

## **ANNEX E**

### **SUPPORTING THOSE IN AT HIGH RISK AND VULNERABLE GROUPS**

#### **SUPPORTING STAFF FROM BLACK ASIAN & MINORITY ETHNIC (BAME) BACKGROUNDS, and OTHER HIGH RISK OR VULNERABLE GROUPS.**

1. There is considerable focus on the reasons why people from Black, Asian and Minority Ethnic (BAME) groups are contracting Covid-19 and suffering in more cases than others. This guide is not intending to circumnavigate, cut across or speculate on that work, but to add a useful addition for action and thought where this is helpful.
2. This Annex shares some practical support and advice for employers, the leaders, managers and all staff to consider. It also shares some of the national focus on this area and our commitment to support this.
3. There are also other vulnerable groups of our staff, and those who have caring responsibilities for others in need. These include, but not limited to, those who are partially sighted or blind, and use touch regularly to navigate the world, or those who have specific and high levels of stress and anxiety which need additional support during this time. This annex is intended to be as inclusive as possible.

#### **Ask your people**

4. The most important advice is to ask your people what they need help with. The example of the letter from Somerset Partnership NHS Foundation Trust and their Risk Assessment for colleagues in increased risk groups is enclosed (as Appendix 1 to Annex E) and could be a useful prompt for others.

#### **Emotional Support**

5. For many people being in a higher risk group or living with the fear of either more likely to contract the disease and / or have worse outcomes only serves to make life more difficult, carrying the burden of this anxiety simply by being who someone is can be a deeply stressful situation for individuals, families and communities.
6. It is incumbent upon all to recognise that the very essence of this Guide helps to address this, and asking 'How are you?' #HAY and truly listening, caring about the answer and seeking to understand can sometimes be as useful as a practical action. As Maya Angelou said *"...people will forget what you said, people will forget what you did, but people will never forget how you made them feel"*
7. Inclusion networks and groups should be strongly supported to connect – virtually and regularly, and all aspects of the weekly SE Health and Wellbeing Dispatch should be made available where relevant.

#### **Personal Protective Equipment (PPE)**

8. We know that all masks are to be fit-tested, not only fit-checked, and some masks have differing ways of being both fit and comfortable for different face shapes and sizes. It is vital that we pay special attend to this so that not only is the fit correct, but that the perception and anxiety of them not fitting can be openly discussed and addressed.
9. You may also have to carry out specific risk assessments for clinical frontline (or person facing) roles so that we can both address who need to be wearing what and for those that do not, how to assure them around their safety, and create adjustments for people to feel as well as know what is to be worn where.

10. As is the case with national policy all frontline staff caring for suspected/confirmed COVID patients must be equipped with long-sleeve gowns and FFP3 masks, and the staff testing availability will now be available for suspected cases.

### **Staff Testing**

11. As the staff testing element of the new testing for Covid-19 policies and protocols come into place, each employer will decide on which key workers are referred for testing, as well as key workers deciding for themselves, in the appropriate circumstances.

12. When considering the employers ability to nominate key staff members for testing, please notice in particular those within the criteria who might be exhibiting early symptoms, may be asymptomatic or whom you consider might be exposed more than others. As we know, our workforce is made up of many different roles, professionals and people from different backgrounds and heritage. Please consider all in the planning of your own staff testing, paying particular attention to those from BAME backgrounds.

13. In all cases, the test results will be shared with the individual and not the employer, and all employers will need to have contact with the staff member who have been tested to then agree a return to work, or not, for the relevant time period.

### **USEFUL INFORMATION ON VITAMIN D**

14. The roles of Vitamin D has been much in the media around its efficacy to support people from BAME backgrounds. In terms of this guide, there is no advice on this area, suffice to share the facts around what Vitamin D is and some thoughts around how to increase it.

15. Vitamin D is:

- a fat-soluble vitamin that promotes the absorption of calcium, regulates bone growth and plays a role in immune function.
- Produced in skin when it's exposed to sunlight. Those with a darker skin absorb less UV radiation from the sun and therefore produce less Vitamin D.

16. Vitamin D can be found in the following;

- a small number of foods, including oily fish such as salmon, mackerel, herring and sardines, as well as red meat and eggs.
- all infant formula milk, as well as some breakfast cereals, fat spreads and non-dairy milk alternatives. (Manufacturers must add vitamin D to infant formula milk by law.)
- dietary supplements.

17. For more information on Vitamin D please go to;

<https://www.nhs.uk/live-well/healthy-body/how-to-get-vitamin-d-from-sunlight/>

## FOR INFORMATION - NATIONAL & SE REGIONAL FOCUS TO ADDRESS THE IMPACT OF COVID-19 ON BAME STAFF IN OUR NHS

Workstream	'Response' Phase moving through to 'Resilience' Phase
Protection of staff	Working with Boards to ensure training and compliance around appropriate use of PPE
	Guidance and support to employers on creating proactive approaches to risk assessment for BAME staff
	Establishing feasibility of collection of staff testing data by a range of protected characteristics
	Collating returners data, staff deaths and sickness absence data by a range of protected characteristics
Representation in decision making	Senior leaders to reiterate and amplify narrative using existing WRES/WDES evidence
	Reverse decision to pause WRES/WDES data collections and extend to cover Gold Commands
	Chairs/NED to lead internal scrutiny and assurance on progress in this area at all levels (ongoing)
Comms and media	Ensure diversity of representation and advice in development and delivery of comms
	Clear don and doffing training guidance in multiple languages for staff
	Relay communication on myths and misinformation
Engagement with staff and staff networks	Webinars with the range of staff networks across organisations and disciplines
	Letter to NHS CEOs on importance of equality and inclusion and supporting BAME staff during COVID-19
	Webinars with directors within regions (HR, nursing, medical directors etc) on the importance of equality and inclusion and supporting BAME staff
	Short information document on the impact of COVID-19 on BAME communities
Rehab and recovery	Clear, evidence based, and co-produced description of the specific health and wellbeing needs and issues for BAME staff with clear recommendations
	Co-develop enhanced/tailored and flexible offers of support (culturally sensitive) for a range of staff groups, taking account of existing community-based support systems
	Implement all recommendations for the health and wellbeing pathway and mental health intervention for staff through national, regional and local organisations

**APPENDIX 1 TO ANNEX E****SOMERSET PARTNERSHIP NHS FOUNDATION TRUST LETTER**

Dear BAME (Black, Asian and Minority Ethnic) colleague,

Many of you will be concerned about the disproportionate impact of COVID-19 on BAME colleagues in the UK. We understand that this is worrying and we want to do all we can to ensure you feel safe and supported during this difficult time.

At a national level an inquiry has been launched to understand why people from BAME backgrounds appear to be disproportionately affected by coronavirus. While we await these findings we are taking the following steps to protect you and your families and have made the following commitment to you:

1. **Your manager will be supported to support you.** We have taken the decision to include BAME colleagues into the vulnerable and at risk group and are asking managers to have conversations with all BAME colleagues as they would for all within the vulnerable group. We have updated our risk assessment which supports managers with these conversations to ensure they understand the concerns and needs of our BAME colleagues and their families. We encourage you to feel confident discussing any concerns you may have about COVID-19 and the impact on you and your family with your managers. While we don't yet have any conclusive research or national guidance, we feel that this is the right approach to take. We also hope that you feel comfortable sharing any concerns you have about any underlying conditions so that these can be taken into consideration when planning your work.
2. **We will include BAME colleagues in the priority list for testing during the first five days of symptoms.** We encourage all BAME colleagues or their family members with symptoms to get tested as soon as possible. You will not be refused a test in the first five days of the onset of the recognised symptoms. We are currently offering the COVID-19 test for any colleagues who are in the first five days of having symptoms due to available capacity. If this changes BAME colleagues will remain on our priority list. This also applies to any of your family members who live with you (who are also in the first five days of symptoms).
3. **All BAME colleagues who may need to use a FFP3 mask will be supported to be FIT tested as soon as possible.** This makes sure that you are as safe as you can be if you need to use a FFP3 mask while working with COVID-19 patients. Drop-in clinic are running across the community, mental health and acute sites on a regular basis. There is no need to book, just come along and speak to one of the team. A Fit Test will take between 15 and 20 minutes per person.

More information is available here:

[http://intranet.tsft.nhs.uk/az/coronavirus-\(covid-19\)/latest-trust-advice-and-resources-\(eg-infection-control-management-and-hr-info\)/infection-control-management-and-testing/fit-testing-for-personal-protective-equipment-\(ppe\)/](http://intranet.tsft.nhs.uk/az/coronavirus-(covid-19)/latest-trust-advice-and-resources-(eg-infection-control-management-and-hr-info)/infection-control-management-and-testing/fit-testing-for-personal-protective-equipment-(ppe)/)

If you have any queries or concerns the fit tester will be able to support you as they are fully trained in fit testing for all colleagues, including our BAME colleagues.

4. **If you need to take sick leave due to COVID-19 related illness, we can reassure you that this will not affect your job role or future progress.** We are committed to supporting the development of our BAME colleagues and will continue to do so. Please do not hesitate to report any symptoms that concern you and ensure you are tested to protect yourself and your family. We will ensure that you have regular follow up and contact with your line manager if you are on sick leave related to COVID-19 or need to isolate due to a family member with symptoms. We want to make sure that you are safe and well supported during this difficult time.

5. **Your wellbeing is very important.** We have heard that many BAME colleagues are understandably worried about their own and their families' health at this time. Sunny Sander-Jackson (BAME lead) is working with our wellbeing team to ensure this service meets everyone's needs.

We are alert to the affect the coronavirus pandemic may be having on our colleagues and are looking closely to see if the pandemic is affecting different colleague groups differently. By understanding this, we will be able to act on any trends or themes as soon as possible. This is a high priority for our Trust at this time.

Thank you very much for your contribution during this difficult time. You are very valuable members of our community and we are really grateful for your ongoing commitment and hard work.

**Peter Lewis, Chief Executive**  
**Isobel Clements, Director of People**

### Colleagues in the increased risk group Covid-19 Risk Assessment and Actions

It is the line managers' responsibility to complete an assessment for individual colleagues with underlying health conditions that have an increased risk of severe illness from coronavirus (Covid-19). This form has been developed to support managers with this assessment but it must be completed in conjunction with the latest guidance from Public Health England (PHE). Further information on Covid-19 can be found from the [main page of the Intranet](#).

**Main Risks** – Exposure to Covid-19, impact on current health condition, mental wellbeing

**Note:** The impact to a ward / area is monitored via the Corporate Covid-19 risk assessment.

General Information					
Colleagues' Name(s):			Job Title:		
Line manager			Managers' job title		
Location / Ward / Area:			Working hours:		
Date of Assessment:			Review date:		
Individuals underlying health condition category / other factors:	Please tick appropriate box:	<input checked="" type="checkbox"/>	Current post involves:	Please tick appropriate box:	<input checked="" type="checkbox"/>
	Notified as on 12 week <b>Shielding</b> (very high risk group)	<input type="checkbox"/>		Directly caring for Covid-19 patients (tested as positive) and undertakes Aerosol generating procedures (AGPs)	<input type="checkbox"/>
	<b>Vulnerable</b> – over 70 or underlying health condition as per PHE list	<input type="checkbox"/>		Directly caring for Covid-19 patients (tested as positive) – not undertaking AGPs	<input type="checkbox"/>
	<b>Pregnant</b>	<input type="checkbox"/>		Directly caring for patients not tested / unknown Covid-19 status but within 2 meters of patient – within any setting	<input type="checkbox"/>
	<b>BAME</b> - colleague or family / household members	<input type="checkbox"/>		Providing a service to other colleagues with the care setting (e.g. cleaning, estates, IT)	<input type="checkbox"/>
	<b>Concerns re impact on mental wellbeing</b>	<input type="checkbox"/>		Providing a service to colleagues but not directly in the care setting (e.g. training)	<input type="checkbox"/>
	<b>Other specific concerns e.g. caring for vulnerable relative</b>	<input type="checkbox"/>			<input type="checkbox"/>

What are you already doing?		
Aspects	Current Position	Additional action to reduce risk
Can <i>this</i> work be done at home? Please refer to <a href="#">employer guidance</a> for more information		
Could <i>alternative</i> work be undertaken at home or		

What are you already doing?		
Aspects	Current Position	Additional action to reduce risk
elsewhere in the Trust? e.g. <i>review of serious incident, audit</i>		
Can face to face interactions be limited?		
Has the individual had any sickness in the past linked to their health condition?		
What arrangements are you going to put in place to ensure regular contact / wellbeing?		
Other considerations:		

Assessment			
<i>Please tick appropriate box:</i>	<input checked="" type="checkbox"/>	Monitoring / further action:	
Actions agreed as detailed above reduce the risks to the colleague	<input type="checkbox"/>	Local manager to review and monitor.	
Actions agreed as detailed above do not fully reduce the risks to the colleague / some concerns remain.	<input type="checkbox"/>	Contact the People Team for further advice and support	
Additional notes			
<i>Please add any additional notes as appropriate / following discussion with People Team:</i>			
Individual's signature		Date signed	
Print Name			
Manager's signature		Managers job title	
Print Name			