

# Evidence for All Party Parliamentary Group on Coronavirus

## Cllr Alex Crawford, Rushmoor Borough Council

### Summary

- ▶ Although it was apparent early that there would be likely to be hotspots of COVID-19 infection among elderly, vulnerable communities, the Government failed to have effective policies to identify local hotspots and failed to require local authorities to act when hotspots were drawn to their attention.
- ▶ The Government and Local Resilience Forums (LRFs) failed to make adequate provision to protect the residents and the staff of care homes, and that was compounded by the failure of the Care Quality Commission (CQC) monitoring arrangements so as to identify problems in management, staffing, and health and safety in care homes with respect to COVID-19.
- ▶ The changes in the data provided about COVID-19 infections nationally and locally were badly communicated, and, for too long, the Government failed to provide sufficiently detailed information to enable local councils to identify clusters and to tackle hotspots.
- ▶ Lack of Government coordination to avoid the discrepancies and the changes in the data provided about COVID-19-related deaths nationally and locally undermined public confidence.
- ▶ The Government made a very bad error of judgement in their rush to re-open schools on 1 June before parents and teachers had confidence that it was safe to do so – a confidence that is still likely to be absent as long as the test, track and trace arrangements are seen to be inadequate.
- ▶ The priority for most people is for the Government to tackle the COVID-19 threat so that their family and social lives can return to normal, while the Government are giving more emphasis to getting people back to work and to getting their children back to school, without adequate test, track and trace arrangements in place.
- ▶ Lack of public confidence derives from the Government's failure to take the COVID-19 pandemic seriously in January and February and from the breaches of the Government's COVID-19 guidance by the Prime Minister's senior adviser, Dominic Cummings, in March and April.

## 1. Introduction

As a Local Councillor representing Wellington Ward, Aldershot, I was always concerned that, because the ward includes very many elderly Gurkha veterans and their wives and an assisted living complex for some 100 residents, COVID-19 might present particular risks for those vulnerable people and our borough. This evidence describes my experience in trying to meet their needs for action, advice, and information.

## 2. Need to identify hotspots

On 23 March 2020, the day that Prime Minister Boris Johnson announced lock-down measures to counter COVID-19, I wrote to the Chief Executive of Rushmoor Borough Council (RBC):

*“I have recently become concerned about the apparent steep rise in Confirmed cases of Coronavirus in Hampshire.*

*“This evening, the Public Health England (PHE) figure for Hampshire is 171 (population of 1,376,000), that is 0.124 per 1000, while the figure for Reading is 8 (population 342,000), that is 0.023 per 1000. This would seem to mean that the level of confirmed cases in Hampshire is over 5 times as great per head of population as that of Reading. Given that Hampshire is largely a rural county and Reading is a congested urban area, it seems difficult to understand this level of difference.*

*“I would ask that PHE provides more detailed breakdown and information about hotspots, so that the local authorities can understand where best to target their efforts.*

*“I was very sad to hear from Cllr Keith Dibble this evening that Cllr Frank Rust is in intensive care in Frimley Park Hospital. If his case is Covid-19, it shows how close it can be to any one of us.” (Cllr Rust tested positive for COVID-19 and died in Frimley Park Hospital a week later).*

With respect to the recommendation that PHE should provide local authorities with information about COVID-19 hotspots, the RBC Chief Executive responded:

*“We have no data on that Alex and within Hampshire PHE are looking at it.”*

## 3. Concerns about care homes

In early April, my fellow Councillor, Sophie Porter (who is a nurse and who was subsequently off work for three weeks with COVID-19), and I became very concerned about intelligence we were getting from local residents about poor conditions with respect to COVID-19 in care homes in the borough (Rushmoor).

\* This evidence is submitted in commemoration of Cllr Frank Rust:  
<https://www.rushmoor.gov.uk/article/11955/Councillor-Frank-Rust>

We therefore decided to conduct a survey of Care Homes:

<https://www.surveymonkey.co.uk/r/SGRTMKX>

There were 13 responses to the survey:

- ▶ 7 reported cases of Covid-19 infection, and 6 none.
- ▶ 5 reported that staff did not have enough PPE, 2 that they had, and 5 did not know.
- ▶ 3 reported that residents had been discharged back from hospital, 5 that they had not, and 2 did not know.
- ▶ 7 reported that residents with symptoms had not been tested, 2 that they had, and 2 did not know.
- ▶ 10 reported staff shortages, and 3 said not.
- ▶ 4 reported that staff were not getting help from doctors and nurses, 2 said they were, and 5 did not know.
- ▶ 2 reported that staff were getting counselling, 2 that they were not, and 6 did not know.
- ▶ 10 reported staff shortages, and 3 said not.

There were comments by respondents to the survey:

- ▶ “The company does not want us to wear mask especially, until someone shows symptoms. This means that we all would've caught it by then.” (Staff)
- ▶ “Homes and facilities do not have the right PPE, and those that do do not have enough.” (Staff)
- ▶ “I think care homes and sheltered homes are not being protected enough. The work can't be done to comply with social distancing so all residents and staff are at greater risk. PPE should be available to all and not rationed etc. These settings house some of the most vulnerable people who are likely to end up needing ICU treatment if they caught Covid-19. Not enough is being done to support these settings. (Relative)
- ▶ “PPE has been an issue and we have had to track down as much as we can. Staff morale is obviously affected by the virus.” (Staff)
- ▶ “Testing for staff and residents is essential and urgent.” (Relative)
- ▶ “I feel there needs to be a testing centre close to the area; my member of staff had to drive to Gatwick to get tested, which is a 2-hour round trip. It would be useful to have testing kits available so that we can get staff who are self-isolating back to work quicker. The staff who are not isolating are under additional emotional and physical strain and will burn out quickly if we cannot get staff tested and back to work. (Staff)
- ▶ “We're all doomed to die.” (Staff)
- ▶ “We have face masks, no goggles or gowns. Hand-made shields that have been donated.” (Staff)

I sent the survey link and the list to the Director of RBC responsible for liaising with the Hampshire LRF and the Hampshire County Councillor for Aldershot South.

The Hampshire LRF response was not satisfactory, so I sent the survey link and the report to the CQC asking them to investigate the poor situation in care homes in Rushmoor. They sent an acknowledgement of receipt. But, it took several chasing emails to the CQC before I had the following response:

*“I apologise on behalf of my colleagues who have misunderstood your emails.*

*“From the email trail below, I understand that you’ve set up a survey on SurveyMonkey. This is for individuals to complete regarding their experience of care services during the outbreak of Covid19. My colleagues misunderstood and thought you were referring to a daily survey that we send to care providers to monitor the Covid19 situation.*

*“Again, I am sorry about any misunderstanding and thank you for providing us with the attached information. Please be assured this will be passed on to the appropriate teams.*

*“Thank you for contacting the Care Quality Commission (CQC) your reference number : ENQ1-8845462604.”*

These contacts with the bodies responsible for safeguarding of residents and staff of care homes in Rushmoor (and other districts of Hampshire) – that is, Hampshire LRF and CQC – appeared to show that, even in April and at the start of May, they were not geared up sufficiently to investigate local hotspots and respond accordingly.

On 16 July 2020, Hampshire County Council Executive Member for Adult Social Care and Health answered a Question about care homes from the County Councillor for Aldershot North (**Appendix 1**) and sought to be reassuring about the future.

However, the data on COVID-19 deaths of Rushmoor residents since the first cases of COVID-19 infection in March (**Appendix 2**) show that, of a total of 84 COVID-19-related deaths of Rushmoor residents, 39 have been in care homes – that is, just under half of all COVID-19 deaths of Rushmoor residents have been in care homes, which is the true measure of the degree of failure of Government, CQC and Hampshire LRF to protect the most vulnerable in Rushmoor – but see Section 5 below.

#### **4. Data about COVID-19 infections**

On 10 May 2020, the day that Prime Minister Boris Johnson announced about replacing the COVID-19 advice “STAY HOME” with “STAY ALERT”, I wrote to the Chief Executive of RBC:

*“Rushmoor has the highest Rate of Confirmed Cases of COVID-19 Infection of all local councils in Hampshire, according to the latest COVID-19 data from Public Health England (PHE) (table attached (**Appendix 3**) shows COVID-19 Confirmed cases per 100,000).*

\* This evidence is submitted in commemoration of Cllr Frank Rust:  
<https://www.rushmoor.gov.uk/article/11955/Councillor-Frank-Rust>

*“Also, Rushmoor has the highest Rate of Confirmed Cases of COVID-19 Infection when compared with all local councils in neighbouring Surrey (see table (**Appendix 4**)).*

*“PHE says: ‘Confirmed positive cases are matched to ONS (Office of National Statistics) geographical area codes using the home postcode of the person tested. The rates are easier to compare than raw counts, but they do not take into account other factors that may affect the numbers of cases, such as the age of the population or the amount of testing carried out.’ ”*

*“The question for local residents will be **“Should Rushmoor remain on Red Alert on COVID-19?”**”*

The Chief Executive responded:

*“I doubt that is a local decision Alex and it isn’t clear if local or regional variations will be entertained.”*

At the end of May, I was able to find daily COVID-19 infection data (so-called Tier 1, as measured in tests in hospital and PHE laboratories) going back to the first recorded case in Rushmoor, which at that time was recorded as being on 25 March. I could produce a chart (**Appendix 5**) showing that the peaks of COVID-19 infection had been in mid-April and that, by the end of May, the daily count was low.

Subsequently, the Government re-based daily COVID-19 infection data to include Tier 2 data, as measured in community tests, and the first recorded case in Rushmoor was then recorded as being on 5 March.

I could produce a chart of weekly COVID-19 infection data (**Appendix 6**), which showed the peak in mid-April and decline in the weekly rate until the week ending 24 June.

However, in the past four weeks, to 12 August, the number of cases of COVID-19 infection of Rushmoor residents has doubled (to 10) compared with the four weeks to 15 July.

Only at the beginning of August was I able to find more detailed PHE data for COVID-19 infections by so-called Middle Layer Super Output Area (**MSOA**). These data showed that, since the beginning of March 2020, the Aldershot Town Area (which includes Wellington Ward, which I represent as a Councillor) has had the greatest number of COVID-19 infected residents in Rushmoor (**Appendix 7**) since the beginning of March.

These PHE data confirmed my concern about the risks of COVID-19 infection to which the vulnerable, elderly residents of Wellington Ward were exposed, and justified my recommendation that such detailed data should have been available to local councils from the outset so that they could tackle hotspots.

## 5. Data about COVID-19 deaths

According to the data issued by the ONS on 11 August, there had been 84 COVID-19-related deaths of Rushmoor residents since the first such death in the week ending 27 March, see Table (**Appendix 2**). Source:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard>

However, according to the data issued by PHE on 12 August, there had been 61 deaths of Rushmoor residents who had had a positive test result for COVID-19, but PHE said that the actual cause of death may not have been COVID-19 in all cases. People who died from COVID-19 but had not tested positive were not included in these PHE data. Source: <https://coronavirus.data.gov.uk/deaths>

The lack of clarity about COVID-19 deaths was compounded on 12 August when the Government announced that “The data for deaths in England have been updated to include deaths within 28 days of the first laboratory-confirmed test. The [60-day measure](#) will be added to the dashboard in due course.”

Nationally, this change meant 5,377 COVID-19 deaths would no longer be included in the official total from PHE, resulting in a decrease in the UK total from 46,706 to 41,329 – a reduction of 11.5%.

The question is what do this change and the differences in data issued by the Government, ONS and PHE mean for local people in Rushmoor? We do not yet have any explanation.

## 6. Do you think it safe to re-open schools?

In May, the Government wanted schools to reopen from 1 June, but the National Education Union, the British Medical Association and the Parentkind parents' organisation opposed any re-opening of schools before it was safe to do so.

To assist resolve this question, I conducted a survey between 17 and 20 May:

<https://www.surveymonkey.co.uk/r/6WC58Z6>

The results from 1,573 respondents, who submitted over 900 comments, showed that parents were unconvinced that school was safe to re-open on 1 June. Almost 80% of parents with primary-school children in Rushmoor did not believe that it was safe for schools to re-open from 1 June.

I carried out a follow-up survey – **Will your child return to school in Aldershot or Farnborough on 1 June?** – on 30 and 31 May:

<https://www.surveymonkey.co.uk/r/983NC7H>

\* This evidence is submitted in commemoration of Cllr Frank Rust:

<https://www.rushmoor.gov.uk/article/11955/Councillor-Frank-Rust>

The responses to the follow-up survey showed that over half of pupils in Rushmoor would be staying at home even though they could return when their primary schools re-opened on 1 June. This local result was in line with the results of a survey conducted by the National Foundation for Educational Research:

[https://www.theguardian.com/education/2020/jun/01/schools-expect-half-of-pupils-will-stay-home-as-year-groups-return?utm\\_term=RWRpdG9yaWFsX0d1YXJkaWFuVG9kYXIVS19XZWVrZGF5cy0yMDA2MDE%3D&utm\\_source=esp&utm\\_medium=Email&CMP=GTUK\\_email&utm\\_campaign=GuardianTodayUK](https://www.theguardian.com/education/2020/jun/01/schools-expect-half-of-pupils-will-stay-home-as-year-groups-return?utm_term=RWRpdG9yaWFsX0d1YXJkaWFuVG9kYXIVS19XZWVrZGF5cy0yMDA2MDE%3D&utm_source=esp&utm_medium=Email&CMP=GTUK_email&utm_campaign=GuardianTodayUK)

Subsequently, the Government changed its requirements for schools to re-open before the summer break – and they are now focussing on getting all children back to school after the summer break.

However, there are still questions being raised about whether it will be safe to do so without a well-performing test, track, and trace system in place and with arrangements to test pupils and staff for COVID-19.

## 7. Rushmoor residents' experience of COVID-19

By June, there had been changes in Government guidance since the COVID-19 lock-down in March, so I conducted a survey to find out residents' experiences during the previous few months and their views on the way forward:

<https://www.surveymonkey.co.uk/r/TMVHR67>

**Appendix 8** sets out the detailed results from 336 respondents.

Most Rushmoor residents thought it safe to meet family and friends, or to return to work, but most did not think it safe to re-open schools, all shops, and pubs and restaurants, or to travel on buses and trains (Question 8).

One-in-eight respondents had been tested for COVID-19 (Question 3).

Over half felt safe from catching COVID-19 infection, but over one-in-three had not felt safe from doing so (Question 5).

Just over half of respondents were working, one-in-six were on furlough, another one-in-six retired and one-in-14 were unemployed (Question 6). Also, about one-in-eight made comments about their own employment status – for example, 7 disabled, 5 self-employed, 5 in changing situations, 4 on maternity leave, and 3 shielding.

One-in-three reported losing income as a result of COVID-19 (Question 7).

Over half said that they would wear a face mask while shopping and travelling (Question 9). Although it was compulsory to wear a face mask on public transport, some respondents commented that they travel in their own cars and would not wear

\* This evidence is submitted in commemoration of Cllr Frank Rust:  
<https://www.rushmoor.gov.uk/article/11955/Councillor-Frank-Rust>

face masks for shopping. Others said that they would wear them on public transport, but not for shopping.

Nearly half were satisfied with Government advice about COVID-19 (Question 4), but about one-in-three were not satisfied with it.

By a considerable margin, people found it most difficult to deal with being unable to see their families as they would normally (Question 10). Also most difficult for people was their isolation and lack of social life. And, a fair number of people were upset by other people breaking the rules, such as their failure to respect social distancing when shopping in supermarkets.

When saying what they were most looking forward to (Question 11), meeting up with family was top of the list for very many people.

People had many views as to how the Government could improve their exit policies to control COVID-19 and to re-launch the economy (Question 12). The largest number favoured the Government taking a slow and steady approach, almost matched by the number wanting the Government to communicate more clearly its guidance and the rules. About half that number wanted to see the Government have an effective test, track, and trace system in operation. Also, there was significant demand for rule breakers to be punished, with several citing the breaches of the rules by the Prime Minister's senior adviser, Dominic Cummings.

People gave an even greater range of views when asked if they had any other comment about COVID-19 (Question 13). However, by far the largest number were critical of the failure of the Government to get to grips with the COVID-19 pandemic early enough.

## 8. Conclusion

This evidence shows that the Government and their agencies (PHE, ONS and CQC) failed from the outset to provide timely information to local councils that would enable them to identify and to tackle hotspots of COVID-19 infection in care homes and the community. Their over-centralised approach did not respond quickly enough, if at all, to feedback about the adverse consequences of their failure.

## Appendixes

1. Care homes question, Hampshire County Council, 16 July 2020.
2. COVID-19 Deaths, Rushmoor - Weeks 13 to 31 (31 July).
3. COVID-19 Infection rates, Hampshire (10 May 2020).
4. COVID-19 Confirmed cases around Rushmoor (10 May 2020).
5. COVID-19 Daily infections, Rushmoor (2 June 2020).
6. COVID-19 Weekly infections, Rushmoor (12 August 2020).
7. COVID-19 Infections by MSOA, Rushmoor.
8. COVID-19 Survey of Rushmoor residents – Results.

\* This evidence is submitted in commemoration of Cllr Frank Rust:  
<https://www.rushmoor.gov.uk/article/11955/Councillor-Frank-Rust>