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Amanda Pritchard

Chief Executive

NHS England

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Dear Ms Pritchard

It is concerning that you are continuing to push these ‘vaccine’ rollouts, now to children, when it is abundantly clear that everyone who has received these ‘vaccinations’ have not been given the full facts of what this is (cell and gene therapy), especially considering how many vaccine adverse effects and deaths there have been since its rollout in December 2020.

Malfeasance in public office is an act done by a public official that causes damage to others (tort) and carries with it a criminal record and time in prison? How are you causing damage? You are failing to tell the truth, you are failing to tell your NHS staff to tell the truth to people who are receiving these ‘vaccines’. There is enough evidence through the yellow card scheme to show that these vaccines outweigh any effectiveness, as they do not provide immunity, nor do they stop transmission of Covid, and they are hurting millions of people, and taking unnecessary lives There is certainly no need for children to receive them as they have never been a risk, so I have to question why there is such desperation by our Government and NHS to administer such a dangerous cell and gene therapy that they do not understand?

Since the COVID-19 is being labelled as a vaccine to the general public, there are certain protocols to adhere to:

*Green Book Chapter 2 states:*

**Consent must be obtained before starting any treatment or physical investigation or before providing personal care for a patient. This includes the administration of all vaccines.** **The guidance in this chapter is based both on the current legal position and the standards expected of health professionals by their regulatory bodies. The individual must be informed about the process, benefits and risks of immunisation and be able to communicate their decision. Information given should be relevant to the individual patient, properly explained and questions should be answered fully.**

WHAT INFORMATION SHOULD BE PROVIDED

**Individuals, or those giving consent on their behalf, must be given enough information to enable them to make a decision before they can give consent**.**This should include information about the process, benefits and risks of the immunisation(s).**

The four UK countries provide a wide range of information, including leaflets, posters, videos, information packs, factsheets, and websites to support all aspects of the immunisation programme. This information is based on the current scientific evidence and clinical advice and will have been tested on relevant population groups.

Written or verbal information should be available in a form that can be easily understood by the individual who will be giving the consent. Where English is not the first language, translations and properly recognised interpreters should be used.

Consent is valid if the individual, or person providing consent, is offered as much information as they reasonably need to make their decision, and in a form that they can understand. Case law on this area is evolving – more detail can be found at [www.dh.gov.uk/consent](http://www.dh.gov.uk/consent) (this item has been archived).

**Health professionals should ensure that the individual (or those giving consent on their behalf) fully understands which immunisation(s) are to be administered; the disease(s) against which they will protect; the risks of not proceeding; the side effects that may occur and how these should be dealt with; and any follow-up action required.**

In line with current data protection and Caldicott guidance, individuals should also be informed about how data on immunisation will be stored, who will be able to access that information and how that data may be used. It is important to emphasise that such information is used to monitor the safety and efficacy of the current vaccination programmes.

It is also correct to determine that this vaccine rollout is attempted murder on every man, woman, and child. Is your role not to protect the health of people, and not cause purposeful harm?

*Page 28 of COVID-19 vaccination programme, information for healthcare practitioners states*

When working to some or all of the protocol, registered healthcare workers are responsible and accountable for their practice. They are accountable to their regulatory body and to their employer. When administering vaccines under the protocol, non-registered healthcare workers are accountable to their employer. Their employer is responsible for ensuring they are suitably trained, have completed the necessary competency assessment and are provided with an appropriate level of supervision when carrying out their duties under the protocol.

*Page 29 of COVID-19 vaccination programme, information for healthcare practitioner’s states:*

Consent

Before giving a COVID-19 vaccine, vaccinators must ensure that they have obtained Informed consent from the individual or a person legally able to act on the person’s behalf, and that this has been recorded appropriately. Where a person lacks the capacity to consent at the time of vaccination, in accordance with the Mental Capacity Act 2005, a decision to vaccinate may be made in the individual’s best interests. Obtaining consent is discussed in Chapter 2 of “Immunisation against infection disease” (the Green Book).

Best interest decisions are discussed below

Administering COVID-19 vaccine to individuals without the mental capacity to consent.

If offering a COVID-19 vaccine to someone who may lack the mental capacity to consent, in the first instance, all practicable steps should be taken to support the person to make the decision for themselves. Where it has been established that the person lacks capacity to consent, a best interests decision should be taken in line with the best interest checklist in Section 4 of the Mental Capacity Act. This means that the decision-maker must consider all the relevant circumstances, including the person’s wishes, beliefs and values, the views of their family and what the person would have wanted if they had the capacity to make the decision themselves. The decision maker should make a record of their best interests decision. Best interests decisions should be made on an individual basis. Where appropriate, the person’s advocates or those with power of attorney should be consulted, and if there is a deputy or attorney with relevant authority then consent must be sought from them to be able to make a decision on the person’s behalf to receive the vaccination. If there are any issues or uncertainties when making a best interests decision, ask for advice from an experienced colleague.

The COVID-19 vaccines, however, do not provide immunity. You have acted out of your care of duty and conspired to maim and/or murder every vaccinated individual, together with the help of the Government leaders, the mainstream media, and pharmaceutical companies. It is a spell upon humankind, a very wicked malevolent spirit of cold calculated attempted murder and actual murder in causing unnecessary vaccine adverse reactions and possible death in otherwise healthy able-bodied individuals.

The Covid-19 vaccines are described by UK Government themselves as biotechnological medicines. They are not traditional vaccinations that provide immunity as people are taught vaccines are. These are mRNA vaccines that are experimental and not tested for long term safety. IT IS IMPERATIVE THAT NEW EXPERIMENTAL VACCINES THAT CONTAIN NEW TECHNOLOGY BE FULLY EXPLAINED, WITH THE RISKS AND POSSIBILITY OF DEATH.

Bayer Executive, Stefan Oelrich has recently confirmed what the mainstream media are not telling the public, about these COVID-19 ‘vaccines’. They are cell and gene therapy.

*I think this is really important also for these latitudes here. And for us, therefore, we're really taking that leap, us as a company Bayer, in cell and gene therapy, which to me is one of these examples where really we're going to make a difference hopefully moving forward. There's some ultimately the mRNA vaccines are an example for that cell and gene therapy.* ***I always like to say, if we had surveyed two years ago, in the public, would you be willing to take gene or cell therapy and inject it into your body, we would have probably had a 95% refusal rate****. I think this pandemic has also opened many people's eyes to do innovation in the way that was maybe not possible before.*

Absolutely tragic that you all think that you are get away with your evil deeds, but since you are purposely causing harm in the decisions that you make to continue to roll out these poisonous therapies, and continuing to lie to the public through the bought bias mainstream media, it is only fair that you pay those who are injured (not from taxpayers monies, either) because you coerced, manipulated, and deceived the public into receiving the ‘only solution’ to get the world back to normal, while also suppressing cheap effective therapies from being used. This is murder. Is profit all that you leaders care about?

During my phone call for the ‘vaccine’ I was not told that these were cell and gene therapy. This is deception, this is failure to uphold your duty of care as Chief Executive of NHS England. I can only see a malevolent spirit at play which is to commit murder purposely under a disguise of a false light. This is malfeasance and makes all of those who have known this information from the outlet, and yet failed to inform millions of people from what cell and gene therapy will do their bodies over the long term, and these innocent victims that believed your lies have no remedy when long term injury comes, when they were perfectly able bodied prior to the ‘jabs’. It is clear that this is an experiment and those participating in an experiment should be fully informed of all facts before they can give consent. It is absolutely barbaric and criminal what is taking place in the UK and worldwide.

One phone call and four letters I received inviting me for this ‘vaccine’ Thankfully, the mainstream media’s level of fear did not cause me to make a foolish choice to trust the NHS and our communist brainwashed governments. Why the desperation and the waste of taxpayers money when people are starving worldwide?

DESPERATION equates to my questioning of this entire agenda to get cell and gene therapies into humans.

I was forced to complain to my GP for actual harassment, to which I received no response. So much guilt of nonfeasance in public office. Every day I pray for the God-fearing judges to rise against this tyranny because you are guilty of murder and deserve to go to prison for your failure to respect and protect human life.

I would have more respect for all of you leaders if you actually went on the BBC and told people the truth, but cowards are too full of pride and continue to lie to people, and themselves because money is their God. You all act in breach of the Nuremberg Code 1947 because these vaccines are experimental, and why call them vaccines when they are nothing of the sort. This is deliberate misleading of the public and deception.

**The Nuremberg Code (1947)**

**Permissible Medical Experiments**

The great weight of the evidence before us to effect that certain types of medical experiments on human beings, when kept within reasonably well-defined bounds, conform to the ethics of the medical profession generally. The protagonists of the practice of human experimentation justify their views on the basis that such experiments yield results for the good of society that are unprocurable by other methods or means of study. All agree, however, that certain basic principles must be observed in order to satisfy moral, ethical and legal concepts:

1. **The voluntary consent of the human subject is absolutely essential**. This means that the person involved should have legal capacity to give consent; should be so situated as to **be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion**; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. This latter element requires that before the acceptance of an affirmative decision by the **experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment**. The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs, or engages in the experiment. It is a personal duty and responsibility which may not be delegated to another with impunity.
2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.
3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results justify the performance of the experiment.
4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.
5. No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.
6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.
7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability or death.
8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.
9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.
10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.

Are you going to go on national television and apologise to those families whom you have damaged adversely through these cell and gene therapy ‘vaccines’ that provide no immunity, nor stop transmission of COVID. What about those who have been killed by heart attack because of the blood clots? Will you provide a financial remedy for the tort of committing malfeasance in public office?

I look forward to your prompt response.

Yours faithfully,

Helen