



### Supporting BAME Networks in the NHS

The Power of Staff Networks Consultancy are providing support and tools to help networks during these challenging times.

We recognise the additional demands on NHS staff will directly impact networks especially those representing BAME staff.

Below are some resources that we hope you and your members will find useful

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#### Keeping in touch:

- Online Platforms: Zoom? Google Hangouts? Skype? See our guide to online platforms available for networks so that they can keep in touch. **Download** our online guide now and start connecting with your members
- Nigerian Nurses Association holds bi-weekly webinars for all BAME NHS staff. It's a way of keeping in touch, hearing about different experiences and signposting to support services. To find out more, email: [wendy\\_olayiwola@hotmail.com](mailto:wendy_olayiwola@hotmail.com)
- Visit our **Networks Virtual Coffeeshop** to find details about webinars, articles, podcasts and other resources aimed at supporting networks during challenging times.
- Download our **C.OV.I.D top tips** for networks infographic
- Staff Networks: Their Power and Impact webinar hosted by IEDP <https://register.gotowebinar.com/register/3017250528361986574>

#### Employee Advocacy – Q&A:

- What do you say when your manager insists that you go on the ward/community without PPE?
- I am being redeployed. Do I have to do this new role?
- I've been self-isolating, I felt better so I returned to work. On arrival, I was told to work on a ward but wasn't tested for COVID19

See below for the answers to these questions and more

### Counselling and Advice:

- The Royal College of Nursing offers a confidential counselling service for members. More information can be found at: [www.rcn.org.uk/counselling](http://www.rcn.org.uk/counselling)
- [Employee Assistance](#) provide advice and counselling free online or over the phone. The service is paid for by your employer but it is entirely confidential. They are not able to see what you are browsing or what you talk to them about.

### Celebrating Networks – Wednesday 13<sup>th</sup> May

- All networks are invited to join the *online* celebrations for the **National Day for Staff Networks**. We have organised a full day of activity and will be with you from 8am right through to 5pm! It will be a time for all networks across the country to come together and share about the wonderful things networks are doing as well as hear great advice.
- Everything is free but you must register your place to receive the web meeting link. **REGISTER NOW**

### Ramadan: Guidance for Staff

NHS England have produced guidance to support staff observing Ramadan <https://people.nhs.uk/guides/covid-19-and-ramadan/>

### Networks Bingo

We have created our own Networks Bingo card to help identify how we can best support networks both and now and in the future. Download the card, and get your committee online to complete it, Then share your results with us.

Let us know which one's are missing and we will pull together resources to help plug those gaps.

[Download the Bingo card](#)

Remember...

**“KNOW YOUR WORTH. YOU ARE ADDING VALUE!”**

## Q&A Covid19

### Advice taken from various sources including Unison and NMC

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**I've been self-isolating, I felt better so I returned to work. On arrival, I was told to work on a ward but wasn't tested for COVID19. Should I be tested?**

Organisations will still continue to give priority to testing patients admitted to hospitals with possible COVID-19 symptoms and to ensuring staff working in critical care, emergency departments and ambulance services are able to work. For clarity, to meet the testing criteria you must either be:

An individual (adult or child) with COVID-19 symptoms living in the same household as a member of NHS staff or wider NHS family.

OR

A member of staff in the NHS family, with COVID-19 symptoms.

**Self Isolation and pay?** According to Unison:

**Pay for staff who need to self-isolate:** should receive full pay – this “must be interpreted as paying what the staff member would otherwise have earned” including any pay enhancements, and using usual processes for calculating this e.g. agreed reference period or other local agreed policy

**Bank workers:** should receive full pay for all pre-booked bank shifts that they would have worked. This applies to staff with substantive contracts and to Bank-only staff. On the first day of self-isolation trusts should refer to the booking system and arrange payment on the normal pay date for shifts booked. (NHS Professionals are following this approach). Alternatively, a ‘look-back approach’ using a reference period may be used.

**Agency workers:** earnings that substantive staff have from agency shifts will not be counted towards ‘full pay’ for self-isolation or sickness absence. Agencies are responsible for determining pay for any agency workers sick or self-isolating. Agencies have been advised that they must ensure staff they are offering to the NHS do not need to be self-isolating.

**Contractor staff:** Trusts should ensure that contractor staff who have to be physically present at an NHS facility to carry out their duties receive full pay while self-isolating. This may include staff groups involved in soft facilities management, hard facilities management

## What do you say when your manager insists that you go on the ward/ community without PPE?

As a minimum, your employer should provide a fluid-resistant surgical mask, gloves, apron and eye protection if you are working within one metre of patient or if there's any risk of splashing into the eyes. Eye/face protection can be achieved using any one of the following:

- surgical mask with integrated visor
- full face shield/visor
- polycarbonate safety spectacles or equivalent

If you are working in an **NHS high-risk unit**, or where patients require the use of **aerosol generating procedures**, you should be wearing a filtering face piece (class 3) (FFP3) respirator. Full face shields should be considered for higher-risk settings or procedures.

According to the Nursing and Midwifery council, if you have any concerns about the availability or use of PPE you **must raise these with your manager** as soon as possible, to make sure that they are aware of the issue and can take action to support you. You can also seek advice from your representative body or trade union.

If situations arise where suitable equipment is not available, difficult decisions may need to be made quickly about the safest and best course of action. The NMC Code states that to preserve safety you must take account of your own personal safety, the safety of others and the availability of other options for care. **So you shouldn't feel that when making decisions, you have to place yourself or others at risk, or that you need to make these decisions on your own.**

Factors to consider include:

- whether treatment can be delayed or provided differently (for example, remotely)
- the availability of different levels of PPE that may offer sufficient protection to you and others in particular care activities
- whether some members of the wider team are at a higher risk of infection than others
- whether different care and treatment decisions might be appropriate to minimise the risk of transmission in accordance with local and national advice
- Taking account of all the options available, what course of action is likely to result in the least harm in the circumstances, taking into account your own safety, the safety of others and the people in your care.

**My colleagues and I have been told by our employer that we will have to stay in a care home/care setting for a period of days/weeks. Are they allowed to make us do that?**

No. It would be a violation of your employment rights to force you to stay in a work setting against your will, outside of your contractual obligations. Workers may well need to work more flexibly during the period of the outbreak, but forcing workers to stay at work for days/weeks is completely unacceptable. If you are told by your employer to do this, contact your union rep/professional body immediately to get the matter raised with your employer.

**I am being redeployed. Do I have to do this?**

According to the Royal College of Nursing, the temporary movement of staff is a necessary part of business continuity for all health care areas, which enables the delivery of core essential services required by an increasing number of patients and/or to cover for expected/unexpected staff absence.

There is a general expectation within the NMC Code that nursing staff support in emergency situations within the bounds of their individual competence and providing the appropriate safeguards, including relevant personal protective equipment (PPE), are in place. However, if you are high risk, then a risk assessment should be conducted as a priority.

**What about Social Workers based in NHS Trusts?**

Most council offices are closed but are providing a virtual service where Social Workers are working from home. For example, care act assessments are being conducted over the phone. In the event of an emergency that a social worker has to visit a client /service user, then PPE must be provided.

**Our Network members have raised a number of concerns about PPE, well being, mental health and feeling guilty about not working due to self isolation. What can we do?**

Raise all concerns about PPE with your Trust. If your organisation doesn't have a PPE Safety Officer, speak to the relevant team dealing with PPE distribution.

For everything else, there are a range of options. Organise an online meeting via a media platform such as Zoom or Skype (see our guide) and reassure members that they should not feel guilty. This is a challenging time and we need to take care of ourselves. Signpost members to relevant support services and contact Power of Staff Networks, if you would like to have a Zoom call.