

**NOTICE OF DETERMINATION**  
**CORE PARTICIPANT APPLICATION**  
**MODULE 6**  
**FEDERATION OF ETHNIC MINORITY HEALTHCARE ORGANISATIONS**

**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 12 December 2023 the Inquiry opened Module 6 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 19 January 2024.
2. The Provisional Outline of Scope for Module 6 provides that this module will examine the impact of the Covid-19 pandemic on the publicly and privately funded adult social care sector (the “Care Sector”) 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.
3. On 19 January 2024 the Inquiry received an application from the Federation of Ethnic Minority Healthcare Organisations (“FEMHO”) (“the Applicant”) for Core Participant status in Module 6. I made a provisional decision not to designate the Applicant as a Core Participant in Module 6, thereby declining the application (“the Provisional Decision”), on 8 February 2024. The Applicant was provided with an opportunity to renew the application in writing by 4pm on 15 February 2024.
4. On 15 February 2024, the Applicant submitted a renewed application for Core Participant status in Module 6. I made a final decision not to designate the Applicant as a Core Participant in Module 6, thereby declining the application (“the Final Decision”) on 27 February 2024.
5. On 9 June 2025, the Applicant submitted a second renewed application for Core Participant status in Module 6 (“the Application”). This notice sets out my

determination of the Applicant's second renewed application for Core Participant status in Module 6.

## **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 6.

## **Summary of Application**

8. In the original application, FEMHO stated that it is a multi-disciplinary consortium representing over 55,000 individual members and 44 organisations and networks, with membership including healthcare workers and social care workers. In the second renewed application, FEMHO states that many of its members work in a variety of roles and settings in the social care sector including, care homes, domiciliary care and informal community-based healthcare. The roles they undertake cover care assistants, nurses, agency and bank staff and roles in family settings without formal recognition.

FEMHO has provided a list of the representative organisations within its membership that they say provide direct, verifiable representation of care sector workers.

9. Whilst recognising the contribution of the Frontline Migrant Healthcare Workers Group (FMHWG), who are Core Participants in Module 6, FEMHO states that their contribution is distinct and necessary to capture the broader experiences of non-migrant ethnic minority workers. Further, FEMHO submits that its integration and role as intermediary between policy-makers and ethnic minority workers allows it to offer critical insights and pose targeted questions, that FMHWG may not be in a position to do. FEMHO proposes that a distinction has been drawn in other Modules of the Inquiry where both FMHWG and FEMHO have been granted Core Participant status.
10. FEMHO submits that it can offer a unique contribution by speaking to structural inequality, governance failures, and institutional learning. In particular how structural racism shaped the care sector's pandemic response, reasons for the disproportionate impact on Black and Asian care workers and lessons that must be learned for future planning, regulation and resourcing of adult social care.
11. FEMHO states that it can assist the Inquiry with all of the issues within the Module 6 Provisional Outline of Scope (summarised in Annex A to the Application) as it had extensive involvement in healthcare policy and decision-making during the pandemic and points to, in particular, the procurement processes and the racial inequalities in PPE distribution. Further, that it has not been afforded the opportunity in other modules to speak to the issues within the Module 6 Provisional Outline of Scope.
12. The Applicant also raises the fact that it has Core Participant status in Modules 2, 3, 4, 5 and 7. However, FEMHO submits that it has considered making a Core Participant application carefully in each module, including Module 6, and has only applied where they consider that they have expertise and contributions to make. FEMHO states that its participation in Module 6 would materially assist the Inquiry and is essential to ensure the Inquiry can deliver on its commitment to place inequality at the forefront of its investigations. Further, that refusing their application again would mean that a vital constituency will remain unheard and that this is not only a matter of justice, but of completeness.

## **Decision for the Applicants**

13. I have considered with great care everything that has been said in each of the applications made by FEMHO to enable me to assess the merits of the application as a whole. Having done so, I remain of the view that the criteria in Rule 5(2)(a) and Rule 5(2)(b) are not satisfied.
14. In its second renewal application, FEMHO explained that its members work across a range of health and social care settings and listed various roles played by its members, for example, care assistants, nurses, agency and bank staff, in an attempt to demonstrate that they had a direct and significant role in the adult social care sector (Rule 5(2)(a)). FEMHO has almost entirely repeated the contents of the Annex that was provided with its renewal application and which lists a number of member organisations. However, the majority (if not all) of the member organisations appear to be related to the health sector and not to the care sector. The list provided with the second renewal application does not state the roles of its individual members.
15. I have read with care what FEMHO has said regarding its members playing a direct and significant role. Unfortunately, I have not been presented with any fresh material that addresses this particular point or suggests any change of circumstances from when I made my final decision. It remains my view, therefore, that FEMHO has not demonstrated that its members have played a direct and significant role in the issues relating to Module 6 (Rule 5(2)(a)).
16. Further, FEMHO appears to maintain its focus on those working in the health sector (Module 3) and on PPE procurement and distribution issues (Module 5). It still has not shown that it is sufficiently representative of workers in the adult social care sector and the issues in the Module 6 Provisional Outline of Scope. In my determination I found that FEMHO had not demonstrated a significant interest in the issues in Module 6 (Rule 5(2)(b) and I have not been presented with any material to suggest otherwise. I, therefore, remain of that view.
17. I am very grateful to FEMHO for its assistance in other Modules in which I have designated it as a Core Participant, but that does not mean I am bound to grant it status in every module to which it applies. In this Module, as I have stated previously, I

am satisfied that other Core Participants are able and better placed to assist in ensuring the voices of minority ethnic communities in the care sector are heard. I do not accept that FEMHO's contribution to Module 6 would be sufficiently different from that provided by FMHWG, who are Core Participants in Module 6, to necessitate their status as Core Participants.

18. 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. In reaching this decision I have taken into account the timing of the second renewed application including that more than one-year has passed since my final decision and it is less than one-month before Module 6 public hearings begin.
19. It is not necessary for an individual or organisation to be a Core Participant in order to provide evidence to the Inquiry. I have received a witness statement from the Applicant in Module 6 dated 17 April 2025 which I shall consider when reviewing the evidence in this Module.
20. For all of those reasons, my final decision stands: FEMHO should not be designated as a Core Participant in Module 6.

**Rt Hon Baroness (Heather) Hallett DBE**  
**Chair of the UK Covid-19 Inquiry**  
**13 June 2025**