

# Open Letter to Employers from Charity Coalition highlighting need for ongoing Covid safe measures for staff at higher risk

July 2021

Dear Employer

We would like to thank you, as an employer, for your work in supporting staff at higher risk of complications, severe illness and death from Covid-19 throughout the pandemic.

We publish this updated letter as we enter step 4 of the roadmap on July 19. The legal requirement for employers to protect their employees from risks, including Covid-19, and to follow the updated [working safely guidance](#) remains, and we are writing to highlight the ongoing importance of Covid-safe measures to those of your staff who may be at higher risk and, importantly, people who may have reduced protection from the vaccine.

As you will no doubt be aware, Covid case numbers are currently increasing and are predicted to increase further once infection control measures such as face coverings in public indoor areas are removed. We have heard from many people we support about their fears and we are very keen to work with employers to ensure that individuals are supported to continue in their employment, without increasing their risk from Covid-19.

## **Individuals who may have reduced protection from vaccination**

Although the vaccine rollout has been a great success, there is developing scientific evidence that the current Covid-19 vaccines may give less protection to certain individuals, particularly those with a weakened immune response due to a specific health condition or because they receive certain treatments. A recent survey found over two thirds (68%) of UK adults are not aware of this potential for reduced protection and we are doing all we can to increase awareness, so that affected individuals as well as the wider public can make properly informed decisions about managing risk. We ask you to take into account any potential reduced protection from the vaccine in individualised risk assessments and resulting adjustments for your staff.

There is no way currently to accurately measure the level of protection the vaccine has provided an individual, although people with underlying health conditions might choose to discuss their likely response to the vaccine with their doctor. We — as patient organisations — provide Covid-19 vaccine information on our websites, which we keep updated with the latest information, including on vaccine efficacy. We invite you to make maximum use of these resources, and to signpost them to your staff. We hope that these resources will be useful to you in underpinning joint decision making about working arrangements.

## **Keeping your workforce safe**

Many people living with health conditions have told us they are worried that their needs will be forgotten as the general population return to something more like normal life.

We are very keen to support you as employers so that people who remain more vulnerable to Covid-19 are reassured their continuing risks are acknowledged and addressed. There is useful guidance on supporting people who may be more at risk from Covid-19 within the wider [HSE guidance](#). HSE have reassured us that they are aware and understanding of the concerns of higher risk people returning to work and recommend that conversations continue between employer and their employees who are at higher risk about what steps they have taken. We highlight the following key points:

### Risk assessments

- Comprehensive and individualised [risk assessments](#), informed by medical advice where appropriate, which are monitored and adjusted in light of changes such as fluctuating local prevalence, new variants of concern and data about vaccine protection. Assessments for people with fluctuating long term conditions will also need review in response to changes in health or medication. The [Covid-age calculator](#) is a helpful tool for risk assessments that takes into account health conditions and other factors to estimate vulnerability.
- [Specialist risk tools](#) for specific conditions are available to clinicians to inform their medical advice on individual risk to employees, for example, the British Society of Gastroenterology risk grids for Inflammatory Bowel Disease and Liver and Renal Society risk grid for Kidney Disease.

### Safety best practice

- Emphasising to the [wider workforce](#) the importance of continuing to stringently apply Covid-19 safety measures and reminding them of the shared responsibility to reduce everyone's risk from Covid, particularly those most at risk.
- Supporting regular lateral flow testing for the virus to keep everyone protected.
- Ensuring [good ventilation](#) throughout the workplace.
- Considering continuing requirements for facemasks and measures to enable greater social distancing (eg limiting numbers) in more indoor areas.

### Reasonable adjustments

- Discussing and implementing reasonable adjustments such as flexible start times to avoid peak time travel on public transport, or moving away from public facing roles. Funding for adjustments may be available from [Access to Work](#) scheme, which will prioritise applications for clinically extremely vulnerable people.
- HSE guidance highlights working from home where possible as an important extra precaution for clinically extremely vulnerable people (who had previously been advised to shield) while the virus is spreading as it currently is, and there is [HSE advice](#) on taking every possible step to help them do so, including altering a role's responsibilities. You could also consider using the [Coronavirus Job Retention Scheme](#) to furlough any of your clinically extremely vulnerable workers who cannot work from home, which is available until September 2021.

People are keen to get back to their usual activities but to be safe while doing so. Individuals will have different views on what feels right for them, and some of your staff may have very legitimate concerns about their own ongoing risks from Covid-19. We hope this will be discussed during the risk assessment process and have significant bearing on decision making.

## **Mental wellbeing support**

We would also like to underline the potential mental health needs of staff at higher risk. Living with the threat of serious illness or death should they contract Covid-19 and in many cases shielding for a year has placed a huge toll on the mental health of individuals more at risk from the virus. Our websites provide links to support for people affected by long term conditions and once again we encourage you to signpost your staff to these as relevant; they are included at the bottom of the letter.

We recognise the huge amount of work done by employers throughout the pandemic and would like to thank you again for the ongoing support made available to vulnerable staff and their families.

As we move on to the next stage of the pandemic we are ready and willing to provide any support, guidance and information that may be helpful as you continue to support your workforce through what has been an extraordinarily challenging time.

Yours faithfully,

Catherine Woodhead, Chief Executive Officer, Muscular Dystrophy UK  
Charlotte Augst, Chief Executive, National Voices  
Chris Askew, Chief Executive, Diabetes UK  
Clare Jacklin, Chief Executive, National Rheumatoid Arthritis Society  
David Ramsden, Chief Executive, Cystic Fibrosis Trust  
Ellen Miller, Chief Executive Officer, Versus Arthritis  
Georgina Carr, Chief Executive, The Neurological Alliance  
Gemma Peters, Chief Executive, Blood Cancer UK  
Genevieve Edwards, Chief Executive Officer, Bowel Cancer UK  
Henny Braund, Chief Executive, Anthony Nolan  
John Mills, Chair, Vasculitis UK  
Kim Chaplain, Associate Director for Work at the Centre for Ageing Better  
Nick Moberly, Chief Executive, MS Society  
Paul Bristow, Chief Executive, Kidney Care UK  
Paul Howard, Chief Executive, Lupus UK  
Peter Tichbon, Executive Chairperson, SarcoidosisUK  
Sandra Currie, Chief Executive, Kidney Research UK  
Sarah Sleet, Chief Executive, Crohn's & Colitis UK  
Sue Brown, Chief Executive, Arthritis and Musculoskeletal Alliance  
Sue Farrington, Chief Executive, Scleroderma and Raynaud's UK  
Dr Susan Walsh, Chief Executive, Immunodeficiency UK  
Zack Pemberton-Whiteley, Chief Executive, Leukaemia Care

## **Covid-19 information:**

### **Anthony Nolan**

<https://www.anthonynolan.org/patients-and-families/understanding-stem-cell-transplants/coronavirus-covid-19-and-your-stem-cell>

### **Arthritis and Musculoskeletal Alliance**

[arma.uk.net/covid-19-coronavirus-info/](http://arma.uk.net/covid-19-coronavirus-info/)

### **Blood Cancer UK**

[bloodcancer.org.uk/support-for-you/coronavirus-covid-19/](https://bloodcancer.org.uk/support-for-you/coronavirus-covid-19/)

**Bowel Cancer UK**

[bowelcanceruk.org.uk/news-and-blogs/coronavirus-faqs/](https://bowelcanceruk.org.uk/news-and-blogs/coronavirus-faqs/)

**Crohn's and Colitis UK**

[crohnsandcolitis.org.uk/support/coronavirus](https://crohnsandcolitis.org.uk/support/coronavirus)

[noteverydisabilityisvisible.org.uk/](https://noteverydisabilityisvisible.org.uk/)

**Cystic Fibrosis UK**

<https://www.cysticfibrosis.org.uk/life-with-cystic-fibrosis/coronavirus/financial-support-and-welfare-advice#Work>

**Diabetes UK**

[diabetes.org.uk/about\\_us/news/coronavirus](https://diabetes.org.uk/about_us/news/coronavirus)

**Immunodeficiency UK**

[www.immunodeficiencyuk.org](https://www.immunodeficiencyuk.org)

[immunodeficiencyuk.org/livingwithimmunodeficiency/affectedadultswithpids/helpingpeoplereturntoworkaftershielding](https://immunodeficiencyuk.org/livingwithimmunodeficiency/affectedadultswithpids/helpingpeoplereturntoworkaftershielding)

**Kidney Care UK**

[www.kidneycareuk.org/coronavirus](https://www.kidneycareuk.org/coronavirus)

**Kidney Research UK**

[www.kidneyresearchuk.org/kidney-health-information/coronavirus-and-kidney-disease](https://www.kidneyresearchuk.org/kidney-health-information/coronavirus-and-kidney-disease)

**Lupus UK**

[Lupusuk.org.uk/coronavirus/](https://Lupusuk.org.uk/coronavirus/)

**MS Society**

[mssociety.org.uk/care-and-support/ms-and-coronavirus-care-and-support](https://mssociety.org.uk/care-and-support/ms-and-coronavirus-care-and-support)

**Muscular Dystrophy UK**

[muscular dystrophyuk.org/get-the-right-care-and-support/coronavirus-information-and-advice-for-people-with-muscle-wasting-conditions/](https://muscular dystrophyuk.org/get-the-right-care-and-support/coronavirus-information-and-advice-for-people-with-muscle-wasting-conditions/)

**National Rheumatoid Arthritis Society**

[nras.org.uk/information-support/information/coronavirus-and-ra/](https://nras.org.uk/information-support/information/coronavirus-and-ra/)

[www.nras.org.uk/resource/work/](https://www.nras.org.uk/resource/work/)

**SarcoidosisUK**

<https://www.sarcoidosisuk.org/coronavirus>

**Scleroderma and Raynaud's UK**

[srुक.co.uk/find-support/coronavirus/](https://srुक.co.uk/find-support/coronavirus/)

**Versus Arthritis**

[www.versusarthritis.org/covid-19-updates/covid-19-employment-and-work-information/](https://www.versusarthritis.org/covid-19-updates/covid-19-employment-and-work-information/)

**Vasculitis UK**

[vasculitis.org.uk/news/coronavirus-covid-19](https://vasculitis.org.uk/news/coronavirus-covid-19)