

# Position Statement on Risks of Health Care Workers contracting COVID-19 as part of their contact with patients.

The COVID-19 Pandemic has had a major effect on the way health care is delivered in the United Kingdom. This has meant that Health Care Workers have worked in different ways which may expose and increase their risk of contracting COVID-19. Reports have suggested that those in specialities such as Oral and Maxillo-Facial Surgery, Ear Nose and Throat and Respiratory Medicine may be at increased risk.

We consider that staff should be protected while at work to allow them to provide care to those who need their help. It is vital that their wellbeing is maintained in the safest environment.

Sir Simon Stevens, Chief Executive of NHS England wrote on the 29th April 2020 to NHS Trusts noting that NHS trusts should risk assess those employees who may have an increased chance of contracting the diseases namely, older people, pregnant women, returnees who have retired and those with underlying health conditions. Adjustments to working conditions including lower risk areas or remote working were recommended. The whole workforce should be considered.

In addition, Sir Simon noted that Black, Asian and Ethnic Minority (BAME) employees and patients may be at greater risk. Public Health England had been asked by the Department of Health and Social Care to investigate. He recommended risk assessment at a higher level to protect these individual workers.

**“All Staff should be able to raise any concerns safely”.**

The Health Service Journal has recently published an analysis of 119 deaths of UK NHS staff from COVID-19. This involved deaths up to 12 April. The number of deaths in health care worker was 0.51-0.58% of total UK deaths. The majority were in Nurses, Health Care Supporter Workers and Doctors. Of these, BAME staff were over-represented in relation to the proportion of the workforce. In relation to the doctors and dentist who died 94% were male and 94% BAME (n=19). It is of note that none of these individuals were in the highest risk groups such as intensivists or anaesthetists.

There may be many reasons for these observations which has been reported elsewhere. This includes genetic background, increased co-morbidities or different work patterns (including provision and grade of Personal protective equipment).

We therefore welcome the Department of Health and Social Care's decision to urgently investigate this further. We consider it important to look at the whole of the United Kingdom health workforce.

BAME individuals play an important part in supporting and providing our NHS wherever they work in the NHS. While every death in active service is important and regrettable, if these individuals are disproportionately affected specific steps to protect them may be necessary.

If PPE provision is important in prevention of deaths then urgent action to provide this adequately in all at risk settings is vital.

**Richard Hull**, Honorary Secretary, Royal College of Physicians and Surgeons of Glasgow

22 April 2020

## References

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