



Why choice is crucial

Baroness Claire Fox worries that making COVID-19 vaccination mandatory for those working in a Care Quality Commission-registered care home in England is illiberal

When the Government recently announced that it is to make COVID vaccination a condition of employment for anyone working in a Care Quality Commission-registered care home in England, I was shocked.

I was even more shocked that my opposition, as a civil libertarian, was ridiculed for fuelling anti-vax sentiment. Nothing could be further from the truth.

It is galling because I am very much in favour of COVID vaccines and I have no time for the anti-Big Pharma tropes or the rejection of pharmacological interventions. Yet I'm told to shush in case opposing this seismic legal shift might discourage people from taking the job. The opposite is more likely.

A recent study by the London School of Hygiene & Tropical Medicine was clear that the COVID-19 vaccine should remain voluntary for care workers, as mandatory vaccination is likely to increase distrust in and harden stances against the vaccine. Worse still, this policy even risks undermining trust in all vaccines, fuelling broader anti-vax cynicism.

It is regressive to weaponise medical interventions as the price of freedom. Ever since trade unions and radicals forced the repeal of the Contagious Diseases Acts in 1886, the voluntary principle of opting out, alongside persuasion, has proven more effective at improving uptake than coercion.

At the very least, overturning that principle in law should require far more scrutiny than a rushed-through statutory instrument.

I assumed local authorities would be up in arms at this central *diktat*, which has created an ethical minefield that affects so many of their staff. Sadly, the silence has been deafening.

Vaccine hesitancy among care workers is a moral dilemma. Ideally, those who work intimately with vulnerable people should not put them in danger, and it would be better if they were immunised.

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On balance, I believe in freedom of choice and conscience, and worry this new ruling could – as noted by civil liberties campaign Big Brother Watch – ‘reverse long-held protections on workers’ medical privacy’ as well as ‘opening a can of worms of new risks to workers’ rights’.

Councils pride themselves on their equal opportunity policies, but surely this legal change will end up as discriminatory.

For example, women make up 84% of care workers. The Equality Impact Assessment itself acknowledges that ‘a vaccine as a condition of deploying staff to work in a care home could lead to women being disproportionately at risk of facing enforcement action at work and potentially losing their jobs’.

Yet the Local Government Association’s (LGA) main equal opportunities concern seems to be that the illiberal mandatory scheme should be extended to the health workforce to make it fairer

‘It is only right that care workers are treated the same as their NHS counterparts and we are pleased that Government has listened to our feedback...as any suggestion of being singled out

could have adverse consequences for recruitment and retention of the care workforce.’ Coercion for all!

Presumably the LGA will welcome news that these regulations will be extended beyond carers to include everyone who enters care homes to work in any capacity – cleaners, kitchen staff, agency workers, tradespeople, delivery drivers, hairdressers, beauticians, charity trustees etc. Should the unjabbed electrician who regularly does maintenance be sacked too?

What about the arts and crafts teachers, the Christmas choirs and myriad volunteers who provide invaluable service to homes? Will they be banned from entry, with bouncers at the door checking their vaccine papers?

There are also the unintended

consequences. The policy – declared as necessary to protect the vulnerable – could make care homes less safe.

The Government’s own best estimate suggests around 40,000 care home staff risk being lost as a result of compulsory vaccinations, costing the sector £100m to replace.

With such severe staff shortages, will homes operate with dangerously low staffing levels? Some homes will close down, with some industry professionals suggesting a loss of 50,000 beds. Those ‘homeless’ residents will end up in hospitals, adding more pressure on the NHS.

Moreover, this policy as part of the infamous ‘protective ring’ around care homes, does ring hollow.

Councils should call out what really threatens the health and wellbeing of double-vaccinated residents: it’s being deprived of normal social contact by continued draconian restrictions on visits from loved ones, coupled with an effective care-home lockdown caused by the ‘pingdemic’.

It is such policies that cause the vulnerable more harm than the minority of unvaccinated carers. It is time councils started defending the everyday heroes who worked their guts out during the pandemic for little reward, rather than allowing them to be scapegoated while looking the other way. ■

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