

Witness Name: Helena Jean Rossiter
Statement No: 2
Exhibits: 1
Dated: 02 December 2024

UK COVID-19 INQUIRY

SUPPLEMENTARY WITNESS STATEMENT OF [HELENA JEAN ROSSITER]

I, [HELENA (JEAN) ROSSITER], c/o Broudie Jackson Canter Solicitors, 3rd Floor Walker House, Exchange Flags, Liverpool, L2 3YL will say as follows:

Key impacts and concerns raised by CBFFJ UK members

1. Given the large membership of CBFFJ UK, there is a wide variety of experiences of Vaccines and Therapeutics. This supplementary witness statement seeks to provide the Inquiry with an overview of some of those experiences and concerns. The points touched on in this statement relate to the experiences of other members of the group and they are necessarily in summary form. The Inquiry is referred to the schedule of client evidence which accompanied our Second Preliminary Hearing Submissions [INQ000474690]. All the individual bereaved family members therein, and named below in this statement, have given their consent for these accounts to be published.

Equitable Access and Distribution

2. Group members have raised concern about vaccination centre locations and the rollout of vaccines in care homes and hospitals.

3. **Mrs. Anne Lumsden** tested positive for Covid-19 at a care home in Surrey on 11th January 2021. She passed away on 17th of January 2021. Her daughter, Deborah Toohey, states that doctors did not visit Mrs. Lumsden's care home to distribute vaccines to the residents when they first became available. Medical staff were due to go into the care home a week or two before her mother contracted Covid, but Ms. Toohey understands that they refused to do so as a resident had tested positive. Ms. Toohey is of the belief that if doctors had visited her mother's care home sooner, or if the vaccine had become available at an earlier date, then some of the care home residents, including her mother, may have survived Covid-19.

4. **Winifred Partington** was in a hospital in the North West from 27th November 2020. She contracted Covid-19 on 6th March 2021 and died on 13th March 2021. Due to the restrictions on hospital visitation, her sons did not spend any time with their mother from October 2020 until the night before she died, when they were allowed to see her.

5. During the time Mrs Partington was in hospital many letters and phone calls were received at her home encouraging her to receive the vaccine. However, she was not vaccinated in hospital despite the fact that the hospital was being used as a vaccination centre. In its response to her daughter's complaint after Mrs Partington's death, the hospital confirmed that they did not start to vaccinate in-patients until 1st March 2021 due to training, logistical and vaccine storage issues.

6. Ms Partington was 82 years old when she passed away. She was vulnerable and in the priority group for vaccines. Her daughter believes that the hospital should have been vaccinating patients in line with the priority used in the community.

Conflicting Messaging and Rollout Guidance

7. Group members have raised concerns regarding conflicting and poorly communicated public health guidance relating to vaccine rollout and update.

8. One of our clients lost her husband **Graham** on the 30th of October 2021. He had underlying health conditions (including asthma) and was being treated by a GP for a chest infection that was not responding to antibiotics. Graham was admitted to hospital in the West Midlands on the 7th of October 2021 and tested positive for Covid on the 8th of October. Graham had only received two doses of AstraZeneca and was awaiting his third dose of the vaccine before he fell ill. Graham's wife is a senior nurse and has retained a copy of her husband's medical records. Her husband's GP wrote that the AstraZeneca vaccine was not effective for those with respiratory conditions, however this was not communicated to our client or her husband Graham, and an alternative vaccination was never offered.

9. Our client worked in various vaccination centres over the course of the vaccine rollout, and she states that the timing between vaccines did not appear to be based on scientific advice as this was constantly changing. Therefore, it appeared to our client that the gap between the second and third dose of the vaccine, which was set at 6 months, was not scientifically validated. Our client also wonders how effective the vaccines were.

10. **Mr. Inderjeet Girn** was not vaccinated, nor was his wife. The couple were about to start trying for their third baby and they asked their GP whether it would be advisable to have the vaccine. The GP recommended that they did not have the vaccine as it was not known what effect the vaccine could have on fertility. They also had a conversation with a midwife who was looking after Mrs Girn following a miscarriage and she said they should follow the GP's advice.

11. Mrs Girn's husband decided he would try and get the vaccine 2 weeks before he became ill with Covid. He had returned to work, and he was concerned about contracting the virus. The nearest appointment he could find was an hour and a half away from their home, so he decided to wait. As a result, he never received the vaccine. Mr Girn died on 4th September 2021, aged just 38-years-old. He was a fit and healthy man and had no underlying health conditions, leaving behind two very young children.

12. When Mr Girn was admitted to an East Midlands hospital, doctors kept saying he should have had his jabs. Mrs Girn shares that she received conflicting information in the hospital, and wonders what may have been had her husband received his vaccinations.

Prioritisation of vaccinations

13. The group represents a large number of bereaved families, many of whom have very different but equally important accounts of the impact that vaccine prioritisation had on them. We invite the Inquiry to take this range of impacts into account when examining the approach taken to prioritisation in the pandemic and in its recommendations for the future.

14. Sara Meredith's son **Daniel Meredith** passed away from Covid-19. He was 7 years old. Daniel had complex needs, and throughout the pandemic, Mrs Meredith advocated for children who are vulnerable to have access to the vaccine as early as adults. She and Daniel spoke to MPs and members of the House of Lords but were constantly met with the response that "children are not adversely affected." The UK Government appear to have ignored the fact that children could be vulnerable too.

15. Daniel was exposed to Covid-19 from his sister who, while working as a teaching assistant, cared for a child who was unknowingly Covid-19 positive. Daniel fought for his life in a West Midlands children's hospital for over two weeks, but there were no treatments available to help him as they had not been prioritised for children. Daniel sadly passed away from Covid-19 on 27th April 2022. He had only received one dose of the vaccine. The weight of his sister's grief was worsened still by her unwitting role in spreading the virus. Mrs Meredith

questions why better measures were not in place to keep children infected with Covid-19 home and protect school staff and their families.

16. After Daniel had passed away, his doctor told his family that if they wanted Covid-19 to be recognised on his death certificate they would have to wait until it had been cleared by the coroner. If the family accepted an alternative cause of death, Daniel's death would have been recorded that day. Mrs Meredith questions how many children's deaths were recorded differently due to parents wanting to progress arrangements straight after death; and how many Covid-19 deaths were registered as alternative causes of death, and why was this allowed to happen.

17. **Mrs Ann Newton** acquired Covid-19 in a care home in early January 2021. At that time, her grandson Nicholas recalls a discussion took place between her GP and the care home about her possibly being treated with antibiotics but there being no discussion of antiviral medication. Mrs. Newton was within days of receiving her vaccine, but due to the delayed rollout in the area, she missed out and was not afforded what her grandson Nicholas thinks would have been vital protection.

18. Mrs. Newton was taken to an East Midlands Hospital in an ambulance and received no treatment to fight the virus while there. She sadly passed away within a week from Covid-pneumonia, a stroke, and a heart attack. Nicholas believes his grandmother was not prioritised for a vaccination, as his own mother was an NHS worker and got vaccinated first whilst his grandmother was in hospital.

19. **Dr. Ali El-Gingihy** was admitted to a West Midlands hospital on 6th January 2021 for an investigation which was unrelated to Covid-19. Dr. El-Gingihy tested negative for Covid when he was admitted to hospital. His wife, Mrs El-Gingihy, asked whether he could be vaccinated in order to protect him, but she was told this was not possible as they did not vaccinate patients. Dr. El-Gingihy was placed on a ward with patients who had tested positive for Covid. After 10 days in hospital, Dr. El-Gingihy was permitted to return home on Friday 15th January and he was discharged, even though his condition had deteriorated.

20. Mrs El-Gingihy had to call an ambulance the following day. Her husband spent only one night at home. After returning to hospital, Dr. El-Gingihy passed away on Friday 22nd January 2021; he was positive for Covid-19 and had a DNACPR in place against his wife's wishes. 6 days later, Mrs El-Gingihy was herself admitted to hospital with severe Covid which she is sure she contracted from her husband the day he was sent home. When Mrs. El-Gingihy tried to get her husband vaccinated prior to January 6th – he was vulnerable, disabled, and

elderly – she was told on the phonenumber she called that they had run out of vaccines and would be in touch when there was a new supply.

21. Emma Renshaw's sister **Helen Renshaw** was an essential worker for TfL at Charing Cross station during the pandemic. She worked every assigned shift, even covering staff shortages at other stations. She believed she contracted the virus whilst covering a shift at Piccadilly Circus from a colleague who wasn't wearing his mask properly. Helen contacted her GP numerous times and attended A&E twice, only being admitted on her second visit due to difficulty swallowing and taking fluids. Whilst still in this condition, her hospital tried to discharge her. Sadly, she passed away on 1 March 2021 whilst she was in hospital.

22. Helen was a carer for her mother, who has Alzheimer's, and who subsequently had to go into a care home. At the time of her passing Helen had not yet been given the chance to receive a vaccine. She was advised that unless she was receiving Carer's Allowance for looking after her mother, she was not eligible for the vaccine on the basis of being a carer for a vulnerable person. Her family now understands that this may not have been the case.

23. On top of this failure in communication, Ms Renshaw asks why TfL and other transportation workers across the country were not prioritised for vaccines. She was an essential worker, but she was not eligible for the vaccine for a year.

Vaccine availability, messaging, and uptake

24. A number of families have identified structural and institutional racism as drivers of vaccine scepticism and inequitable distribution to people from particular ethnic minority communities. This includes large numbers of frontline workers who were at increased risk of Covid-19 because of their work. The group has particular concerns that this is an issue which is being approached as a failure of individuals within those communities, rather than of the system itself. The problem is not that such communities are 'hard to reach' or that individuals are 'vaccine hesitant,' but that government, public health, and healthcare institutions, failed to address different concerns within diverse communities, through appropriate messaging and targeted access to advice, vaccines, and therapeutics.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed: Personal Data _____

Dated: Dec 2, 2024 _____