

Voluntary Organisations Disability Group

Representation to the Department of Health and Social Care: Revoking vaccination as a condition of deployment across all health and social care

February 2022

About VODG

The Voluntary Organisations Disability Group (VODG) is the national infrastructure body representing organisations within the voluntary sector who work alongside disabled people. Our members' work is focused on enabling disabled people of all ages to live the lives they choose. VODG believes that an ambitious, trusted and vibrant voluntary sector that works together plays a unique role in achieving this aim. VODG members work with about a million disabled people, employ more than 85,000 staff and have a combined annual turnover in excess of £2.8 billion.

VODG welcomes the opportunity to submit this representation to the Department of Health and Social Care (DHSC) on revoking vaccination as a condition of deployment (VCOD) across all health and social care. We have responded to all DHSC consultations on this topic, and engaged in numerous roundtables and discussions with officials, and the Minister of Care. In what we hope will be a final response on this topic, we use this paper to draw out the perspective of our membership – voluntary sector providers of disability care and support.

1. Context

There are 14.1 million disabled people in the UK, representing 22% of the population and 19% of working age adults. In England, there are 11.5 million people with a disability, 21% of the population.¹

The provision of essential services to disabled people in ways that promote independence, choice and control, as well as supporting their carers is a statutory obligation. The hallmark of a fair and equitable society includes fully meeting people's needs and enabling disabled people to have full choice and control over their lives, and to be included in society.

Services to enable disabled people in England to live independently are delivered in a variety of settings and care and support is provided via a diverse range of services. As a membership body representing more than 120 voluntary sector providers of

¹ Department for Work and Pensions (2021) *Family Resources Survey*. www.gov.uk/government/statistics/family-resources-survey-financial-year-2019-to-2020/family-resources-survey-financial-year-2019-to-2020#disability-1

disability services, the majority of which are in the social care sector, VODG welcomes any move that strengthens safety in the sector so long as it is proportionate to the risks and is considerably implemented to mitigate any negative impact on social care providers and people who draw on social care.

2. Background

Since the onset of the pandemic and throughout the development and implementation of the VCOD policies for both care homes and wider social care settings, VODG members have fully recognised their duty of care to the people they support (and those people's families). Having regularly engaged with members throughout the process, there has, in general, been much support expressed for the COVID-19 vaccine and the role it plays in keeping the people they support safe, but this sat alongside significant concerns about how VCOD would exacerbate workforce recruitment and retention issues and thus have serious implications for the sustainability of services and the wider sector.

VODG submitted responses to previous consultations on [VCOD in older people's care homes](#) and [VCOD in health and wider social care settings](#). We have also shared our workforce intelligence, and polls, with DHSC officials to support effective policy implementation.

In May 2021, when these regulations were first proposed, voluntary sector providers of disability services had already implemented various measures to ensure their settings and services were COVID-19 secure. Staff were wearing full PPE and carrying out infection control procedures in line with government guidance. This was alongside regular COVID-19 testing and robust risk assessments. Furthermore, providers took an approach that strongly encouraged take up of the vaccine and which sought to tackle staff members' reservations through the presentation of facts from trusted sources, 'myth-busting', and having open conversations with staff members to break down barriers – in essence, a focus on winning over 'the hearts and minds' of vaccine-hesitant staff members. It was felt that such an approach, alongside policies such as additional, paid time off and sick leave, VCOD would not be necessary.

Instead, these policies, implemented against a backdrop of 112,00 vacancies in the sector, have caused further detrimental impact on pre-existing workforce challenges. VODG members have, for example, had to engage in difficult consultation discussions with employees and in some cases, lost staff. Many of the early concerns expressed by sector leaders about the expectations on care staff, without the recognition they deserve, driving staff away from the sector and deterring others from viewing social care as an attractive sector to work in, have come to pass and only served to deepen critical workforce pressures. Consequently, it is people who draw on social care who have been, and continue to be, put at greater risk of discontinuity of care due to a lack of support staff in general – delivered by over 1.5

million people², social care services are a lifeline for many disabled people. Considerable cost has been incurred throughout the sector in the various iterations of VCOD – staff time, distraction from other key areas of work, legal advice and associated costs. This is all irrecoverable.

In a VODG survey, conducted throughout July and August 2021, 100% of responding member chief executives reported not being confident that the government’s plan for social care reform would be able to address workforce issues. Since then, VCOD and the U-turn has further damaged the DHSC’s standing in the social care sector.

3. Support for and against the proposal to revoke VCOD

As an infrastructure body of more than 120 voluntary sector providers, there exists a range of views among VODG’s membership around support for and against this proposal. There is, however, a prevailing view across the VODG membership that these policies have had a catastrophic impact on the recruitment and retention of the social care workforce. While the revocation of these regulations offers short-term clarity, a reduction in the costs and resources associated with implementing the regulations and enables providers to continue to foster a ‘hearts and minds’ approach encouraging the uptake of vaccinations, there remains concern and mistrust in the government’s approach going forward.

In general, providers support that they should continue to encourage the workforce to be vaccinated and recognise that vaccines save lives. However, the government’s intention to strengthen the expectation that health and care staff will consider vaccination as a ‘professional responsibility’ through regulation and government guidance could be viewed as COVID-19 vaccination being mandated “through the back door’. Furthermore, some CQC inspectors, in carrying out their inspections, could check on vaccination status thereby introducing an unreasonable level of uncertainty for providers.

This is particularly concerning when members regularly report variation in the approach and behaviours of CQC inspectors across locations and the country. As such, there is a potential risk that providers will be held liable for not fulfilling their obligations if they are not supporting or requiring staff to have the COVID-19 vaccination as part of their “professional responsibility” and “duty of care” as a care worker. This aspect of the proposal urgently requires clarification and further detail.

In addition, there also needs to be a retrospective, rather than prospective, impact assessment of how these policies have impacted the provision of services to disabled people, including the financial impact on providers of implementing a policy that is

² Skills for Care (2020) *The size and structure of the adult social care workforce in England, 2020*.
www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/Size-of-the-adult-social-care-sector/Size-and-Structure-2020.pdf

then, within a matter of months, revoked. We would like to see this analysis placed in the public domain.

4. Increasing vaccine uptake

If uptake of the COVID-19 vaccination is to be seen as a 'professional responsibility' for care workers and the aim is to increase vaccine uptake without mandating, then there needs to be greater recognition of care work as a profession as well as greater esteem given to care workers through improved pay and reward. VODG and others across the sector have been drawing attention to the need for the government to acknowledge and address current workforce pressures, including the need to provide sufficient funds to enable state funded services to be commissioned at levels that enable the workforce to be properly rewarded for the work they do.

This should be implemented alongside equipping and resourcing providers to continue fostering a 'hearts and mind' approach as well as measures such as free PPE and testing to enable robust and sustainable infection control measures.

5. Impact of revoking VCOD

With the impact of the current policy affecting providers' ability to recruit and retain a high quality, reliable and sustainable workforce, the impact of not revoking the regulations will continue to be felt by disabled people who will not receive the care and support they need to live independent lives and who will not be able to exercise full choice and control as to how they are supported and by whom.

Conversely, VODG recognises that without VCOD, disabled people who are at greater risk of contracting and suffering more severe outcomes from COVID-19 will arguably be at greater risk being supported by unvaccinated care workers.

Finally, it should be noted that this consultation, the decision of which, will undoubtedly impact on people who draw on social care, has not been made available in the accessible formats that would allow for a truly representative range of views.

6. Conclusion

The U-turn in this policy is deeply damaging to the sector's trust in this department and is a reminder of the confused and chaotic approach to social care COVID-19 policy and guidance that we have been experiencing from the outset of this pandemic. We will continue to encourage DHSC to better prepare, to listen and engage with those drawing on social care, and the charities supporting them, to ensure that policy decisions are fit-for-purpose.

Ends

For more information or to arrange a further a discussion with VODG or our members, please contact research.policy@vodg.org.uk