

Wales TUC, WTUC Pan Equality Committee Members and Union Equalities Officers

Equalities impact of Covid-19 COVID 19 Meeting

14.00 p.m. Tuesday 21 April 2020 via Video Link

Attendees

Wales TUC <div>Name Redacted</div> <div>Shavanah Taj</div> <div>Name Redacted</div>	Welsh Government Jane Hutt Alyson Francis <div>Name Redacted</div> <div>Kate Edmunds</div>
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Welcome and purpose of the meeting

1.

NR

 Chair, thanked the Deputy Minister & Chief Whip (DMCW) for agreeing to attend the meeting during such a busy period. The DMCW welcomed the opportunity to thank all those attending for the way they were managing through the crisis, and said that her responsibilities for Equality, the Third Sector and Domestic Violence were at the forefront of the issues and impacts being identified as a result of the current situation.
2. The DMCW had earlier attended the Women's Equality Network (WEN) Wales launch of the Feminist Scorecard 2020 and a number of concerns had been raised, including in relation to workforce, social care, unpaid care, childcare, refugees and asylum seekers, and deepening inequalities for gender and BAME communities.

3. The DMCW explained that this was an opportunity for those present to ask questions and to provide evidence about what was happening on the ground, and to inform longer-term policies to prevent further deepening of inequalities post Covid 19. Similar meetings were being held with all the Equality forums for the same purpose.
4. A paper collated by Wales TUC had been circulated prior to the meeting outlining the main issues and concerns, which would be the substantive agenda item for discussion.
5. The TUC had identified early on that it was important to have an independent platform for the workforce to raise their concerns and so had set up a whistleblowing website for employees, whether union members or not, to raise their concerns.
6. The largest number of initial complaints came from the construction industry and call centres. More recently complaints were being received from the food manufacturing and retail sectors, which employed large numbers of women and BAME workers.
7. There was also anxiety from teaching unions about easing lockdown and the potential for schools to reopen at an early stage resulting in health & safety risks for teachers and staff, as well as pupils. The DMCW said that no decisions had yet been taken on this.
8. Another area causing severe anxiety was redeployment of Local Authority staff into NHS/hospital settings. Many employees were living within extended families, some of whom were shielding. Redeployed staff have no access to separate accommodation, as this was only being provided to frontline staff and those with children were not entitled to access to school settings.
9. Other complaints were about PPE provision, the large percentage of BAME cases and deaths, testing and housing.
10. The DMCW committed to sharing the paper and the issues raised during discussion with her Cabinet colleagues. It was important to keep equalities and human rights to the forefront. The DMCW also suggested that an assessment should be made in the near future of how points from the meeting had been taken forward and she agreed with WTUC that regular meetings would be useful during this crisis period.

Action 1: Deputy Minister and Chief Whip to share TUC paper and meeting notes with Cabinet colleagues.

Action 2: Equality officials to arrange follow up & regular meetings.

Agenda item 1: Discussion on TUC paper - Equality Impact of Covid-19

11. Pregnancy & Maternity

- a. Care settings outside local government and within the private sector were being identified as health & safety risks as no PPE was being provided. Staff were resorting to purchasing their own PPE, leading to possible financial impacts.
- b. Women were being asked to start maternity leave early, and claim statutory maternity pay, described by the union as discriminatory.

Action 11a & 11b: A call was made for better guidance on precautionary measures to protect health and well-being of pregnant women for private and third sector employers.

- c. Concerns were raised about PHW guidance about which pregnant women should be shielded eg. those with other health concerns, which can appear contradictory to workplace health and safety regulations. It's causing issues for individuals and employers, who believe the latest PHW guidance overrides the regulations.

Action 11c: Clarity over the relationship between the Regulations and PHW guidance should be sought.

12. Gender

- a. PHW data shows that proportionately more women are employed on the frontline against coronavirus. It would also be useful to have data disaggregated by other factors like ethnicity, and by sector.

Action 12a: Enquire whether PHW or other data can be disaggregated.

- b. PPE – not fitting women, uncomfortable and hot. Regular breaks are needed to counter this but these are taken ad hoc and no guidance has been provided.
- c. PPE – concerns about the quality, women are resorting to makeshift alternatives which have received no medical testing.
- d. The substantial increase in cases of domestic abuse was referred to, with women being in lockdown with their abusers. The DMCW said that a letter had been issued on 9 April to all AMs, Police, Health Boards, and those working within this sector about available funding for refuges, furniture, equipment and PPE to cope with lockdown, self-isolation and social distancing. Live Fear Free was providing a critical service and that victims should also contact the police via 999 if they were in danger. Pharmacists, supermarkets and volunteers were being asked to be more aware of the issue, and a public awareness campaign, learning from survivors, was planned.

13. Parents and Carers

- a. Unavailability of respite was adversely affecting mental health and well-being. The DMCW reported that she was working with the Deputy Minister for Health & Social Services (DMHSS) on this and would be meeting this week to discuss caring and childcare issues.
- b. Parents eligible for furlough and who were struggling with caring responsibilities were being offered changes to shift patterns or leave by employers instead.

Action 13b: This point to be taken up with the UK Government

- c. Women in the care sector working beyond their terms and conditions and job descriptions should be rewarded accordingly, both financially and in terms of recognition of skills developed.

14. BAME

- a. Concern that a high percentage of doctors who have died have been BAME individuals, and it was asked if data could be supplied in live time and aggregated by ethnicity. It was felt the focus on genetic, hereditary, and medical factors which should be balanced by an equal focus on socio-economic and cultural factors and access to services.
- b. Concerns raised via the whistleblowing site were suggesting that BAME people, especially LTBTQ+, were more vulnerable to unemployment and homelessness.
- c. Taxi drivers, many of whom are BAME, tend to be self-employed and have no access to government support until June. An additional issue was that Local Authority taxi licence fees were being increased at this already difficult time.

Action 14c: WG to look into this issue

- d. School closures are having a disproportionate impact on BAME pupils; lack of internet access, a high proportion of free school meals eligibility and the use of predicted grades due to the cancellation of exams can all add to this impact.
- e. Form based services can be problematic for BAME service users, as is the language used. The use of various languages would be more helpful.
- f. A commitment that NHS digital data would not be shared with the Home Office was requested. Members expressed concerns that patient data was being shared which lead to detention and deportation of individuals.

Action 14f: Officials to seek an assurance that sharing data with the Home Office to lead to detention was not the case in Wales.

15. LGBT

- a. LGBT people are suffering domestic abuse as a result of lockdown, having to live with their abusers, homophobic family members or housemates.
- b. Concerns about LGBT individuals accessing healthcare – they are often subject to discrimination, particularly transgender individuals.
- c. LGBT people in rural communities are feeling particularly isolated while being in self-isolation.

Action 15c: NR will circulate details of a Llanelli support group which is an example of good practice

16. Disability

- a. Disabled union members were upset and frightened by the use of “do not resuscitate” instructions.
- b. There was a lack of understanding of the Social Model of Disability in some sectors. The DMCW assured that the Social Model of Disability was being applied to all WG Covid 19 decisions.
- c. The group were advised that a meeting of the Disability Equality Forum had been held in the previous week, with concerns raised about cuts to care packages. The DMCW asked for information on cases where care packages were affected.
- d. A Moral and Ethical Advisory Group had been established, with membership from Disability Wales and MENCAP. An ethical principles framework had been produced as a first action of this group.

17. In addition to the issues raised in the report on protected groups a number of additional issues and concerns were raised.

- e. Although outside the DMCW’s portfolio responsibilities, Education Unions reiterated their concerns about reopening of schools. Supply teachers were particularly vulnerable financially, with some eligible to access the furlough scheme, others not.
- f. There were considerable issues and concerns raised within the creative industries sector where many members are self-employed, and people, particularly those in the screen sector, are falling through cracks in the support mechanisms being put in place by government.
- g. It was reiterated that workplace practices needed clear guidance for employers, with equality being at the heart of all decision-making during the Covid-19 crisis. It was not something which could be left until a later point in time.

- h. The DMCW agreed that decisions should not only be made in a health context, but also in terms of Equality impacts and the Well-being of Future Generations Act. These are the tools in place but she called for strong union voices to support their use.

Action 17h: The TUC agreed to update their paper with additional comments raised during the discussion and circulate the update.

- i. In closing the meeting the DMCW thanked the TUC for the report, which strengthens the evidence base to help ensure that inequalities do not deepen at a time like this. It was agreed that engagement would continue, with Unions and WG working together to address the issues, both in terms of current actions and what can be done after easing of restrictions, within the framework of Fair Work and Social Partnership principles.

Actions list

Action 1: Deputy Minister and Chief Whip to share TUC paper and meeting notes with Cabinet colleagues.

Action 2: Equality officials to arrange follow up & regular meetings.

Action 11a & 11b: A call was made for better guidance on precautionary measures to protect health and well-being of pregnant women for private and third sector employers.

Action 11c: Clarity over the relationship between the Regulations and PHW guidance should be sought.

Action 12a: Enquire whether PHW or other data can be disaggregated.

Action 13b: This point to be taken up with the UK Government (employment)

Action 14c: WG to look into this issue (taxi licence fees)

Action 14f: Officials to seek an assurance that sharing data with the Home Office to lead to detention was not the case in Wales.

Action 15c: NR will circulate details of a Llanelli support group which is an example of good practice

Action 17h: The TUC agreed to update their paper with additional comments raised during the meeting and circulate the update.

