

Protecting our BAME colleagues

A UK level inquiry has been launched to understand why people from BAME backgrounds appear to be disproportionately affected by coronavirus. There is as yet no UK or local guidance on whether BAME staff are vulnerable to more severe COVID-19. At present we are presuming there is vulnerability because of data observed. This is a precautionary step.

With COVID-19 in general, age is an important factor along with gender and other health factors which are already part of our risk assessment and Occupational Health advice. Our current Occupational Health approach to BAME is that a careful assessment of risk should be undertaken by the line manager, liaising with Occupational Health, as necessary. This a multifactorial process to ensure all risk factors are mitigated through correct Infection Control practices including PPE and stringent social distancing.

Generally any solitary vulnerability is not necessarily a reason to come completely out of work but is an important flag to check stringently that all recommended safety precautions are in place. If it is practicable to redeploy employees around, then a manager could move these staff members to a non COVID-19 patient / client facing area if they so wish. If a BAME individual has any other COVID-19 associated health risks, this would be a reason to consider more stringent social distancing and avoidance of COVID19-facing work and a risk assessment should be discussed with Occupational Health. If any BAME staff member is experiencing high anxiety in light of the higher rate of deaths in BAME staff reported elsewhere, Occupational Health advice and support can be sought, and redeployment away from COVID -19 patient/client facing work should be supported by the employer if advised.

What should I as a manager do to protect my BAME colleagues?

- Engage with your BAME staff and discuss any concerns and issues as part of our duty of care in relation to their health and safety at work.

Whilst important for all staff, managers should pay particular attention to reinforce the following for BAME staff:

- Ensure that social distancing is being observed wherever it is practicable to do so.
- Review PPE use to ensure availability, fit, correct donning and doffing etc.
- Ensure that all BAME staff have had a risk assessment for underlying health issues, liaising with Occupational Health if underlying health issues have been declared. BAME staff with underlying health issues may need to stringently social distance, and this may mean avoiding all patient/client-facing roles. Managers should support employees to do this, including working from home, if advised by [risk assessment](#).
- Ensure that BAME staff are aware of the actions to take if they feel unwell with COVID symptoms. Click [here](#) for more information.
- Ensure staff know about testing arrangements and or testing particularly during first 5 days of symptoms appearing. Click [here](#) for more information.
- BAME staff should be reassured that COVID-19 related absence (e.g. self- isolation for symptoms, isolation as a household member, isolation in relation to shielding) is supported by the HSC and will not impact negatively on their pay or career progression.
- Ensure that staff are aware that [psychological support](#) is available for any staff member concerned about their vulnerability to COVID-19.

If I, as a BAME member of staff, have concerns, what should I do?

If you, as a BAME colleague, are concerned about your health and safety at work due to COVID-19, you should discuss these concerns with your line manager or your Occupational Health Team. We strongly encourage all BAME staff with underlying health conditions to come forward to their line manager to be risk assessed.