



GMB union – response to Department for Health & Social Care Consultation on mandatory vaccinations in older adult social care homes.

Online form submissions.

Proposed legislative change

We are proposing to amend regulations to require older adult care home providers to deploy only those workers who have received their COVID-19 vaccination in line with government guidance. This will not include those who can provide evidence of a medical exemption from COVID-19 vaccination.

We also intend to amend the Code of Practice on the prevention and control of infections to explain the requirement. We are consulting on this policy and whether it should be extended to include other professionals who visit the care home, for example NHS workers providing close personal care to people living in the care home.

As an adult social care representative organisation or group, how do you feel about the proposed requirement for workers in older adult care homes to have a COVID-19 vaccination?

- Supportive
- Rather supportive
- Neither supportive nor unsupportive
- Slightly unsupportive
- Not supportive
- I don't know
- Not applicable

Please provide details to support your answer.

ANSWER: 500 word limit



GMB union are opposed to legally enforced medical procedures as part of employment. We believe mandating workers to have the Covid-19 vaccine is signalling more of a heavy-handed and rudimentary approach from government when other more holistic approaches have not been fully implemented or explored including addressing many of the underlying reasons and structural issues within the social care workforce. GMB has proactively promoted the vaccine including running online public health sessions so members can get more information on the vaccine.

GMB believes the government should be looking instead at what has been successful so far, and where more can be done. GMB surveyed our members in social care – 60.62% of respondents were from private adult care homes across the UK but mainly England – who are broadly split down the middle in regards to mandatory vaccinations. 46.53% of respondents across social care were opposed to mandatory vaccinations for staff with 53.7% in favour so fairly evenly split. discounting the wider social care workforce and including only those in residential settings that rises a little to 47.1% in favour to 52.9% opposed.

Across the UK the vaccination rates of adult social care staff vary. England compared to the other nations is performing the worst. As of the 13th May NHS England weekly data on vaccinations shows that 82.1% of the workforce in older adult care homes have had the first vaccine. 63 of 150 local authorities in England are still to meet the SAGE recommendation of 80% of staff. A considerable number of these are in London boroughs or around the South East or cities. Outside of England there has been considerably more success. In Wales as of the 16th May 91.2% of adult social care workers in residential settings have taken the 1st vaccine with 80.1% taking the 2nd. In Scotland and Northern Ireland again these vaccine rates are higher with both achieving 100% of staff getting the first vaccine and in Northern Ireland the second too.

We have had to finish our response to this section in the final 'before you finish your response' section of the consultation because of the restrictive word limits set. ***See below answer.***

Older adult care homes

The purpose of this policy is to protect people vulnerable to COVID-19, therefore we propose that the regulations would apply to any care home which has at least one person over the age of 65 living in their home.

Do you agree with using this definition to determine which care homes this regulation would apply to?

- Yes
- No
- I don't know
- Not applicable



The SAGE Social Care Working Group has advised that it is reasonable to proceed with care homes for older adults as a setting where requirement for vaccination may be appropriate. Care homes for older people have a population with a median age of over 80, with multiple co-morbidities. Some people living in care homes may have dementia and neurological and behavioural issues which impair their ability to follow infection control practices. In these closed settings, workers may provide care for, or have significant contact with, multiple residents as well as other workers. This level of interaction can lead to effective transmission of COVID-19 (and other infectious diseases) with severe outcomes for some people. Current estimates of case fatality ratio are about 20% – almost double that of individuals of similar age outside of care home settings. Vaccination is expected to significantly mitigate against severe outcomes.

Do you have any concerns about the proposal to limit this policy to older adult care homes?

- Yes
- No
- I don't know

Please explain your answer.

ANSWER: 500 word limit

GMB union has concerns over the growing precedent of workers having to declare their medical history, or the state legally requiring individuals to have what is a medical procedure before they can work in a profession. We believe this could be the thin end of the wedge with the government coming under pressure from a whole range of other sectors demanding the same. There are fundamental human rights issues and the right to privacy.

Further to that, there is a risk that vaccination status becomes a substitute for managing Covid risk. We worry bad employers will use this to save costs, cut corners and not ensure all health and safety measures are in place and maintained especially testing, ventilation, social distancing and PPE. We know that Covid transmission remains a live hazard at all times especially as new Covid variants are discovered. There has been a very limited public health campaign from government around ensuring the public and employers know that they need to ensure these health and safety measures are kept in place as the vaccine rollout continues and restrictions lift, public health communications are focusing too solely on getting the vaccine, GMB believes this should be part of a wider public health strategy that includes the need to ensure other measures such as good ventilation, mask usage, testing and social distancing are kept in place.



Persons requiring vaccination

The proposed regulations would apply to any care home which has at least one person over the age of 65 living in their home in England and which is registered with the Care Quality Commission. This is estimated to be approximately 10,000 care homes.

This would include all workers employed directly by the care home or care home provider (on a full-time or part-time basis), those employed by an agency and deployed by the care home, and volunteers deployed in the care home. It would include those providing direct care and those deployed in care homes doing other roles, for example cleaners and kitchen staff. This is consistent with our approach to COVID-19 testing in care homes.

There is further consideration needed about whether we extend the requirement to include those people who come to the care home to provide professional services, or other care and support, as well as visiting professionals. We are also carefully considering the situation of 'essential care givers' – those friends or family who have agreed with the care home that they will visit regularly and provide personal care. We understand that there are key considerations here for the range of people who may come into care homes and welcome your views in the consultation questions below.

We do not intend to extend this policy to friends and family members who visit people living in care homes – other than essential care givers, where we are considering carefully what approach is best. The SAGE Social Care Working Group has advised there is a balance to be struck between the risk of a loved one visiting and transmitting virus, against the wellbeing benefits to those who live in a care home. We would of course encourage friends and family members who are visiting the care home to access vaccination as soon as they are able however, as long as visitors carefully follow the advice in our guidance, we do not think it necessary to extend the requirement to family visitors.

Which people working or visiting in an older adult care home should be covered by the scope of the policy?

Only paid staff deployed in the care home

- Yes
- No
- No opinion



Staff working for the care home provider who work in a separate building but may visit the care home occasionally (for example staff working in an off-site office)

- Yes
- No
- No opinion

Health professionals who visit the care home regularly and provide close personal care to people living in the care home

- Yes
- No
- No opinion

Other professionals who provide close personal care to people living in the care home, for example, hairdressers

- Yes
- No
- No opinion

All professionals who enter a care home regardless of their role, for example, electrician, plumber, art therapist, music therapist

- Yes
- No
- No opinion

Friends or family members designated as 'essential carers' who visit regularly and provide close personal care

- Yes
- No
- No opinion

All friends and family who may visit

- Yes
- No
- No opinion

Volunteers

- Yes
- No
- No opinion

Other please specify:



ANSWER: 500 words

GMB believes the focus should be on ensuring Covid risk factors are managed through ensuring testing, social distancing and ventilation measures continue to be in place as well as a more comprehensive approach to persuading the public including care workers to take the vaccine. The Equality and Human Rights Commission (EHRC) in their response to the Covid-19 status certification review said employers must make sure that making vaccinations mandatory is 'objectively justified' and 'applied in a proportionate manner'. We do not believe these conditions have been met. We oppose attempts to make the vaccine mandatory for workers while the government has failed to take all steps to encourage vaccine take up. Ministers have previously acknowledged that any steps would be discriminatory.

Exemptions

There will be a small number of people where the clinical advice is that the COVID-19 vaccination is not suitable for them. We will ensure that the regulations allow for exemptions on medical grounds. The regulations will be drafted in line with the Green Book on Immunisation against infectious disease ([COVID-19: the green book, chapter 14a](#)) and The Joint Committee of Vaccination and Immunisation (JCVI) which reflect clinical advice. Individuals will be exempt from the requirement if they have an allergy or condition that the Green Book lists ([Chapter 14a, page 16](#)) as a reason not to administer a vaccine, for example prior allergic reaction to a component of the vaccine, including polyethylene glycol (PEG). Some individuals have an allergy or condition where the Green Book or the JCVI advises seeking medical advice, before proceeding with vaccination, where a professional medical opinion should be sought on whether the individual should be exempt. Both nationally and internationally, no concerning safety signals have been identified so far in relation to the vaccination of women who are pregnant. JCVI is continuing to review data on the risks and benefit of vaccination for women without significant underlying health conditions who are pregnant. As evidence becomes available, it will be reviewed, and advice offered as appropriate.

Do you agree or disagree with the groups of people who would be exempt from this requirement?

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- I don't know



- Not applicable

Care home managers are ultimately responsible for the safety of people living in their care. Under the proposed change to regulations, it would therefore be their responsibility to check evidence that workers deployed in the home are vaccinated, or medically exempt from vaccination. This means that workers would need to provide evidence to the manager that they have been vaccinated.

The government is carefully considering the best way for people to prove that they have been vaccinated to their employer. This may involve, for example, showing vaccination status on a mobile phone app.

The government is considering what would be an appropriate grace period for new and existing care home workers before they are required to be vaccinated.

It is our expectation that care home managers would keep a record of vaccinations as part of their staff employment and occupational health records.

How easy will this policy be for managers in older adult care homes to implement?

- Very easy
- Quite easy
- Neither easy nor difficult
- Quite difficult
- Very difficult
- I don't know
- Not applicable

Please provide details to support your answer



ANSWER: 500 words

GMB believes the policy of mandating care workers and other groups visiting care homes would be difficult and potentially unworkable to enforce. Especially around how it could be enforced with other groups listed above, especially family and friends visiting, as well as the emotional pressures this would further put on care homes in potentially turning away relatives. Further still it is difficult to explain to care workers why they must be vaccinated while those who may visit may not have had the vaccine. GMB surveyed our members to investigate the mental health impacts of work during Covid-19 the results showed that between September and October 2020 care workers reported anxiety levels that were 35% higher than all employers, by December to January 2021 the gap had grown to 44%.

GMB hosted a focus group with care workers on mandatory vaccinations and everyone on that call agreed that they felt they were being singled out unfairly. One care worker on that call who had still not had the vaccine said "I'm scared I will lose my job. I can't have it I don't feel safe. If I'm being tested twice a week and wearing PPE why should I lose my job. We were there throughout Covid, we risked our lives and now they want to kick us out."

Many of the workforce do not believe their employers are trusted sources in addressing concerns around vaccine hesitancy now and this is being made worse and even enforcing concerns where employers are using the threat of mandatory vaccinations and this survey to tell the workforce they will lose their job if they do not have the vaccine.

Impact and implications of the policy

Our initial Public Sector Equality Duty (PSED) analysis indicates that making vaccination a condition of deployment in older adult care homes could have a more significant impact on certain groups. In particular, the adult social care workforce has a high proportion of women and people from black, Asian and minority ethnic communities. There is some evidence to suggest these groups may be more hesitant about vaccination more generally and the COVID-19 vaccine specifically given it is a new vaccine. There continues to be a significant programme of work to address these concerns as part of the ongoing work to support uptake specifically within the adult social care workforce and the wider population. We are very interested to understand what more we can do to ensure these groups, and any other, would not be differentially impacted by this new policy and how we can manage this to achieve our ambition to protect all those deployed and being supported in care home settings. Are there particular groups of people, such as those with protected characteristics, who would particularly benefit from this policy?

Yes



- No
- I don't know
- Not applicable

Are there particular groups of people, such as those with protected characteristics, who would be particularly negatively affected by this policy?

- Yes
- No
- I don't know
- Not applicable

Which particular groups might be negatively impacted and why?



ANSWER: 500 words

As acknowledged forcing care workers to have the vaccine would disproportionately impact women and Black, Asian and minority ethnic people. Further to the above social care also has higher levels of younger, older, low paid and precarious workers over the wider overall population. Significantly in London where vaccine take up is lowest in the profession there is a significant amount of the workforce from Black, Asian and minority ethnic backgrounds compared to other regions of England or the UK. According to the latest figures from Skills for Care, 66% of the adult social care workforce is from Black, Asian and minority ethnic backgrounds compared to 40% of the overall population. With 47% of the workforce from Black/African/Caribbean and Black British backgrounds with the wider population only 13%. Similarly, 81% of the adult social care workforce are women where within the wider population economically active that number is at 46%. On age 27% of London's adult social care workforce is workers aged 55 and over, compared to 16% of workers in the wider population. Workers aged 55 and over may retire in the next 10 years accounting for over a quarter of the workforce or 53,000, with the average age of a worker in the sector 46.

Forcing BAME or women workers who might have concerns, leaves potential for direct or indirect discrimination. While pregnant women can now receive the vaccine, this change is recent and many pregnant women are having difficulty accessing the vaccine needed. Similarly, we have had concerns raised with us from people of different religious backgrounds. During the focus group we held, a care worker from a Sikh background raised the issue of NHS information on the vaccine referring to the vaccine being Halal and this being an issue for Sikhs that do not consume Halal.

There would potentially also be a negative impact on those who receive adult social care – predominately older, disabled and vulnerable adults. The care sector went into the Covid-19 pandemic with staff vacancy rate that was estimated at around 7.3% in 2019/20 which is equal to approximately 112,000 vacancies at any one time. In London those figures were higher with a vacancy rate of 9.5% throughout 2019/20. Legally mandating care workers to have the vaccine will mean workers leaving the profession. If GMB survey results are borne out across England where 34.24% of care workers that responded said they would consider leaving the profession if the government mandated vaccinations with a 15.83% maybe considering it. You could see a serious crisis within the sector with workers leaving the profession and care home residents massively impacted and not able to put in place safe staffing levels. Similarly, the impact this would have on moving residents around different care settings.

What could we do to make sure they are not negatively impacted?



ANSWER: 500 words

GMB union would argue - as it has done in responses to the rest of this consultation response - that the government needs to take a different approach and not impose mandatory vaccines and instead look at addressing the issues above around access to the vaccine - giving care workers a choice over what vaccine they have - and ensuring public health support services are in place to have a genuine dialogue around concerns, the effectiveness of public health communications and addressing the structural issues with working in the sector, most urgently raising sick pay.

It is recognised that some people may choose not to be vaccinated, even if the vaccination is clinically appropriate for them. In these circumstances they will no longer be able to be deployed in a care home setting and providers will need to manage this in a way which does not destabilise the provision of safe, high quality care. We are asking a question in this consultation about the possible impact on staffing levels, if workers chose to leave the care home workforce rather than be vaccinated. This may be a particular issue in some local areas where uptake is lower.

Do you have any concerns about the impact of the policy on the ability of older adult care homes to maintain a safe service?

- Yes
- No
- I don't know
- Not applicable

Which of the following are concerns that you have about the impact of the policy on the ability of older adult care homes to maintain a safe service? (tick all that apply)

- Some staff may refuse the vaccine and leave their current job
- Some staff may leave in protest at the policy, if this conflicts with their personal beliefs
- Remaining staff may resent the requirement, reducing morale
- Staff may seek to challenge care homes in court
- The impact it could have on other measures affecting staff, such as reducing movement between health and care settings
- The supply of alternative trained staffing available
- The cost of short-term staff cover
- The cost of recruiting new permanent staff
- The time it will take to recruit new permanent staff



Other concerns (please specify)

Please share any evidence and your sense of the scale of these impacts here:

- Minimal impact
- Moderate impact
- Severe impact

Please provide details to support your answer.

ANSWER: 500 word limit

The care sector went into the Covid-19 pandemic with staff vacancy rate that was estimated at around 7.3% in 2019/20 which is equal to approximately 112,000 vacancies at any one time. In London those figures were higher with a vacancy rate of 9.5% throughout 2019/20. Legally mandating care workers to have the vaccine will mean potentially more workers leaving the profession. If GMB survey results are borne out across England where 34.24% of care workers that responded said they would consider leaving the profession if the government mandated vaccinations with a 15.83% maybe considering it. You could see a serious crisis within the sector with workers leaving the profession and care home residents massively impacted and not able to put in place safe staffing levels.

How do you think we can minimise the impact of this new policy on the workforce? (tick all that apply)

- Ease of access to vaccination
- Specific funding to cover any costs associated with vaccination for example travel, time, cost of side effects
- Access to up to date information
- Support from local authority vaccination champions
- Support from clinical leads linked to care home
- Other (please specify)

Do you think this new policy could cause any conflict with other statutory requirements that care homes must meet?

- Yes
- No
- I don't know
- Not applicable



What?

Safe staffing levels.

We have a few questions we would like to ask to help us improve future consultations.

How satisfied are you with the consultation process?

- Very satisfied
- Satisfied
- Somewhat satisfied
- Disappointed

What could we do better?

ANSWER: No word limit

We are disappointed with the consultation which we do not consider to be meaningful. The consultation is designed with restrictive tick boxes and word limits to get a positive outcome for what the government has already decided it is going to do. Further still the consultation period itself is too short at only five weeks. At the time of writing this – the 18th May – the consultation is still not available on the Department for Health website in printable format, neither is it available translated or in easy read format.

As a result of the restrictive word limits please see a continued response to the 'proposed legislative changes' section below:

From the results of our members survey visits from NHS mobile vaccination team visits to care settings have not been every four weeks as the guidance has stated. 34% of respondents said they were never offered a vaccination at their workplace. 12.4% have said an NHS vaccination team has never been to their workplace and 36.1% have only known of an NHS vaccination team visiting their workplace once. Only 4.2% of respondents said that mobile NHS vaccination teams were visiting their workplaces every 4 weeks as outlined under the guidance, and only 22.2% of those that had received the vaccine had been given it at work by a mobile vaccination team. 41.2% said that NHS vaccination teams were not visiting regular and had only been once or twice since the vaccine rollout began. Similarly, the national online booking service for adult social care staff has not been operational throughout the rollout. Instead of mandating the vaccine the government should consider addressing the lack of regular access online or to mobile NHS vaccination teams in social care, as well as giving care workers the choice of which vaccine they wanted to take.



The lack of any serious public health communications strategy to address vaccine hesitancy within the social care workforce has also been exposed by our survey. Most social care workers outside of what they have received from employers asking them to take the vaccine have not received any dedicated public health communications or access to public health support services to speak with professionals or trusted individuals. Communications have been limited without detail or without any meaningful interchange to address hesitancy. We ran a focus group with social care workers and no one on that call could tell us if they had seen any of the communications the Department for Health have listed in the detail of this consultation. From the results of the survey, over 52% had been encouraged to take the vaccine by their employer, only 21% have had contact from their GP or an NHS professional, only 30% had seen general TV adverts and between 23-27% had seen social media adverts from the NHS or government on the vaccine. 72.79% of respondents had no access to any support services to talk through concerns they had around the vaccine. We would recommend that government putting in place greater access to support services and access to public health experts or trusted individuals that could address concerns with most care workers getting only information from their employer there can be issues as managers are unlikely to be seen as trusted or acting without self-interest. Further still, the other three nations of the UK all operate a national mandatory register for social care workers and going to the pandemic had a better idea of who those workers were there is no such mandatory register in England.

Poor pay and terms and conditions. Sick pay continues to be grossly inadequate and fear of side-effects from taking the vaccine continues to be an issue. Generally low paid workers fear they cannot afford the loss of wages if they develop side effects from the vaccine and need time off work. Most workers are paid statutory sick pay which would mean financial detriment for an already poorly paid workforce. 29.1% of respondents that had not taken the vaccine have said that this was a barrier to getting the vaccine. Only 18.72% of all respondents knew they would get full sick pay if they had any side effects and needed to take time off work. Sorting full occupational sick pay for the workforce should be a priority. Similarly tackling wider issues around low pay and precarious contracts need to be taken up by government too. According to Skills to Care over 41% of care workers in London are on zero hours contracts, over 20% across England, almost one in five in residential care. The unpredictability, lack of rights and security and the fact these contracts are likely to be anti-social creates many barriers to accessing the vaccine or public health support services. The UK government needs to follow what the Welsh government has done since 2017 and work to curb the use of zero-hour contracts in care. Low pay is endemic within the sector Ministers keep comparing social care workers to NHS doctors having to get vaccinated for Hepatitis B etc under the NHS green book. GMB would argue this is a false comparison where NHS doctors have comparatively good pay and terms and conditions and entry to the profession is part of a clear career path. Social care workers are not treated like that, are not remunerated or rewarded properly for the skilled job they do. Is it no surprise that when asked if they would consider leaving the profession as a result of the government mandated vaccinations to work in care 34.24% of the respondents said yes and a further 15.83% said 'maybe'. Addressing these structural issues must be seen as a priority for government and employers.



How did you hear about the consultation?

- Social media
- Received an email
- Word of mouth (family, friend or colleague)
- Direct communication from third sector organisation or regulatory organisation
- Broadcast news (TV or radio)
- GOV.UK or other government website
- Newspaper (online or print)
- Website (non-government)
- Trade magazine
- Other