Wales First Minister's Covid-19 Advisory Group – Health Impact on Black, Asian and Minority Ethnic (BAME) People: Draft Terms of Reference

The Welsh Government is concerned that people from Black, Asian and Minority Ethnic (BAME) backgrounds appear to be disproportionately impacted by COVID-19, with consequent adverse health outcomes.

A group has been convened to advise the First Minister and his Cabinet on this matter. The group will work with stakeholders representing BAME communities, expert advisers from within Wales and across UK (especially Public Health England) together with international colleagues to share information and approaches to consider and address this issue.

Aims of the Group

The Group will advise on:

- Any effective measures that could be put in place to quantify and evaluate risks;
- Any avoidable harms and effective risk assessment measures;
- Possible interventions and system remedies; and
- Any other issues required by Ministers

Membership:

- The Group will include representation from Welsh Government Officials, BAME NHS and care workers, Public Health Wales (PHW), NHS Wales Health Boards and Trusts, drawing in expertise from those involved with data collection and analysis, workforce management, occupational health, quality and safety, academic, and any other additional expertise as required;
- The Group will meet by virtual means and report weekly to Ministers during the Covid crisis period;
- Membership and agreed advice will be published;
- Sub-groups may be established drawing in additional expertise for specific tasks, to report back into the main group; and
- The group will seek input from wider organisations and BAME communities and contributors may be invited to present to the group.

Objectives and work plan:

1. **Data evaluation**
   Key questions: What is the size and nature of any additional risk of Covid to BAME people, and is there avoidable harm?
- To understand differences in numbers and rates of tests between ethnic groups by interrogating data on Covid and ethnicity from all available sources including PHW, Secure Anonymised Information Linkage (SAIL) Databank, Patient Episode Database for Wales (PEDW) , electronic staff record (ESR), Intensive Care National Audit & Research Centre (ICNARC), Office of National Statistics (ONS) and WCCP and lab confirmed cases;
- To understand differences in hospitalisation between ethnic groups using enhanced surveillance systems to calculate numbers and rates of hospital admissions, intensive care unit/ high dependency unit admission, and other outcomes; and
- To understand differences in mortality among between ethnic groups using lab confirmed cases, mortality data , SAIL comorbidity data and further analysis

2. **Workforce and employment measures**

Key questions: Should any additional health and safety at work measures be in place for BAME people and how should risks be assessed?

- Assess exposure rates using ethnicity denominator data in NHS employees using workforce employment Service Record (ESR) data;
- Review the risk assessment process and advice for health and social care employees, with special attention to the presence of comorbidities which might impact on Covid risk;
- Review Personal Protective Equipment advice for at risk groups and any mechanism to address concern about non-availability; and
- Review ethnicity measures in death notification protocol and RIDDOR reporting

3. **Community and public health measures**
   Key questions: Are there any additional public health measures or interventions that would reduce any disproportionate impact of Covid on BAME communities?

- Review the potential need for dietary or other health advice to minimise Covid risk in BAME communities;
- Review the accessibility of advice and guidance on social distancing and any practical challenges of achieving it in BAME communities;
- Work with BAME representative groups to minimise removing any language, cultural or other barriers to effective dissemination and understanding of public health messages among BAME groups; and
- Advise on other possible socio-economic factors and determinants which may influence poorer Covid-19 outcomes in BAME groups, including cultural factors, unconscious bias, age, gender, literacy, and suggest options to reverse any inequalities

4. **Ongoing research and evaluation to inform evidence and recommendations**
   Key questions: What are the unanswered questions about Covid and BAME communities, and what data or studies do we need to answer them?

- Consider and respond to emerging PHE research questions, methodology and findings on BAME and Covid;
- Comment on emerging evidence and advise on options regarding appropriate additional measures and safeguards for BAME individuals in Wales; and
- Identify and harness UK wide and international research that could be of benefit to BAME communities in Wales

BAME Covid-19 Scientific Subgroup – Risk Assessment

Terms of Reference

Co-chairs: Professor Keshav Singhal MBE, Chair BAPIO Wales

Helen Arthur, Director of Workforce and Corporate Business

Aim of the Sub Group:

- A scientific group convened to consider the evolving evidence in order to make recommendations to the First Minister's COVID-19 BAME Advisory Group:
  - Workplace risk assessment for frontline health and social care workers in Wales;
  - Suggest practical steps to mitigate the risk for the staff identified as vulnerable; and
  - Consider the evolving evidence and implications for the wider community.
- To report recommendations to Dr Andrew Goodall CBE, NHS Wales Chief Executive, Chief Medical Officer, Chief Nursing Officer and Albert Heaney, Director of Social Services and Integration, during the Covid crisis.

Membership:

- The membership of the Subgroup is provided at Annexe 1.

- The Group will meet by virtual means and report weekly to the Covid-19 BAME Advisory Group during the Covid crisis period.

- Agreed advice or recommendations will be submitted to Andrew Goodall, NHS Wales Chief Executive & be published.

Deliverables

- Recommend appropriate precautionary principles for use by NHS and Social Care employers in Wales, in consultation with WG, employers and unions.

- Recommend a workplace Risk Assessment tool for staff with co-morbidities and encourage BAME colleagues to utilise this route, to promote best practice in health and safety at work.

- Consider approaches under consideration in the other UK countries and recommend any additional interventions to protect against Covid, including implications for workforce and safe, effective PPE usage.

- Recommend ongoing data collection and further analysis to monitor progress and outcomes and learn lessons for the future.

Annexe 1: Membership of BAME Covid-19 Scientific Subgroup

Name	Organisation
Prof Keshav Singhal, MBE FLSW MS(orth) FRCS M.Ch(orth) *Consultant Orthopaedic Surgeon CTMUHB*	BAPIO(Wales)
NR *Clinical Scientist (Epidemiology)*	Public Health Communicable Disease Surveillance Centre
Ronan Lyons *Clinical Professor of Public Health*	Swansea University
Dr Marysia Hamilton-Kirkwood *Assistant Medical Director Public Health*	Aneurin Bevan University Health Board
Ceri Harris *Equality lead*	Velindre NHS Trust
Dr Kofi Obubie *Consultant endocrinologist*	Aneurin Bevan University Health Board
Professor Meena Upadhyaya *Consultant in genetics*	Cardiff University
Prof Iqbal Singh *Consultant Physician*	Chair Centre of Excellence for Safety in Older People
Jack Parry Jones *Consultant in Intensive Care*	University Hospital Wales
Dr Has Shah BEM *General Practitioner*	Secretary BAPIO Wales
Dr Andrew Feyi-Waboso	
Helen Arthur *Director of Corporate Business & Workforce*	Welsh Government
Dr Heather Payne *Senior Medical Officer for Maternal & Child Health*	Welsh Government
NR *Specialist Policy Adviser on Equalities*	Welsh Government
Gemma Nye *HSS – Workforce & OD*	Welsh Government
NR *HSS – Workforce & OD*	Welsh Government
NR *HSS – Senior Governance and Equality Manager*	Welsh Government

Socio-economic and Social Impacts of Covid-19 in BAME populations sub-group

Co-chairs: Professor Emmanuel Ogbonna, + WG or PHW lead

Purpose:

To advise on socio-economic factors and wider social determinants influencing Covid-19 Health outcomes in BAME people

Deliverables:

1. Identification of key sociodemographic, geographic, socioeconomic or cultural factors that may be contributing in the short term to disproportionately adverse outcomes from COVID in BAME communities.
2. Propose short term options to minimise any exacerbation of inequalities identified.
3. Review the accessibility of current Public Health advice and guidance to combat Covid, such as social distancing, and comment on any practical challenges of achieving it among BAME communities.
4. Identify any language, format, cultural or other barriers to effective dissemination and understanding among BAME and diverse communities, and recommend remedies.
5. Recommend potential research questions for a medium and longer term analysis of factors influencing Covid outcomes in BAME communities, including culture, age, faith, gender, disability and other individual factors, as well as the potential role of systemic factors such as racism or unconscious bias.