

COVID risk calculator aims to help keep **BAME** healthcare workers safer

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A newly-developed tool to help workers and employees calculate the biological risk of an individual's exposure to COVID-19 aims to help keep healthcare workers safer from all backgrounds, and with a particular emphasis on ethnic minority groups.

The resource has already been adopted by <u>the British Medical</u> <u>Association</u> (BMA).

The <u>tool</u> was developed by a multidisciplinary team, led by Dr. David Strain at the University of Exeter Medical School and co-chair of the BMA Medical Academic Staff Committee, bringing in experts from the BMA Public Health Medicine Committee and Consultants Committee, the Faculty of Public Health, Primary Care and Commissioners. It was created amid evidence that healthcare workers are particularly vulnerable to developing severe or fatal COVID-19, and people from BAME backgrounds at particularly high risk.

In England, whereas 44 percent of medical staff are from BAME (Black, Asian and Minority Ethnic) backgrounds, nearly 94 percent of the doctors who have so far died of COVID-19 and similarly disproportionately higher rates of other <u>health</u> care workers are of BAME heritage. The use of a tool that can identify those at highest biological risk and attempt to mitigate this risk can potentially save lives.

Among those to have used it is Dr. Anil Jain, a Consultant Radiologist who is now working from his home in Manchester after the calculator



revealed his high-risk level. Dr. Jain is of Indian heritage, and 59-yearold. Dr. Jain has underlying health conditions which put him at very high. "The tool has been incredibly useful," said Dr. Jain. "I scored highly on completing it. That led to a conversation that has resulted in me working from home and shielding. It's a relief to feel safer, and to know my employer understands and supports that need."

Dr. Jain, a BMA Council and Equality, Diversity and Inclusion Advisory Group Member, said: "The impact of COVID-19 on BAME health and social care workers has been absolutely catastrophic. It makes absolute sense to have this robust risk assessment tool, which is essential in keeping people safe if they're at higher risk."

The tool is a response to calls from the Faculty of Occupational Medicine and Public Health England for "culturally competent" tools to evaluate risk. It incorporates the evidence from a report commissioned by NHS England regarding the impact of COVID-19 on black and ethnic minority communities. Already, it is being adopted in other settings too. The United Reformed Church will use it to safely bring volunteers and worshipers back into the physical congregation.

Dr. David Strain, Senior Lecturer at the University of Exeter Medical School, said: "We designed this COVID-19 risk calculator in response to an urgent need to identify <u>healthcare workers</u> at higher risk of developing a severe form of the virus, which could lead to complications or death. Healthcare workers are on the front line, and we know their exposure makes them particularly susceptible. Evidence shows that people from BAME backgrounds are among those at higher risk, and our tool aims to facilitate conversations to keep people safer, such as thinking about how roles are allocated. The tool could also be useful in other workplaces to help reduce risk."

The calculator uses a simple points-based system which helps define an



individual's risk of developing severe COVID-19 that could lead to death, or require intensive care treatment. The questionnaire takes into account aspects known to increase risk, such as being male, being from a BAME background, and having certain pre-existing health conditions. A point is added for each factor that increases risk, compared to the baseline population, and the higher the total points, the higher the person's risk. The tool is designed to aid conversations around the kind of duties a person should be assigned at work.

The risk assessment tool is freely available from the <u>British Medical</u> <u>Association</u> website.

Provided by University of Exeter

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