

UK: Health workers threatened for wearing PPE and reporting danger to their lives

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8 April 2020

The abject failure of the Johnson government to prepare frontline National Health Service (NHS) staff for the COVID-19 crisis has taken a sickening turn, as reports emerge of health workers facing disciplinary measures for speaking out and even for wearing their own Personal Protective Equipment (PPE) where none was provided.

The shortages of PPE were graphically illustrated when NHS workers were photographed donning makeshift aprons made from bin liners.

On March 28, the BBC reported that a GP in Ludlow in the west of England, who was called upon to help the town respond to the crisis, was barred from working at the 40-bed community hospital for wearing PPE and raising her concerns that the community hospital had been “very slow” in protecting staff and patient isolation. Shropshire Community Trust told Dr. Catherine Beanland that they were following national guidelines and that her wearing of PPE was “frightening both patients and staff.”

On April 4, the *Guardian* reported that a health care assistant at Hillingdon Hospital in west London resigned after her managers denied her permission to wear a protective mask she had supplied herself. Tracy Brennan had just returned from 14 days isolation because her daughter had self-isolated after developing symptoms. She was called into a meeting and instructed by managers that wearing the face mask was not Trust policy. She complied with the instruction, but later that day was coughed on by a patient while taking blood samples. She reported this to management, but they continued to deny her use of the face mask.

The Doctors Association UK (DAUK) has compiled a dossier of evidence concerning threats made by NHS management. The examples cited include:

- a GP consultant at Chase Farm hospital in London

being instructed to leave work after voicing concerns;

- an intensive care specialist called into a meeting with managers and being disciplined after raising worries;

- a GP who made an appeal to her community via social media for more supplies of PPE being blocked from making any further appeals by her local Clinical Commissioning Group.

DAUK has repeatedly exposed the desperate plight faced by doctors and nurses. On April 1, in an article based on its own interviews and the DAUK, the *Guardian* noted that NHS staff were making improvised masks out of snorkels, buying protective kit from hardware stores and using school science goggles to protect themselves. One consultant anaesthetist working in south-east England reported buying 60 snorkels to adapt into respirator masks.

Samantha Batt-Rawden, president of DAUK, said, “Many doctors have told us they have also had to buy their own respirator masks from hardware stores, while others have reached out to schools and laboratories for protective glasses. Some have approached 3D printing companies to have batches of visors made.”

Less than a week later, Batt-Rawden reported doctors being “bullied and shamed,” explaining, “Lack of personal protective equipment continues to be a critical issue. It is heartbreaking to hear that some staff have been told to simply ‘hold their breath’ due to lack of masks. ... Doctors are dying. Nurses are dying. We are devastated, and can no longer stand by and watch as more dedicated colleagues lose their life.”

The threats to health workers have been particularly directed at any use of social media platforms such as Twitter and Instagram. Accident & Emergency staff at Southend hospital were warned via a memo on March 26 that they could face disciplinary action if they aired

their concerns about PPE publicly on social media.

Medics subsequently warned that they would be forced to reduce treatment to coronavirus patients to a bare minimum by April 1 unless the availability of PPE improved. In letter sent to CEO Clare Panniker, they report that PPE is being “rationed,” that “there is limited stock” and what is available is being “locked away from staff and not accessible” and staff are “petrified” over the working conditions.

To date, the figures of COVID-19-related deaths in the UK do not specify the number of doctors and nurses who have died as a result of the virus. They also exclude all those who have died outside of hospital. This methodology results in an underestimation of the real numbers of lives claimed by the disease, an issue which has not been contested within the mainstream media.

But the lives of at least 13 doctors and nurses have been taken by COVID-19 in the UK. The youngest, John Alagos, was just 23, a nurse at Watford General Hospital. He collapsed and died after completing a 12-hour shift where he was treating COVID-19 patients. His mother, Gina Gustilo, told the *Telegraph* that he had become ill during the shift but was not allowed to go home because of staff shortages. She also said that her son had not been wearing the right PPE.

These outrages and the threats levelled against health workers exposing them are the inevitable result of government dissembling, abetted by the mainstream media, which is aimed at concealing the impact of official criminal negligence.

Ever since the Johnson government belatedly announced its guidelines for social distancing, the media spotlight has focused almost exclusively on berating sections of the general public for their failure to comply, which is identified as the sole threat of the NHS being overwhelmed by the virus.

This is propaganda on a truly Orwellian scale. The British ruling class is well aware of the fact that the NHS is one of the few institutions in the country which commands popular respect, because it is identified with the principle that access to health and the preservation of life should not be determined by ability to pay. But its attempts to use the NHS as a fig leaf for its calls for national unity and shared sacrifice are deeply cynical. Both Labour and Conservative governments have worked to dismantle the NHS.

The impact of cuts and privatisation on critical infrastructure has been compounded by the Johnson government’s “herd immunity policy,” which declared that it was neither possible nor desirable to contain the virus. Even now, the government’s social distancing policy has exempted corporations performing supposedly non-essential work and failing to ensure safety practices and those that are considered essential but have failed to take adequate steps to protect their workforce.

The idea that the NHS stands above politics or the class divisions wracking society is being completely refuted. NHS staff are being exposed to unnecessary levels of risk and forced to work in conditions where their lives could be taken as a result. This was evidenced by the recent announcement by leading UK specialist, Farewill, that it was offering free wills to NHS staff after it reported receiving a 12-fold increase in enquiries from NHS staff over the last few weeks. NHS workers are fully aware of the risks they face, given that fatalities among doctors and nurses in Italy, one of the initial epicentres of the virus, has surpassed 100.



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