



All-Party Parliamentary Group on Vulnerable Groups to Pandemics

EMBARGOED UNTIL 00:01 THURSDAY 2ND MARCH 2023

MULTIPLE GOVERNMENT FAILURES REVEALED IN NEW COVID-19 REPORT

- The cross-party APPG on Groups Vulnerable to Pandemics has outlined multiple and significant failures by Government in its handling of the pandemic.
- On the third anniversary of the first Government issued Covid-19 guidance (3rd March 2020), 1.2 million clinically vulnerable people and their families still have no protection from the virus and continue to live under severe restrictions.
- Taking testimony from 450 people representing patients, charities, and clinicians, the 'The UK Inquiry into the 500k Forgotten Immunocompromised Patients' now recommends action across five areas: equality of protection, transparency in decision making, data for effective decision-making, government communications, and overall strategy.

It was well-understood from the start of the pandemic that Clinically Extremely Vulnerable (CEV) groups were at higher risk of severe Covid-19 outcomes compared to the general population and they were quickly asked to shield. However, over the past three years, this group has faded in the minds of politicians, policy-makers and the public.

Immunocompromised people are at higher risk from the Covid-19 virus because their weakened immune systems make them less likely to respond well to vaccines. There are 500,000 immunosuppressed people in the UK, and NICE recently identified an expanded group of 1.2 million people affected by underlying conditions.

This community has been left without protection from a virus that poses excess risk to their lives and livelihoods, and with no plan from Government to address that in the short term. As one patient told the inquiry: *"Everyone talks about the pandemic in the past-tense. We are still in it. We can't mix with our families for fear of catching Covid. We can't hug our grandchildren."*

Co-Chairs:

Bob Blackman MP and Lord Mendelsohn

Vice Chairs: Baroness Brinton - Ruth Cadbury MP - Lord Lansley - Baroness Masham - Rachael Maskell MP - Jim Shannon MP - Virendra Sharma MP

Officers: Philip Dunne MP - Lord McNicol **Members:** Daisy Cooper MP



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This report seeks to highlight the failings by Government and policy-makers and offer recommendations on important lessons to be learned. The main recommendations of the report are:

1) There must be a commitment to equity of protection from Covid-19

This means providing alternative treatments if individuals do not gain sufficient benefit from vaccination. CEV people were denied access to the life-changing treatment Evusheld for more than a year when it was proving effective in more than 30 other countries. To ensure health inequalities are not compounded, there must be a prioritised rapid access pathway for new medicines to protect against covid; at a minimum NICE should provide access within 90 days of MHRA approval.

2) Transparency must be at the centre of Government decision-making

There should be a move away from closed-door committees where people affected most by decisions feel their voices are not adequately represented. There is a real sense among the CEV population that they are forgotten. Government must be willing to answer to public scrutiny and the welfare of the clinically vulnerable should now be a ministerial responsibility.

3) Data has the potential to empower effective decision-making and inform optimal Government strategies in response to pandemics

There should be an immediate commitment to publish regular metrics, with centralised data programmes designed to assess the effect of the pandemic on vulnerable and immunocompromised patients. CEV people are unable to assess their personal risk because accurate data on Covid-19 transmission is no longer available.

4) Communications with patients must be improved to reduce the significant mistrust in Government and health bodies

Decisions about vulnerable patients must be made in conjunction with patients. Patient groups should be represented in each scientific and policy meeting and be empowered to feed information back to their communities. Delayed, contradictory and confusing communications have led to suboptimal care.

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5) **The entire research strategy for immunocompromised groups now needs to be re-launched**

Ringfenced funding should be made available to ensure that an ongoing pipeline of new technologies and interventions are made available to people that need them efficiently and effectively. The UK led the world in vaccine development and the Government must now ensure that treatments are provided with similar vigour to the needs of CEV groups that still remain at excess risk from severe Covid-19.

Bob Blackman MP, Co-Chair of the APPG said: “The Government have disenfranchised a whole group of vulnerable people and put them outside of NHS provision for protection against Covid-19. Addressing this disparity and inequality of protective provision must now be a priority at ministerial level. It is not good enough to expect our constituents, and thousands of others, to continue to live under severe restrictions that the vast majority of us left behind months ago.”

Lord Mendelsohn, Co-Chair of the APPG said: “This report comprehensively details the Government’s serious and repeated failures when it comes to protecting those most vulnerable to Covid-19. Over a million people and their families cannot ‘live with’ Covid but live with the fear of its extreme consequences for them - the risk of real harm including loss of life and loss of quality of life, as well as significant economic impact. We need the Government not to leave these people behind and to finally look after the most vulnerable who still need the support and help of our public health and NHS services”

Dr Lennard Lee, Clinical Advisor to the APPG said: “Numerous lessons can be learned from issues experienced in the prioritisation and protection of CEV people. Clinicians, patients and parliamentarians are calling on the Government to put in place these easy fixes and solutions that would safeguard vulnerable groups during the pandemic.”

The decision by NICE last month (16.2.23) to deny clinically vulnerable people access to Evusheld received a mixed response from members of the APPG. Despite NICE recognising the need for a rapid pathway for new Covid-19 therapies for the clinically vulnerable, these are still more than a year away on the NHS. Members of the APPG are calling on the Government to respond to the NICE draft guidance and, significantly, signal their intent to address this community by appointing a Minister with responsibility for the clinically vulnerable.

The APPG thank CEV people and their advocates, clinicians and charities for taking the time to contribute to the report.

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Notes to editors:

1) Please see <https://getevusheld.uk/500k/> for more information.

2) For media enquiries and interviews, please contact:

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3) The full report is available here from 2nd March: <https://appg-vulnerablegroups.org/>

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