

Witness Name: Fiona Walker

Statement No.: 1

Dated: 2nd July 2025

UK COVID-19 INQUIRY - MODULE 6

WITNESS STATEMENT OF FIONA WALKER

I, **Fiona Walker**, of PD will say as follows: -

Introduction

1. I'm Fiona Walker and I live in Yorkshire. I have Left Sided Hemiplegia Cerebral Palsy, Ataxia, mild Learning Disability, Autism and severe mental health issues.
2. I live independently in my own home, but I've spent time in an Assessment and Treatment Unit twice, which is a specialist hospital for people with learning disability and autism when you have severe mental health episode.
3. As the pandemic started, I began having severe problems with my back, which turned out to be curvature of the spine because of this I needed 2 operations. Before this I was independent and mobile but as this has developed, I have become less mobile and now use a mobility aid to get around the house and a wheelchair fulltime outside. This has had a massive impact on my mental health.
4. My disabilities affect my everyday life; I need support in every aspect of my daily life to meaningful life and participate in my community.
5. I was asked to come and speak at the inquiry because I'm a Commissioner for 'How We Survive and Thrive: The People with Learning Disabilities Pandemic Inquiry' and work with Learning Disability England. I have a passion for making a difference and if there was another pandemic, I want to make sure people with learning disabilities and their families are heard.

Experience of direct payments to fund domiciliary care prior to January 2020

6. I live independently in my own home and had been receiving direct payment for about 10 years. Direct payments are a way of receiving your social care budget that allows you to be in control and more flexible about how your budget is used. I use it to employ a team of personal assistants. My direct payment budget was 21 hours support a week, I used flexibly at times, but most of the time it was used as 3 hours of support a day.
7. My support helps me to prepare my evening meal, prepare food for next day and sometimes do batch cooking to keep in the freezer for emergencies. I would also use my hours to help me keep my home tidy, do shopping, budget my money, maintain relationships with my family, give me emotional support, help me with my college assignments, be part of my community, encouraging me to get out and about, physio routines, medical appointments, and helping read and manage my mail.

Management and availability of direct payments during the pandemic

8. I used an organisation to manage my direct payments, this means they would sort out peoples' wages and contracts, employment insurance, tax and contributions, and human resources. They would also make sure I was receiving all of my social care budget.
9. This company managed my direct payments all the way through the pandemic. All the support I received from them during the pandemic was because I asked for it, none of it was through their own initiative. I got support for the following:
 - a. They initially provided me with some PPE and Covid Tests but after the first delivery it was my responsibility to get more.
 - b. A template letter to allow staff to access covid vaccinations as social care staff. The letter needed to be edited to fit with our situation, but it was silly because I needed support to do it so the PAs were basically writing their own letter. We wrote a standard one and changed the names and I just signed it.
 - c. They provided cards for us to complete to explain that personal assistants were travelling to work, shopping and collecting medication on my behalf, in case they were stopped or challenged.
10. Throughout the pandemic I wasn't sure how my responsibilities as an employer changed, there was no information or accessible information about this.

11. I was responsible for recruitment of my support staff. I did not feel able to recruit new staff during 2020 – 2022.
12. I think I would have benefited from more hours during the pandemic, crisis planning, more reassurance everything was okay, company, and learning to use technology. I also needed extra tasks doing that were done by other people before the pandemic, like managing my nails and hair.
13. I considered ringing to get more hours, but they were reluctant to give me what I already had, I didn't want to rock the boat. I was worried they would do a reassessment when the pandemic was over, and I would lose more hours. I was nervous as they quibble at the best of times. I felt I had to make the most of what I had.
14. Over this period, I had no contact from Adult Social Care, I didn't have any of my annual assessments or reviews. I also didn't get any support or advice about managing my direct payment. I felt like I could have benefited from a welfare call from a social worker.
15. I had no crisis planning in place and I don't know what I would have done if I had no staff or become seriously unwell. I would think at least I can get my breakfast; I would live on cereal. I don't know what I would have done if I had run out of milk or something.
16. The government don't understand about direct payments; I think it should be mandatory to do emergency planning – even if you never use it you have to have one in place. Needs reviewing once a year – social workers should be taking about it.
17. Before the pandemic I had 4 members of staff, they each did a couple of shifts a week. I lost 2 members of staff, the first because she needed to self-isolate for her own health.
18. The second member of staff I lost about 9 months into the pandemic; I had to ask her to leave because she didn't want to test or use the PPE properly. I don't know if it was because my staff were younger, but they didn't understand the importance of testing and that if I had caught covid I could have died – it was a difficult situation

because no one had been in that situation before. I was worried about the impact of me having to dismiss this person, but I was looking after myself and other staff. There was no guidance, it was a decision I had to make for myself.

19. I didn't recruit any new members of staff during this time; I didn't think anyone would respond to the advertisement due to being in the pandemic. I couldn't use zoom so couldn't do interviews online. But I also couldn't do them in person, it's important to know people and know if you can work with them. Building that trust is important. Normally we would do shadowing training with another member of staff but that would me and my staff at more risk but having us all together in my home.

Changes to the Personnel Providing Personal Assistance during the Pandemic

20. We had to restructure the whole team and change staff's hours. We had to go from people doing a couple of shift a week, to staff working 5 days on, 10 days off. They also agreed in principle they would cover someone else's days if they caught covid. We decided to work like this because we wanted to limit the risks from having too many people coming in and out of the house. There was no testing at this point. Me and my senior PA decided that was the best way to do it.
21. The new rota worked most of the time, but I was really worried about if everyone was sick or people decided to leave. There wasn't a plan for if this happened. Before the pandemic if I didn't have staff on for whatever reason I could go to my dads for tea. But during the pandemic this wasn't an option or a long-term solution.
22. I felt lucky that people agreed to the changes and felt this was because we had a good working relationship and didn't want to let me down.
23. This rota went like this maybe 18 months, the rules were really confusing and mixed messages about coming out of lockdown, so I continued to keep to the system that I knew worked. I was scared people would be fined or things like that – there was no easy read information. I worried that as their employer I would have to pay for that.
24. All of my staff were students, so I was doing the rota based on them attending online lectures during the day. I was glad they were staying at university and not going home as that would have left me without staff. I was so appreciative they were still willing to come in, if they had gone home or said we aren't taking the risk what was my alternative? I don't know how I would have recruited new staff.

25. Staff came in the evening as it was important to me that I got a good nutritious meal and they helped me make food for the next day. This meant I didn't get any support or see anyone during the day.
26. I feel like its assumed by the government and social care that you have family support as well as your social care support, but that's not the case for me. I lost my mum the year before covid, she provided me with a lot of emotional support. That left a big gap in my life. I don't have siblings and I have a small immediate family so there wasn't a lot of support there.
27. Before the pandemic I had a Circle of Support, which is a group of people I chose who met every couple of months and they would help me tackle issues and make sure I was living a fulfilled life. I stopped having a circle of support through choice before the pandemic started because I felt like everything was running smoothly. Looking back now I think that was a mistake, even though I couldn't have predicated covid. I think they would have always been on the end of a telephone, and they could have got together on zoom – it could have been a vital support. I didn't really think about restarting the circle during covid because I have lost touch with some of them and felt very awkward about asking for help.

Changes in the nature of care and support provided during the Pandemic

28. During the pandemic my care became more personal. Before the pandemic my staff didn't do anything for me that would count as personal care, I paid professional people to come into my home. Because I couldn't do this during the pandemic I had to ask my staff to take on the role, it wasn't in their job description so it was a difficult request for me to make.
29. The things I required support with were cutting my nails and my hair. If my nails aren't looked after they can cause me pain so that's important. I think this was a big responsibility for my staff to take on because my staff had no training. At one point my finger got infected because of this support and I had to have antibiotics.
30. Before the pandemic when I was in an Assessment and Treatment Unit, the staff there couldn't do these tasks they told me they couldn't do that because it was a

sexual act. I was really worried my staff might get in trouble for that, I thought it was a reasonable and necessary request, but it was a difficult thing to ask for. No one had a problem with it, and I trusted my senior member of staff more to help, we had a good relationship.

31. We did not know if staff needed to use PPE when doing these tasks. If we had had clear instructions on when to use it that would have been helpful, we used our best judgement. We were all learning together.
32. I felt there was a significant change in my relationships with my staff the pandemic and the increase in personal care. At times I needed them to be more of my friend, and this impacted my boundaries and role as an employer.
33. This has more of a lasting impact than I realised because with my next set of staff I expected them to be more like friends and that lead to some of them taking advantage. I was often uncomfortable with them oversharing about their personal live. Going back to previous boundaries was very hard and I don't think I ever got it right again. I used to be strict about boundaries, but it all got a bit messed up.
34. This experience made me more nervous about world events in the future affecting my support.
35. One big change was that we decided to have a team meeting on WhatsApp rather than doing them in-person. After I got used to it, we never went back to having them in-person, it worked better and was easier as you didn't have to get everyone in the same room. We learnt that you could do chat groups on WhatsApp – so if they wanted to change shifts or were ill everyone could see it. Technology was good in that way.

Staff access to testing, training and PPE (including any views on the adequacy of PPE) during the pandemic.

36. The company that managed my direct payments sent me PPE and there was a number on the box to ring if I needed more. I never directly paid for any of the PPE but assume it must have come out of my budget. I was just sent PPE and not asked what I needed. For example, I couldn't make requests about glove sizes and I was

sent aprons but I didn't need them, so they were wasted. I would have been more useful for them to ask what I needed.

37. There were no instructions on how to use the PPE safely, it just arrived in a box. It was very unclear exactly when or how the staff should use it. I didn't know if it was just for in the house or when they were out. They used it when they were doing tests and my nails but I didn't know if they should use it at other times when they were close to me, like putting my dinner on the table or comforting me. It felt like a barrier to emotional support because they had to put PPE on before they could even come close enough to do that, it made me hesitant and feel awkward about putting them in a position to have to do that.
38. Some staff were strict, sometimes over the top, about using the PPE. Others had to be told to use it. This was difficult, sometimes I felt like I was being bossy, but I also like things to happen a certain way so when it didn't that was stressful.
39. There was no information provided on how to dispose of the PPE safely. We decided to put a small bin near the front door for everyone to use which was emptied as it got full.
40. Staff had no infection control training before covid, or during. It wasn't something I felt like we needed before covid, but during covid everything was guess work. I feel like this was putting peoples lives at risk.
41. I didn't like using PPE because it made it feel like it wasn't my home, like it was a care home. That was when you wanted it to feel like home because you couldn't go out anywhere. I was conflicted because I didn't want staff to catch it or give it to me – but I didn't want to give it to them either I would have felt awful.
42. I received the PPE quite late, at least a month into the first lockdown. As I received the first lot of PPE the government was already talking about shortages so I wanted to keep hold of some for emergencies.
43. The quality of some of the PPE wasn't fit for purpose. For example, the string on the masks often broke when putting them on and there were no instructions. There were mixed messages online about how to wear them properly. We also had problems with staff putting their nails through the gloves, because they were too small and poor

- quality, this meant they had to wear two pairs which meant we used the gloves quicker. Because I hadn't had personal care before I hadn't had to ask the question if people were allergic to latex – in the end this wasn't a problem but its another example where the company just assumed that everyone's needs were the same.
44. Staff had to support me to use PPE because it was a big change and difficult to do myself in terms of putting it on correctly. I really struggled to wear a mask as I felt like I was suffocating. I don't think people with disabilities were considered in rules around PPE and masking. I know exceptions were made eventually but I didn't want to wear a lanyard when I was out and advertise that I have a disability. There was a stigma about not wearing a mask and I didn't want to be challenged – it was hard enough going out.
45. Testing was a big worry for me; I was worried that we weren't doing it correctly. I didn't want someone to get covid from us because we were doing it wrong. Staff watched videos online to learn but I'm not convinced we always got it right. There was never any training offered on this for my staff.
46. Because I wasn't leaving the house I only tested when I had to go to medical appointments and staff had to support me to test because I don't have the dexterity to do it myself. There also was not any accessible information on how to test so that was another barrier.
47. I could not do the test myself but I also found it really hard for anyone to put the test stick up my nose. I felt like they were invading my personal space.
48. Staff tested on their first day of their 5 days on the rota. I was being trusting as an employer that my staff were testing before their shifts, I didn't ask to see their results I just trusted what they told me. There was no information given to me as a direct payment user on how to manage testing with staff or recording the results.
49. The company that managed my direct payments sent me a template letter for staff to use to get their vaccinations. I had to fill that in with their personal information and print it off and sign it for each member of staff. They had to take a copy of their job contact too, but that was easy I had those in a file. Staff didn't have to prove they had the vaccination; I had to trust that they had. I wouldn't have had the confidence to ask them to prove it.

50. Getting the vaccination was important to me. It was only possible to get an appointment during the day, it wasn't possible to change staff hours so I had support to come with me.
51. My dad had to take me, because I was very anxious about using any kind of public transport. He didn't come in with me because I thought you weren't allowed to take people in with you. That meant I had to navigate the whole appointment on my own, which was stressful.
52. When I got to the vaccination centre it felt very regimented, and I didn't feel like I could ask for the help I needed. I was given lots of directions, instructions and had to wait which made me more anxious. This is another time when accessible information would have been helpful. I would have liked to have a member of staff with me to give me reassurance and it would have made me feel less anxious – they know techniques to help keep me calm.
53. It was like a conveyor belt and it didn't feel like there was time to ask questions. There wasn't enough information about how to use the card after your vaccine, I didn't know what the rules were about it, so I just always carried it.
54. I think it would have been easier to have the vaccination at home or if there were some sessions for vulnerable people, this could have made sure people had enough time and your reasonable adjustments. I think everyone should be treated in mainstream services but this would really have helped for the vaccines.

The impact of key decisions made during the pandemic on access to family, friends and loved ones

55. It was a really difficult time; there was long periods of time where my staff were the only people I would see. The first lockdown announcement felt huge and really cut me off from my support network. It made me really anxious and seeing the numbers of people dying was very scary and I felt like I was just going to die. They weren't saying much about people with learning disabilities but I know from experience they wouldn't have valued my life.

56. I didn't see my partner for 10 weeks because we were living separately and he was in a different city. We hadn't been together for a year at that point and because we were still early in relationship moving in together didn't feel like an option. I was worried about how long we would be separated and what the future held for our relationship. Felt like I'd lost my chance at being happy.
57. I used to see my dad at least once a week before the pandemic and knew if there was an emergency he was on the end of the phone and 10 minutes' drive away. He would come to me if he had a problem too. During the pandemic I would speak to him on the phone but that wasn't the same.
58. I worried what I would do if I had a problem. The rules said people couldn't come into your house and I worried about asking him to come in and help me. I know that me needing help was exceptional circumstances, but I still didn't feel like I could break the rule. I was worried about him and me getting in trouble and the consequences – like getting arrested.
59. I lost my mum the year before the pandemic, and I really felt her loss because I know she would have been a huge emotional support. The pandemic made it really hard to grieve because we couldn't do the things we had planned partially for the first anniversary of her death.
60. The rules were constantly changing but always unclear which added to my anxiety, depression and loneliness. There should have been accessible information. I became hyper focused on the dates where the government said they would review or change the rules because I wanted things to get better but usually it just got more confusing.
61. One thing that really frustrated me was when they changed the rules so you could have a few people in your garden. I didn't know what you were supposed to do if you didn't have a garden. I only had a car park, so I didn't know how the rules applied to that. I didn't really meet up with my partner, it was an hour's journey for him just for us to spend time together in a car park. It didn't seem worth it.
62. Understanding distance is difficult for me too when we had to social distance, my ataxia made it hard to understand that.
63. I lost contact with people from college, that friendship group disappeared almost overnight. Lots of things moved online but I hadn't really learned to do, I needed lots

of support to join things online and it was often when my staff were at university not on shift so I didn't get to do much. That made it difficult for the next course too, to learn as I went.

64. It was difficult to maintain relationships because you didn't know when the pandemic was going to end, everyday just seemed the same so it was hard to find things to talk about, you weren't doing anything. I lost a lot of motivation and felt myself slipping into a depression. The isolation and lack of focus meant I got into a vicious cycle of going to bed later, getting up later and not caring about my appearance as I usually would. This affected my mental health negatively.

The impact of key decisions made during the pandemic on community services and/or other external support

65. Before the pandemic I received physio once a week at my local hospital. This stopped at the first lock down and never restarted. I got in the post a sheet of paper to explain how to do exercises. No one phoned me to check I understood. When I started with back problems in September 2021, I phoned the physio and I was told to stop because we didn't know what was going to happen.
66. Before I had back problems the staff helped me do the exercise but it was not being delivered properly – they weren't trained so it wasn't done properly. When I contacted the physio and said what had happened, they said stop immediately so there's no extra damage.
67. This contributed to tightening up of muscles, which means I have more spasms and take more medication to try to reduce the spasms. My cerebral palsy means I need regular physio.
68. Not having the physio, I needed affected my physical health and has contributed to fact I'm not mobile anymore. I now use a walking aid in the house; I can't stand or walk independently.
69. I have not had physio because of was waiting for an operation. As a result of waiting for so long for the operation I kept having to have scans and they said it has deteriorated even more.

70. I never heard from a social worker throughout the pandemic. It would have been nice if someone has been in touch to ask if you need anything extra or are you managing. I know they couldn't visit but a call would have been nice.
71. I did not get any contact from anyone else in Social Services but they did keep paying the Direct Payment for my support.
72. My GP did not contact me. I'm on the Learning Disability Register, and did not hear from anyone including the specialist learning disability nurse. I had met them once before to have an Annual Health Check. I did not get another Annual Health Check during the pandemic so there was no preventive check on my health.
73. I was doing Maths and English level 2 at college before Covid. College stopped and the tutor did not want to do it online. I had done well in mock exams so they just said I had passed. They just phoned up in June or July 2020 and said you've passed now so that's it, go on to the next course. In September I moved onto the next course, online but I had never used online before so found it hard. The only person I knew was the learning assistant supporting me. I knew her because we had worked together on a previous course. Towards the end of that term we went back in person but I didn't know anyone because we had only been online and you do not get the same chance to get to know each other. In January 2021 we went back online. This really affected my learning.
74. Community transport stopped altogether. Community transport is a voluntary organisation that provide cheaper accessible travel for disabled and older people. I used it for college, hospital appointments, and shopping. I got to know people, the drivers were all volunteers. Towards the end of the pandemic this came back but it had changed. You had to pay before you travelled using the phone, rather than cash to reduce the risk of infection.
75. This was an important service to me. For example, I had to be picked up early from college once and they asked if it was covid related. It was like a small family of people you would see regularly and looked out for you. For example, they would bring my shopping in.

76. I rented my flat from a social housing landlord. They did not contact me during the pandemic to check if I was OK or needed anything. Fortunately, I did not have any repairs.
77. I had one neighbour who would regularly text to check I was okay. I'm sure I could have asked her to get me some shopping but people have their own lives and I didn't want to bother her.
78. A neighbour once put some biscuits on the doorstep as a gift.
79. I saw an advert on Facebook from the Council about volunteers who might come and help. I got one and she came 2 or 2 times and we would stand outside. I felt she was coming to talk about herself and give me all her problems. She asked me to give her money. I did not give her any and I didn't report it to the Council. I just stopped seeing her.
80. I feel like no one was checking the volunteers were acting an appropriate manner.

The impact of key decisions made during the pandemic on healthcare and medicines

81. I had a card so the staff could pick up my medicines once a week. The staff had to wait outside the chemists to get served so it would take longer, and it took them longer to get back from the chemists. It would eat into my support time. It worried the staff would not have enough time to do everything that I needed on their shift. I was anxious about what would happen if the medication was wrong and they had to go back to the chemist. It did not happen but it was always on my mind.
82. The day before picking up medication the staff and I had to make sure they had the PPE they needed, including 3-4 masks in case they were not suitable, because the masks were not good quality.
83. I did not ask for monthly packs at the time because I was so stressed and anxious and could have been tempted to endanger my own life.
84. The medication comes in trays but I cannot get the tablets of the tray. I needed the staff to put the tablets in boxes for each day for me. It caused me a lot of anxiety that it might not be done correctly or if no staff could come, I would not have any medication.

85. I was not actively being cared by the Learning Disability mental health Team services at that time as they had discharged me before the pandemic started. The service did not get in touch. I could have ended up back in an Assessment and Treatment Unit because I had been discharged no one checked I was still well. I did contact them asking for help once during the pandemic but they said they were not taking people like me with a mild learning disability. I had go to community services they said not the specialist learning disability services.

86. Community services Cognitive Behavioural Therapy online but that did not work for me. When I am anxious, I forget my techniques for coping – having a check in would have been helpful to make sure I was coping. I have got better at picking up signs when I know I am becoming unwell but I didn't have enough people to talk to at the time so wanted some support from the service. I now have a supportive partner I can see when I am becoming unwell.

The impact of key decisions made during the pandemic on food, household and other supplies

87. I had to make sure the staff had PPE before they go to the supermarket.

88. If my staff didn't come back with what I wanted, that would cause me stress and worry. It's important I have a healthy diet because it helps my mental health. Because somethings weren't available, like toilet roll, someone came up with the idea of cutting kitchen roll.

89. The staff and I thought it would be better to try get delivery slots; we had never done that before so it was all new. But that was really difficult, even to get the slot. There were loads of times where we couldn't get one. Later we found about priority shopping delivery slots. I did not want to take one as I was not sure I was allowed to. It was not explained clearly.

90. Shopping even online was difficult. The staff had to come early to be there before the slot. Once time I got the delivery on a Sunday but it did not turn up because the van has broken down. They said it would come on Monday – a member of staff had to come in twice to help me. It was an important lesson. Because you had to rely on

things – usually I would have just gone and got some milk but because it was the pandemic and I couldn't.

91. I wasn't very computer savvy. I had a laptop for college before the pandemic, but didn't use it for other things. Shopping online was new to me.

92. It really upset me because one of the members of staff in the supermarket said to one of my support staff if you are shopping for a vulnerable person you have to come at a particular time. That felt like another restriction.

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:

PD

Date: 2nd July 2025