute to the work of the Inquiry through this process. 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.
19. I acknowledge that particular vulnerable groups of people may have been disproportionately impacted by the pandemic. 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 the disparities evident in the impact on different sections of society including Black, Asian and Minority Ethnic individuals.
20. 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 9, I consider that the Applicant should not be designated as a Core Participant in Module 9 and I confirm that this is my final decision.

21. I will keep the scope of Module 9 and the designation of Core Participants under review. My decision not to designate Federation of Ethnic Minority Healthcare Organisations as a Core Participant in Module 9 does not preclude them from making a further application in any later module. I will consider any future applications Federation of Ethnic Minority Healthcare Organisations may wish to make on their merits at the time they are made.

Rt Hon Baroness Heather Hallett
Chair of the UK Covid-19 Inquiry
30 September 2024