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Mr Tim Bowen, President NAHT: [info@naht.org.uk](mailto:info@naht.org.uk)

8 September 2021

Dear Ms Newton and Ms Spielman

**Open Letter Re: Covid-19 Vaccine (Vaccination) Rollout to Children of 12-15 years (Child Vaccination Programme)  
Vaccination of healthy children against Covid-19, within their schools and academies, raises serious  
safeguarding and safety concerns, which OFSTED and the HSE must respond to immediately.**

We are writing to you as the heads of regulatory bodies concerned with the protection of children and safety in schools, in the hope that you can provide some reassurance and support to parents, headteachers and teachers who are concerned about the latest developments relating to the proposed Child Vaccination Programme, and some protection to children who may otherwise be harmed by the proposed vaccine rollout to children in schools.

***Background***

Media reports suggest that the Chief Medical Officers, Professor Whitty, Dr McBride, Dr Smith and Dr Atherton (**the CMOs**) are expected to confirm a roll out of the Child Vaccination Programme (**the Expected Announcement**) to children of 12-15 years old.

Like the flu vaccine, it is expected that this Child Vaccination Programme will be rolled out on the premises of schools, colleges and academies. We set out below the reasons that schools are not the appropriate setting for any Covid-19 vaccination of children to take place. If this programme goes ahead it should only happen in a proper medical setting e.g. GP surgeries or Covid-19 vaccine centres, where all the relevant safeguarding issues and risk assessments can be more easily addressed, along with obtaining fully informed consent that satisfies legal requirements.

The Expected Announcement is expected from the CMOs imminently, and will be in direct contradiction of advice provided by the Joint Committee on Vaccinations and Immunisations on 3 September 2021 relating to the Vaccination (**the JCVI Advice**), attached for your convenience.

We are concerned that the Expected Announcement is a political decision and not a decision based on the best interests or safety of children.

In addition there are potential legal and safeguarding ramifications for schools if a serious injury or death occurs, as a result of a Vaccination given to a child while the schools are acting "in loco parentis".

### ***JCVI Advice***

The JCVI Advice makes it clear that some children will be harmed as a result of the Child Vaccination Programme and that "the margin of benefit... is considered too small to support universal vaccination of healthy 12- to 15-year-olds at this time".

In particular, the JCVI Advice cites "disruption to education in the short-term, particularly if school premises are used for vaccination" and states that "adverse reactions to vaccination (such as fevers) may also lead to time away from education for some individuals".

Whilst certain vulnerable children may benefit from taking the Vaccination, a larger proportion of children will not. Vulnerable children are already given full access to the Vaccination, in dedicated vaccination facilities, and the JCVI Advice extended this group to a further 200,000 children. If a parent considers there is an overall increased benefit for their child in having the Vaccination, that child will not be denied access to it, if fully informed about the risks.

### ***Who are we?***

We are a group of professionals, from a variety of campaign groups, consisting of solicitors, legal practitioners, law firms, doctors, scientists, current and ex-headteachers, and a child protection specialist. We are all deeply concerned that any Expected Announcement will be in direct opposition to the JCVI Advice.

### ***Safeguarding***

As you are fully aware, all schools and academies in England have a legal duty to safeguard all children in their care against harm. "Safeguarding" is rightly a key focus of every OFSTED inspection and serious safeguarding concerns about a school can trigger an inspection.

The Vaccination of healthy 12-15 year olds, on school premises during the school day, will raise several serious safeguarding concerns to schools. This is more concerning now that the JCVI Advice formally advises against vaccinating this cohort, and raises the possibility of a child experiencing a serious adverse effect, such as myocarditis (an inflammation of the heart), anaphylaxis or blood clots.

If schools are intended to be the ultimate setting for the Child Vaccination Programme, then school leaders will be deemed to have approved the Vaccination against the JCVI Advice. This has a variety of potential legal ramifications for school staff. Certainly many are concerned that there may be a serious safeguarding concern that would not align with the legal duties of schools, as outlined in the DfE document "Keeping Children Safe in Education".

An email sent by the UK Medical Freedom Alliance to each of the four UK Chief Medical Officers on 4 September 2021, details many of these issues and states, "We are already seeing reports of deaths and injury in children in the US, Israel and Canada, where vaccines are being trialed and rolled out to children. Even with rare risks (1:10,000 to 1:100,000), if these vaccines are rolled out to around 10 million UK children, it seems certain that we will see deaths and serious injuries in a significant number of children who would never have been harmed by Covid-19, devastating families and communities."

Like schools, OFSTED should be concerned about the potential discrepancy between the Expected Announcement and the JCVI Advice. We strongly suggest that the JCVI Advice is followed and that further evidence and long-term safety data is received and independently assessed prior to any extension of the Covid-19 rollout to children under 16 years, especially in schools.

### ***Health & Safety guidance to schools***

As the Health & Safety Executive, you are responsible for the health & safety in schools and colleges across the nation. Your primary role is to prevent work-related death, injury and ill health.

All schools and academies in England are legally obliged to comply with this ambition and to fulfill their legal health and safety obligations to protect their staff, pupils and visitors.

In light of the JCVI's recommendation, schools and academies could potentially be the settings for long-term and short-term work-related injury. Accordingly, schools should be advised against this by the HSE, or as a minimum advised to do a full risk assessment, taking into account the JCVI Advice and further suggestions below.

### ***Judicial Review proceedings***

On 2 September 2021, the Covid-19 Assembly applied to the Administrative Court for an urgent hearing to consider an interim order to pause any rollout of the vaccines to under 18s until a full judicial review can be heard. A judicial review claim has been served on the Secretary of State for Health and Social Care and JCVI (**Judicial Review**) and proceedings remain ongoing.

This is a highly contentious and politicised rollout of a novel mRNA vaccine that is still in Phase 3 trials, which is not going to benefit the vast majority of healthy children and carries known serious short-term, and unknown long-term, risks. As such, there is no place for this to occur in schools when it could be just as effectively and more safely carried out in GP surgeries or dedicated vaccine centres. These settings have all the medical facilities available should a serious reaction occur requiring urgent medical attention, and would also require the presence of a parent to ensure consent is appropriately and legally obtained prior to vaccination.

### ***The Problems for teachers***

We have been told by parents, teachers and headteachers that they are concerned by the Expected Announcement. Teachers particularly feel torn between their legal and moral/ethical duties to children in their care, the JCVI Advice and the Expected Announcement.

One headteacher told us that he felt "*vulnerable*" because he would soon be "*forced to make a decision directly against medical advice and safe practice*", knowing that this raises legal, moral, ethical and practical problems for his school and his staff from a Safeguarding and Health & Safety perspective.

Whilst the flu vaccine is commonly administered in educational establishments, the Covid-19 vaccine is a highly politicised and contentious vaccine which is still in the trial phase, with nothing known about long-term health effects for this age group. More information is needed, as the JCVI Advice clearly suggests.

Indeed, teachers are scared to speak out and raise legitimate safeguarding and safety concerns about this Child Vaccination Programme because of the social stigma around the topic of Vaccination at this time.

In any event, it is much safer for a child to receive a Vaccination in a dedicated medical setting.

### ***Requests***

The Expected Announcement is expected within the next few days. Therefore, we ask you to immediately contact the CMOs to bring the issues of safeguarding of children and health & safety at schools to their attention in considering the Child Vaccination Programme through educational establishments.

We also ask that in the next three days you:

- i. alert schools and local authorities to the information contained in this letter and the information attached to this letter and ask them to:
  - a. read and review the letters referenced as an attachment to this letter and urgently take independent legal advice on the potential legal implications for schools and local authorities if they roll out the Child Vaccination Programme against the JCVI Advice in schools;

- b. await a full and final decision by the courts following the Judicial Review;
- c. ensure that all institutions receive the positive and explicit written consent from all adults holding parental responsibility for each child in writing, after providing them with appropriate guidance of the risks and benefits and the normal 14 days time period to come to a decision that is standard practice before other vaccinations administered in schools. The proposed use by the Government of Gillick Competence (for children to consent to the vaccine themselves, over-riding their parents wishes) raises serious safeguarding issues and may result in parents taking legal action against the headteacher or school staff who are acting "in loco parentis" in that situation;
- d. complete a full individual **Risk Benefit Analysis** for each child which considers in detail the child's personal and familial medical history, together with more general risks such as potential unknown allergies to excipients. The risk assessment should include, but is not limited to: pre-existing health conditions or potential genetic variations that may increase the risk for that child; previous infection with Covid-19 which gives robust, comprehensive and long-lasting immunity and thus results in no benefit but only risk from a Vaccination; previous allergies or adverse reactions to medicines or vaccines. . Additionally, the as yet unknown potential for long-term negative impact on fertility, central nervous system and organ development and general health should be fully considered in such an analysis and weighed carefully against quantified perceived short and long-term benefits to the child from the Vaccination. A copy of an example risk assessment has been attached but should be appropriately adjusted.
- e. perform (and keep under review) a full **Health & Safety Risk Assessment** for the purpose of risk management of any harm arising from the conduct of the school, especially where such conduct could expose pupils to a risk of harm under the Health and Safety at Work Regulations 1999 below as:
  - i. *"identify what could cause injury or illness in your business (hazards)*
  - ii. *decide how likely it is that someone could be harmed and how seriously (**the risk**)*
  - iii. *take action to eliminate the hazard, or if this isn't possible, control the risk"*
- ii. communicate with all schools and local authorities and ask them to decline to participate in any Child Vaccination Programmes until an investigation has been completed by you;
- iii. objectively research and consider the facts set out in the attached documents, including the JCVI Advice, as a part of your investigation;
- iv. provide an independent report on (i) the Safeguarding issues for children and (ii) the Health & Safety issues for schools, in delivering the Child Vaccination Programme against the Vaccination Advice; and
- v. issue emergency guidance to all schools, teaching unions and local authorities in accordance with your report.

As you will understand, this matter is now extremely urgent since Child Vaccination Programmes are likely to commence in the next few days.

Whilst it may be politically beneficial for politicians to make such a decision, decisions like this must not put any child's life or health at risk. We certainly cannot 'short-cut' or 'speed-up' health & safety decisions or ignore safeguarding issues merely for 'political preference'. Children's safety must come first.

In addition, politicians should not be abdicating their legal responsibilities and liabilities and putting headteachers and school staff in such an impossible position.

As well as publishing this open letter online, we intend to forward a copy of this letter to certain teaching unions and, where possible, the Local Authority Chief Executives. We will also ask concerned parents, teachers and headteachers to raise these issues with their school, governors, local MP and local councillors directly.

Yours sincerely,

[Lawyers for Liberty](#)

[UK Medical Freedom Alliance](#)

[Powerless 2 Powerful Parenting](#)

[The Jonathan Lea Network](#)

**Attachments can be downloaded here: <https://bit.ly/openletter-attachments>**