

What happened in Care Homes?



So what did we do for the frail and elderly in care homes?

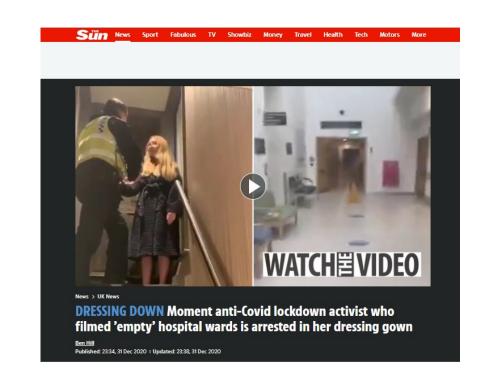
- Bearing in mind the Directive from UN Secretary General António Guterres: "Our response to COVID-19 must respect the rights and dignity of older people."
- During a Downing Street press conference on 15 May, 2020, Matt Hancock said: "Right from the start, it's been clear that this horrible virus affects older people most. So right from the start, we've tried to throw a protective ring around our care homes."
- On 18 May 2020, when questioned on this wording, Hancock told the House of Commons: "We absolutely did throw a protective ring around social care, not least with the £3.2 billion-worth of funding we put in right at the start, topped up with £600 million-worth of funding on Friday."

(http://www.un.org/development/desa/ageing/news/2020/05/covid-19-older-persons/; https://youtu.be/vM-2DsysyQI?t=343; https://hansard.parliament.uk/Commons/2020-05-18/debates/8FA78498-C990-4246-A745-AE0F36F7B948/Covid-19Response?highlight=%22protective%20ring%22#contribution-9F9E21C4-CFA7-4AA4-B49E-3149F81B0488)



The real world: Hancock's 'protective ring'

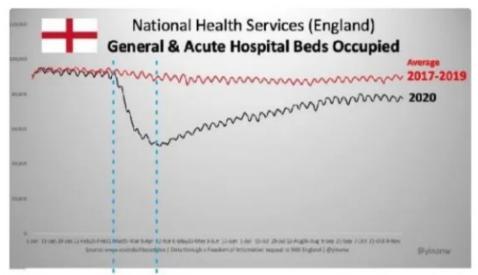
- To make way for prospective COVID patients, many in-patients were moved out of high-resourced hospitals into lowresourced care homes not just in the UK but in several countries.
- So for patients at the highest risk of death, the risk was transferred from hospitals to care homes with a much lesser standard of care.
- As it turned out, a lot of hospital wards were empty, as demonstrated by the numbers of videos taken of empty wards...
- ...for which apparently you could be arrested b, 2024

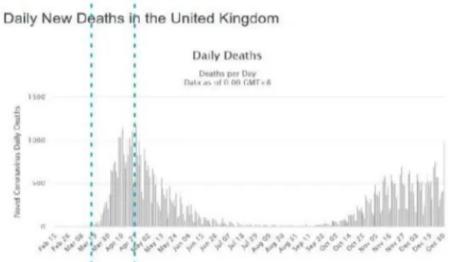


https://www.thesun.co.uk/news/13619752 /moment-anti-covid-lockdown-activistfilmed-hospital-arrested/



We can see the hospital exodus in the NHS data (with thanks to Paul Weston, political commentator)





- 'General and acute bed occupancy plummeted in our hospitals during April and May 2020, even as the daily Covid-19 deaths reached hundreds and then thousands.'
- 'So no, our hospitals were not overwhelmed.'
- 'The only excess deaths occurred over just a six-week period, and only in the care homes.'

(https://www.conservativewoman.co.uk/a-beginners-guide-to-the-great-covid-con-part-4-the-great-care-home-cull/)



The real world: Hancock's 'protective ring'

- Few of these patients transferred to care homes were tested for COVID but it seems that many of them transmitted it within the care home.
- ONS data showed that deaths among care home residents to early June 2020 amounted to 47% of the total.
- A UK study found that prior to the pandemic, age-standardised mortality risks were approximately 10-11 times higher among care home residents compared to those in private housing.
- In the 4 months to April 2020, age-standardised mortality risk had increased to 17-18 times higher for individuals in care homes.
- Data from five European countries suggest that care homes accounted between 42 and 57 percent of all deaths related to COVID-19. The infections are almost all nosocomial (hospital or care home acquired).

(https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases; Oliver D. David Oliver: Let's be open and honest about covid-19 deaths in care homes. BMJ. 2020 Jun 18;369:m2334; Dutey-Magni PF,et al. COVID-19 infection and attributable mortality in UK care homes: cohort study using active surveillance and electronic records (March-June 2020). Age Ageing. 2021 Jun 28;50(4):1019-1028; https://www.theamericanconservative.com/when-our-hospitals-are-the-pandemic-superspreaders/; Schultze A, et al. Mortality among Care Home Residents in England during the first and second waves of the COVID-19 pandemic: an observational study of 4.3 million adults over the age of 65. Lancet Reg Health Eur. 2022 Jan 10;14:100295)



But the death rate might have been increased by...



News > UK News

DRUG SCANDAL Care homes accused of using powerful sedatives to make coronavirus victims die more quickly as use rocketed 100%

Alice Fuller

Published: 11:03, 12 Jul 2020 | Updated: 11:03, 12 Jul 2020



CARE homes have been accused of using powerful sedatives to make coronavirus victims die more quickly.

https://www.thesun.co.uk/news/12100515/care-homes-accused-sedatives-coronavirus-die-quickly/

- Midazolam is a strong benzodiazepine frequently used for sedation in patients in an intensive care unit (ICU), particularly those on ventilators. It is also used for death penalty executions. It enhances the effects of gamma-aminobutyric acid (GABA), a naturally occurring inhibitor of brain activity.
- According to the US National Library of Medicine:
 'Midazolam injection may cause serious or life threatening breathing problems such as shallow, slowed,
 or temporarily stopped breathing that may lead to
 permanent brain injury or death.'
 - In addition, an article in the Telegraph claims that the NHS was instructed to deny care to the elderly in care homes (https://www.telegraph.co.uk/news/2021/07/30/nhs-made-secret-pandemic-plan-deny-care-elderly/).



A respiratory depressant for breathing difficulties?

- Furthermore, the National Institute for Health and Care Excellence (NICE) published their NG163 guidance (now replaced) on April 3, 2020, advising midazolam to be issued to patients who exhibited 'anxiety' and breathlessness.
- 'Sedation and opioid use should not be withheld because of a fear of causing respiratory depression' and went on to say: 'Notes: At the time of publication (April 2020), opioids and benzodiazepines did not have a UK marketing authorisation for this indication or route of administration . . .'
- Giving a drug that caused respiratory depression to someone with breathing difficulties????

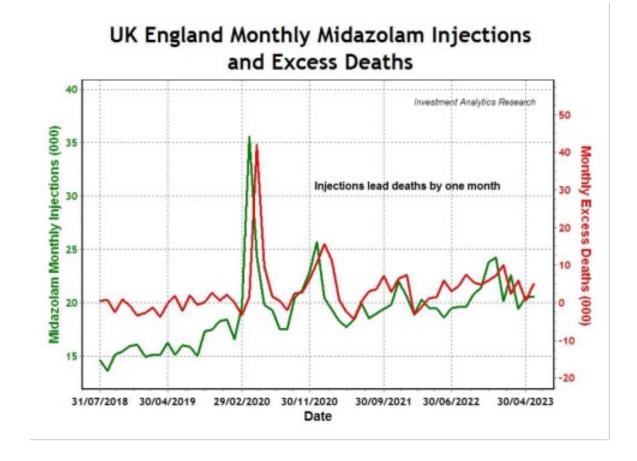
(https://www.arkmedic.info/p/there-was-no-virus; https://health-desk.org/articles/how-is-midazolam-being-used-for-covid-19-is-it-dangerous; https://www.bmj.com/content/bmj/369/bmj.m1461.full.pd; https://www.nice.org.uk/guidance/NG163; https://www.conservativewoman.co.uk/a-beginners-guide-to-the-great-covid-con-part-5-matt-hancocks-role/)



And the result...

- 'Midazolam was the proximate, if not the primary, cause of excess deaths in the UK.
- Statistically, correlations improve substantially when Midazolam injections lead excess deaths by one month for all regions in England.'

(Sy W. 2024/01/10. Excess Deaths in the United Kingdom: Midazolam and Euthanasia in the COVID-19 Pandemic 10.13140/RG.2.2.13654.42560)





Amnesty International Report 2020

- Amnesty International consider that '(government) decisions and policies have...impacted the rights of care home residents to private and family life, and may have violated their right not to be subjected to inhuman or degrading treatment.'
- From ONS data, they cite 28,186 'excess deaths' recorded in care homes in England, representing a 46% increase compared with the same period in previous years.
- 'The UK government has known from the outset that COVID-19 presents a disproportionate risk of serious illness and death to older people, especially those with underlying health conditions. Risk of death estimates made in early March showed infection fatality rates ranging from 0.01% for people under 20 to 8% for people over 80.
- The UK government was clearly aware that the 400,000 residents of care homes in the UK, many of whom live with multiple health conditions, physical dependency, dementia and frailty, were at exceptional risk to coronavirus. Yet at the height of the pandemic, despite this knowledge, it failed to take measures to promptly and adequately protect care homes....

(https://www.amnesty.org.uk/files/2020-10/Care%20Homes%20Report.pdf?VersionId=kd5Z8eWzj8Q6ryzHkcaUnxfCtqe5Ddg6; http://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/deathsinvolvingcovid19inthecaresec torenglandandwales/deathsoccurringupto12june2020andregisteredupto20june2020provisional/relateddata; https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/887541/01-spi-m-o-consensus-statement-on-2019-novel-coronavirus-_covid-19_.pdf; http://www.bgs.org.uk/resources/covid-19-managing-the-covid-19-pandemic-in-care-homes)



Amnesty International Report: specific criticisms

A number of decisions and policies adopted by authorities at the national and local level in England increased care home residents' risk of exposure to the virus—violating their rights to life, to health, and to non-discrimination. These include, notably:

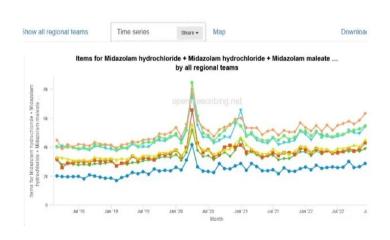
- Mass discharges from hospital into care homes of patients infected or possibly infected with COVID19 and advice that "[n]egative tests are not required prior to transfers / admissions into the care home".
- Advice to care homes that "no personal protective equipment (PPE) is required if the worker and the resident are not symptomatic," and a failure to ensure adequate provisions of PPE to care homes.
- A failure to assess care homes' capability to cope with and isolate infected or possibly infected
 patients discharged from hospitals, and failure to put in place adequate emergency mechanisms
 to help care homes respond to additional needs and diminished resources.
- A failure to ensure regular testing of care home workers and residents.
- Imposition of blanket Do Not Attempt Resuscitation (DNAR) orders on residents of many care homes around the country and restrictions on residents' access to hospital.
- Suspension of regular oversight procedures for care homes by the statutory regulating body, the Care Quality Commission (CQC), and the Local Government and Social Care Ombudsman.

(https://www.amnesty.org.uk/files/2020-10/Care%20Homes%20Report.pdf?VersionId=kd5Z8eWzj8Q6ryzHkcaUnxfCtqe5Ddg6)



Hancock's protective ring?

- Hancock was videotaped on April 17 2020 (https://twitter.com/FreeWomanLeahy/status/16874707533509) 14048/video/1) saying that he had stockpiled a sufficient amount of midazolam.
- Hancock had managed to obtain a two-year supply of midazolam. Or what would have been a two-year supply in normal times.
- Between March and June 2020, large amounts were used up at the precise time we saw a very high death rate in care homes.
- In a 2023 court case, Hancock claimed he had never heard of midazolam.
- So this was Hancock's protective ring: giving midazolam, withholding antibiotics in patients with pneumonia or sepsis and inappropriate use of Do Not Resuscitate (DNR) orders without Rachel Nicoll PhD, 2024 consent?



https://www.conservativewoman.co. uk/a-beginners-guide-to-the-greatcovid-con-part-5-matt-hancocks-role/

11



What we could have done instead

- Professor Sunetra Gupta (Oxford University), writing in the Telegraph:
- There were apparently no government guidelines or ministerial direction to protect the frail and elderly and those at the highest risk of severe clinical outcomes.
- 'We could have set up fever hospitals where Covid-19 positive patients could convalesce until they no longer posed a risk to other vulnerable people...These are the measures that might have worked to reduce deaths rather than the fantasy of infection control.'

(https://www.telegraph.co.uk/news/2023/12/01/email-that-explains-our-covid-lockdown-mistakes/)

• The hastily set-up Nightingale hospitals could well have acted as fever hospitals. As it was, they were dismantled without being used.



Care homes: summary

- To make way for prospective COVID patients, many in-patients were moved out of high-resourced hospitals into low-resourced care homes. This left hospitals largely empty as not many of the threatened COVID patients ever materialised.
- These patients were not tested for COVID before the transfer to a care home. Many then transmitted COVID within the care home.
- Care home deaths significantly increased as a result.
- But patients may have been helped on their way by Do Not Resuscitate (DNR) orders and the NICE instruction to give Midazolam, a powerful sedative which can slow breathing, to patients exhibiting anxiety and breathlessness.
- Amnesty International objected that this may have violated care home residents' right not to be subjected to inhuman or degrading treatment.