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ONS Admits Vaccinated People Who Died Were Classed as Unvaccinated

Dr. Clare Craig revealed internal email where government employee said vaccine records were not received in all cases before datasets of deceased were compiled.

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Dr. Clare Craig speaks to NTD's "British Thought Leaders" programme. (NTD)



By [Rachel Roberts](#)

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The Office for National Statistics (ONS) has admitted in internal emails that it misclassified some vaccinated people who had died as unvaccinated in datasets used by the government to claim the COVID-19 jabs were “safe and effective” in 2021.

Dr. Clare Craig, co-chair of the Health Advisory and Recovery Team (HART), made a subject access request to the ONS to find out what information the regulator held on her, leading it to release communications discussing how the statistics had been skewed.

In April 2021, the ONS—the government’s regulator of statistics—began releasing monthly reports into mortality by vaccination status, more than three months after the rollout of the COVID-19 jabs began in January.

The early reports appeared to show large spikes in non-COVID related deaths for unvaccinated people across the different age groups.

Dr. Craig told The Epoch Times this immediately raised questions for her because she said, “There is no reason why the unvaccinated should suddenly die when you are vaccinating people.”

She and a group of statisticians and scientists, including professors Norman Fenton and Martin Neil of Queen Mary University London, have long questioned the validity of the data, pointing to various problems with record keeping and classification.

The regulator claimed the apparent spike in deaths of the unvaccinated was because people close to death were not being vaccinated, otherwise known as the “healthy vaccinee” effect. But the regulator’s claim contradicted NHS guidelines, which required critically ill people to be prioritised for the vaccine.

Subject Access Request Uncovered Admission

Dr. Craig's subject access request revealed that the database of vaccinated people the ONS relied on had excluded those who had died before vaccine records had been sent back to the central system.

She used [social media platform X](#) to share an internal email from an ONS employee, whose name was redacted, which read: "Any views on that? Clare rightly pointed out in the past that the [National Immunisation Management System] NIMS data were incomplete (eg, excluding people who had died before vaccine records had been sent back to the central NIMS system)."

Dr. Craig said that she and her colleagues have been calling out the problem "for years now."

Edward Dowd Breaks Down Findings on Excess Death, Disability, and Injury Statistics



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"We wrote [papers](#) showing that this was a record keeping problem, primarily. The ONS stuck to their guns and said that people who were just about to die were declining the jabs because there's no point them having it, they know they might die in two weeks time.

"We've done all the maths to show that this is not an adequate explanation, even if it's true in some cases," she said.

As well as claiming a “healthy vaccinee” effect, the ONS has also previously claimed an “unhealthy vaccinee” effect, whereby it said people with serious underlying health conditions were more likely to take the jabs, as a way of explaining away death rates in the officially vaccinated.

‘Cheap Trick’

Mr. Fenton wrote on his blog, [Where Are the Numbers?](#), that the revelation obtained through Dr. Craig’s subject access request was important because “the ONS data possibly more so than any other source of data in the world—was used to bolster the claim that the vaccines were highly effective and safe.

“And, as we have always argued, and which is now certain, any claims of efficacy and safety based on their data were completely illusory and subject to the [cheap trick](#) of miscategorisation whereby even a placebo - or something even worse - could be ‘shown’ to be safe and effective.

“They therefore lied and intentionally created and spread misinformation. We were accused of conspiracy thinking and our reputations were tarnished as a result.”

Earlier this year, the ONS [changed how it calculates](#) the excess death rate, resulting in a reduction of two thirds in the figure for 2023.

The ONS told The Epoch Times in an emailed statement that it could not provide comment during a pre-general election period, but they were able to respond factually.

A spokeswoman for the ONS confirmed that the internal email shared by Dr. Craig was genuine, and said, “We obtained a bespoke extract that included people who died soon after vaccination and did not have a record in NIMS so that all our publications on vaccine safety and vaccine effectiveness included the data.”

The statement added this extract, previously published alongside its [deaths by vaccination status data](#): “In rare cases, a vaccination may

not be recorded if the person has died soon after vaccination and before the record is entered into the system.

“We therefore include in our dataset an extract of people who died soon after vaccination and do not have a record in NIMS up to 28 June 2023. There were 1,484 new vaccination entries for people who linked to our 2021 Census-linked dataset who were vaccinated but not included in the NIMS data as their vaccine record was entered after they had died.”

‘A Convenient Big Mess’

Dr. Craig said she believes the ONS was under pressure to produce the data quickly and the true number of misclassified people who died is likely to be considerably higher than the figure of 1,484 given by the regulator.

“I think it’s a predictably big mess ... but I think the real problem is that they’ve used the data to make claims around vaccine safety [and] you can’t make those claims based on that data ... It’s a convenient big mess.”

“Fundamentally, the data collection system is flawed and centralised data collection is not as beautiful and pristine as it’s presented to be ... and people shouldn’t put so much faith in government data,” she said.

Dr. Craig said she believes, with some degree of certainty, that the vaccines [are a driver of excess deaths](#).

“In the Delta wave [of COVID-19], lots of people were dying. And the excess mortality was highest in low vaccination areas, and lowest in high vaccination areas—but this happened to be true before a single injection had been given,” she said.

She said this can be explained by socioeconomic reasons, because highly vaccinated areas are generally wealthier and therefore tend to have fewer health problems connected to poverty—such as obesity or smoking-related illness—which make people more vulnerable to dying from any respiratory illness.

“Then Omicron comes along and the relationship completely inverts. And now you’ve got excess mortality in the more heavily vaccinated areas, and that is a sign that people are dying because they’ve been vaccinated.”

She added that in May 2021, there was a dramatic increase in ambulance calls for life-threatening incidents.

“It went from 2,000 a day forever, then we had a dip for lockdown, then after the vaccines rolled out, it went to 2,500 per day in May, so you had this funny lag of a few months, and it’s been up there ever since. It can’t be COVID because it didn’t go up before [in 2020], it went up then, in May 2021.

“And at the same time, we see a massive rise in the long-term sickness and disability of the working age population. This starts to rise in spring 2021. You don’t need to be a genius to put those things together and realise that the vaccines are killing people. I can’t necessarily put a number on it, but I would say yes, absolutely the vaccines are killing people.”

The government has always maintained that the vaccines are “safe and effective,” that death by vaccination is extremely rare, and that the jabs have saved “millions” of lives across the world.



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