submission builds on the previous evidence sent to the Committee during its inquiry into the Government's response to the pandemic.

Right to life

- Lack of training on human rights and on end of life care puts older people at risk of discriminatory use of DNAR orders and of inappropriate withdrawal of care
- Older people having their health needs ignored or overlooked due to discriminatory attitudes or assumptions about their wishes/needs

When a woman's health significantly declined after moving into a care home, her social worker refused to review the care or discuss the visiting restrictions with care staff. Instead, the social worker said 'that's what happens with dementia'. [Example from anonymous helpline client]

Right to be free from inhuman/degrading treatment

- Lack of food or fluids leading to malnutrition/dehydration
- Neglect or lack of care leading to harm/suffering

A son became concerned about his father's care after noticing he was not always getting his medication or appropriate diet, was becoming depressed and had a poor quality of life. R&RA supported the son to secure a review of his father's needs and he was moved to a more appropriate setting. [Example from anonymous helpline client]

- Physical or mental abuse
- Leaving people in their own bodily waste

A care home resident was found in distress by their relative, left unchanged with faeces also over the bedding and on the walls. [Example from anonymous helpline client]

- Unacceptable levels of cleanliness impacting on people's dignity

A care home resident's toothbrush was found to have faeces on by their relative. [Example from anonymous helpline client]

Right to liberty

- Restraint/restrictions placed on movement
- Residents being unable to leave a care setting

A care home resident was placed in care without their consent and has been unable to return home, despite saying for months they wish to do so. [Example from anonymous helpline client]

Right to private life (privacy, wellbeing, autonomy)

- Care users being unable to have private contact with relatives/friends, health practitioners/others – this also raises concerns about people's wellbeing and safety if they are unable to privately discuss any concerns about their care
- Access to health practitioners not being facilitated, including mental health teams, therapists, dentists, opticians etc. – families are often expected to arrange and support with these appointments

A care user was found by a relative to have missing teeth and others in a bad state of repair which staff had not noticed. [Example from anonymous helpline client]

- Risk of harm from other care users not identified and acted upon
- Lack of dignity resulting from personal items going missing, being dressed in other people's clothes etc.

A care home resident was found by a relative to be dressed in another resident's clothes and other items of clothing were missing, despite being labelled. [Example from anonymous helpline client]

- Decisions about care and treatment being made without the person's involvement or consent, or that of their chosen representatives

A care user's medication was changed without consultation with their relative and they were placed on medication they had previously had a bad reaction to. [Example from anonymous helpline client]

- Older people being unable to participate in their community due to assumptions about their capacity and living in closed settings/restrictions on movement

Right to family life

- Care users being unable to maintain (or develop) relationships with partners/relatives/friends due to restrictive visiting practices. Whilst this was happening prior to the pandemic it has now become the main issue reported to our helpline, including:
    - Care settings only allowing strictly timed visits in designated visiting rooms even if the resident is too distressed by this
    - Refusing residents an essential caregiver, or stopping the role during lockdowns
    - Only allowing end of life visits at the very end, which are stopped if the resident recuperates
    - Care settings going into lockdown after one positive case

"I am quite sure that preventing relatives from entering for so long has led to a serious drop in standards. Since April 2020 I have made numerous complaints to my wife's care provider over issues I detected in Facetime calls including poor diet, no oral care whatsoever, being left in bed until lunchtime, and so on." Robert, whose wife is affected by dementia

- Relatives/friends being unable to advocate on behalf of care users and being excluded from discussions even where they are a Relevant Person's Representative or Power of Attorney

"My knowledge of mom's wishes has been removed from consideration. The effect of current practices makes my role as her guardian of her needs, desires and wants impossible. My ability to monitor mom's rights has been eroded in favour of ease and lack of scrutiny." Son who can only visit 30mins in a visiting room which is distressing for his