|  |  |
| --- | --- |
| **Healthcare Quality & Improvement Directorate**  Jason Leitch CBE**,** National Clinical Director  T: 0131-244 5176  E: jason.leitch@.gov.scot |  |

To: Local Authority Chief Executives

Integration Authority Chief Officers

Chief Social Work Officers

Social Care Provider Representative Organisations

**PUBLICATION OF COVID-19 OCCUPATIONAL RISK ASSESSMENT GUIDANCE**

1. I am writing to you to inform you that on 27 July, we published national occupational risk assessment guidance to help staff and managers consider the specific risk of COVID-19 in the workplace:

<https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-individual-risk-assessment-for-the-workplace/>

1. The guidance was developed using the latest clinical evidence and sets out best practice on risk assessment for COVID-19, with an easy to follow risk assessment tool. We will keep it under review, as we learn more about COVID-19 in Scotland.
2. This guidance replaces the ‘Guidance for health and social care and emergency services workers with underlying health conditions’, and the ‘Interim Guidance for health and social care employers on staff from Black, Asian and Minority Ethnic staff’.
3. Staff should be active participants in the risk assessment which uses factors including age, ethnicity, and BMI in addition to underlying health conditions to stratify risk. A union representative should also be involved in the risk assessment. Health Boards have welcomed the clarity the new risk assessment tool brings, as we now know that viewing medical conditions in isolation, does not accurately predict an individual’s vulnerability to COVID-19. We are therefore urging employers across all sectors to use this tool.

It is relevant to all staff, but will be particularly relevant to those staff members who are returning to work after shielding restrictions end on 31 July, those who are returning to normal duties after COVID-19 related restrictions, those who are returning to the workplace after working from home or anyone who has a concern about a particular vulnerability to COVID-19.

1. The tool is aimed with the individual in mind, to help them to understand their own individual risk factors. The guidance also highlights the responsibilities of the employer to minimise the risks in the workplace, make adjustments where possible, and refer to Occupational Health (OH) as appropriate.
2. For many staff there will be no change. However, for some this might mean a move from shielding to a return to work. It also goes without saying that appropriate hygiene and physical distancing measures should already be in place.

**Pregnant workers**

1. The position in relation to pregnant workers has not changed with this guidance. Information on pregnancy is outlined in the guidance and tool.

**Further information and support for staff**

1. I would ask that employers recognise that, for staff who are returning to work who have been shielding, or who are returning to normal duties after COVID-19 related restrictions, this will be a particularly anxious time.
2. Wellbeing support services are available for staff through the National Wellbeing Hub (<https://www.promis.scot/>) which signposts staff, unpaid carers, volunteers and their families to relevant services and provides a range of self-care and wellbeing resources designed to support the workforce as they respond to the impact of COVID-19. All health and social care workers can access mental health support through the national wellbeing helpline, open 24 hours a day, seven days a week. The number to call is 0800 111 4191.
3. I hope this letter is helpful in outlining the up-to-date position on risk assessments and I would ask you to please share the guidance and supporting tool with all social care employers, managers and members of your networks. It is critical at this time that we ensure the right conversations take place with our staff and that employers understand the new approach to risk assessment and what it means for them.

Yours sincerely



**PROFESSOR JASON LEITCH CBE**

National Clinical Director