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via email

Dear Colleagues,

Thank you for your letter of 25 November 2021. As the issues you have raised are operational, executive colleagues have contributed to this response, including Professor Andrew Curran. I will address the issues you raise but I will start by acknowledging the enormous contribution workers in the NHS have made to our national response to the pandemic.

While COVID -19 is first and foremost a public health matter, there are relevant health and safety requirements, including under the Control of Substances Hazardous to Health Regulations 2002 as amended to protect workers who come into contact with COVID-19 either as a direct consequence of their work e.g., those who carry out research work on the virus, or else may be exposed in the course of their work e.g., healthcare workers caring for infectious patients.

All employers, including those in the NHS, are expected to assess the risks to their workers created by their work activity and to implement appropriate measures to control these risks. In making this assessment, employers are expected to use up to date and relevant guidance.

The Department of Health & Social Care (DHSC), working closely with UK Health Security Agency (UKHSA) and the devolved administrations (DAs) are the government experts in public health and infection control. These competent bodies lead the Government response including developing and publishing [Infection prevention and control for seasonal respiratory infections in health and care settings \(including SARS-CoV-2\) for winter 2021 to 2022 - GOV.UK \(www.gov.uk\)](#) which is agreed and applied across the four nations.

We will not be undertaking a review of this guidance as this has already been done by DHSC, UKHSA and the DAs. We will however continue to provide, on request,

DHSC and other government departments with information and advice on workplace and workforce issues to support the UK response to the pandemic.

You refer to statements emerging from the recent PROTECT COVID-19 conference on 18 November, as part of the PROTECT COVID-19 National Core Study led by Professor Andrew Curran, HSE's Chief Scientific Adviser. These statements need to be viewed as part of the developing evidence base, from both the PROTECT portfolio of projects, and the wider global research community. While this and other information generated through the work of the Study is available, its application and relevance to the IPC Guidance is, as already indicated, a matter for those responsible for the guidance. We will ensure they are aware of the developing picture.

As the independent workplace health and safety regulator, part of our role is to ensure employers are adequately controlling the risks to their workers in accordance with expected standards and guidance. Over the course of the pandemic, we carried out over 35 inspections at NHS Boards or Trusts assessing the management of COVID risk. Enforcement action was taken in areas such as risk assessment, management arrangements, social distancing, cleaning and hygiene, ventilation, and PPE. Further, we have investigated more than 600 concerns raised by workers and others about control of COVID-19 risks across the health and social care sector. Thirty such investigations resulted in inspectors taking enforcement action and c.150 of these concerns required the inspector to provide verbal advice to the employer to bring about improved risk control.

To ensure lessons are learned widely, we share our findings with all NHS trusts and health boards and with the tripartite Health, Safety and Wellbeing Partnership Group, a national sub-group of the NHS Staff Council, attended by NHS employers and our trade union colleagues, from the Royal College of Nursing, Unison and Unite.

I hope this assures you that HSE have inspected health and social care settings to assess management of COVID-19 risk and have taken proportionate enforcement action when necessary.


You indicate you are aware of specific NHS organisations not complying with their health and safety duties. I would encourage you to report your concerns to HSE here [Contact HSE - Reporting a health and safety issue](#)

We recognise the impact of work-related stress in many GB workplaces and that it is now the number one cause of employee sickness absence. We are now leading work with partners to call for a culture change across Britain's workplaces where recognising and responding to the signs of stress becomes as routine as managing workplace safety. HSE's 'Working Minds' campaign is designed to reach as many people as possible and to help businesses and workers to recognise stress and understand risk assessments. This will include sector specific messaging for the health and social care sector. The campaign brings together a range of tools and support to help businesses and workers understand the best ways to prevent work related stress and encourage good mental health and we would welcome any support from your organisations in helping us expand the impact of this work. Notably, the British Occupational Hygiene Society have been helping us promote the

'Working Minds' campaign in their social media posts and are intending to write about this important work in their December magazine.

I would like to take the opportunity to repeat that HSE fully recognises the incredible commitment and dedication of health and social care workers during these extremely challenging times. Their health and safety is and continues to be a priority for us.

Yours faithfully,



Sarah Newton
Chair, Health and Safety Executive

To:

Prof Raymond M. Agius, Deputy Chair Occupational Medicine Committee, and Council Member, British Medical Association
Rose Gallagher MBE, Professional Lead Infection Prevention and Control, Royal College of Nursing
4 Kevin Bampton, Chief Executive of the British Occupational Hygiene Society

Dr Christine Peters, Consultant Microbiologist FreshAirNHS

Dr Barry Jones, Chair of the Covid Airborne Protection Alliance (CAPA), which includes:

- ARTP - Association for Respiratory Technology & Physiology
- BAPEN – British Association for Parenteral and Enteral Nutrition
- BASP – British Association of Stroke Physicians
- BDA – British Dietetic Association
- BSG - British Society of Gastroenterology
- CBS - Confederation of British Surgery
- College of Paramedics • CSP – Chartered Society of Physiotherapy
- FreshAir NHS
- GMB Union
- HCSA - Hospital Consultants and Specialists Association
- Medical Supply Drive UK
- NNNG - National Nurses Nutrition Group
- QNI - Queen's Nursing Institute
- RCSLT – Royal College of Speech and Language Therapists
- Unite the Union
- Doctors Association UK
- Trident HS&E