**COVID-AGE INDIVIDUAL VULNERABILITY QUESTIONNAIRE**

**Information for candidates**

There is growing evidence that certain specific groups and characteristics make some individuals more vulnerable to COVID-19. The purpose of this health questionnaire is to only help and inform both the employee and their employment agency on how to identify those individuals with underlying conditions or have identified increased risk factor(s) that may put them at increased or extreme risk in the workplace.

**What is Covid-age?**

Covid-age is a tool to help assess an individual’s overall vulnerability to Covid-19. It is simple, it is evidence-based, and it allows us to summarise a range of risk factors into a

single figure: these factors include age, sex, and ethnicity, not just comorbidities. Covid-age does not provide an exact measure, so when it is used to calculate vulnerability from medical conditions, particularly multiple medical conditions, clinical judgement must also be used.

**Covid-age is intended as an occupational health tool to help assess fitness for work. It is not intended for use in clinical treatment pathways**.

The risk that someone will get the infection through work can be reduced through control measures that minimise workplace exposure and through use of personal protective equipment. People who are clinically extremely vulnerable are at high risk of getting seriously ill from coronavirus (COVID-19). If you considered clinically extremely vulnerable, should have received a letter advising you to shield or have been told by your GP or hospital clinician.

**Do you have a shielding letter, shielding condition or vulnerable condition?**

**Yes**  **No**

If you answered ‘yes’ to the above, you should adhere to the following guidance.

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

|  |  |
| --- | --- |
| **Candidate’s Name** |  |
| **Date of Birth** |  |
| **Job Title/ Speciality** |  |
| **Contact Telephone No.** |  |

|  |  |  |
| --- | --- | --- |
| **Sign** | **Print** | **Date** |
|  |  |  |

**VULNERABILITY FROM RISK FACTORS EXPRESSED AS EQUIVALENCE TO ADDED YEARS OF AGE**

|  |  |  |  |
| --- | --- | --- | --- |
| **COVID Risk Factor** |  | **Please tick box that applies** | **Equivalent added years of age**  **(*OH Use only)*** |
| **Gender** (*as assigned at birth*) | Male |  |  |
|  | Female\* |  |  |
| **Ethnicity** | Asian or Asian British |  |  |
|  | Black |  |  |
|  | Mixed |  |  |
|  | Other Non- White |  |  |
|  | White |  |  |
| **BMI** (Body Mass Index) | <30 |  |  |
|  | 30-34.9 |  |  |
|  | 35-39.9 |  |  |
|  | >40 |  |  |

|  |  |
| --- | --- |
| **COVID Age Without Co- morbidities** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **COVID RISK FACTOR** |  | **Please tick box if condition applies** | **Equivalent added years of age (*OH Use only)*** |
| **Hypertension** | (according to actual age) |  |  |
|  | Age 20-26 years |  |  |
|  | Age 27-33 years |  |  |
|  | Age 34-39 years |  |  |
|  | Age 40-44 years |  |  |
|  | Age 45-49 years |  |  |
|  | Age 50-54 years |  |  |
|  | Age 55-57 years |  |  |
|  | Age 58-61 years |  |  |
|  | Age 62-64 years |  |  |
|  | Age 65-67 years |  |  |
|  | Age 68-70 years |  |  |
|  | Age 71-72 years |  |  |
|  | Age ≥73 years |  |  |
| **Heart Failure** |  |  |  |
| **Other chronic heart disease** |  |  |  |
| **Cerebrovascular Disease** |  |  |  |
| **Asthma** | Mild  ((no requirement for oral corticosteroids in past year)) |  |  |
|  | Severe (requiring oral corticosteroids in past year) |  |  |
| **Chronic respiratory disease** | \*excluding asthma |  |  |
| **Diabetes (Type I)** | Controlled (HbA1c<58 mmol/mol in past 12 months) |  |  |
|  | Uncontrolled ( HbA1c≥58 mmol/mol in past 12 months) |  |  |
|  | HbA1c Unknown |  |  |
| **Diabetes (Type II and other)** | Controlled (HbA1c<58 mmol/mol in past 12 months) |  |  |
|  | Uncontrolled ( HbA1c≥58 mmol/mol in past 12 months) |  |  |
|  | HbA1c Unknown |  |  |
| **Chronic kidney disease** | Estimated GFR 30-60 mL/min |  |  |
|  | Estimated GFR < 30 mL/min |  |  |
|  | History of dialysis or end-stage renal failure |  |  |
| **Non-haematological cancer** | Diagnosed <1 year ago |  |  |
|  | Diagnosed 1-4.9 years ago |  |  |
|  | Diagnosed ≥5 years ago |  |  |
| **Haematological malignancy** | Diagnosed <1 year ago |  |  |
|  | Diagnosed 1-4.9 years ago |  |  |
|  | Diagnosed ≥5 years ago |  |  |
| **Liver disease** |  |  |  |
| **Chronic Neurological disease other than stroke or dementia** | Includes motor neurone disease, myasthenia gravis, multiple sclerosis, Parkinson’s disease, cerebral palsy, quadriplegia, hemiplegia and progressive cerebellar disease |  |  |
| **Organ transplant** |  |  |  |
| **Spleen diseases** | Includes splenectomy or spleen dysfunction |  |  |
| **Rheumatoid/**  **lupus/psoriasis** |  |  |  |
| **Other immunosuppressive condition‡** |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **COVID Age with Co- morbidities** | | | |  |
| **Are you pregnant?** | Yes |  | **Estimated Delivery date** |  | |
| No |  |

‡Includes HIV, conditions inducing permanent immunodeficiency (ever diagnosed), aplastic anaemia, and temporary immunodeficiency recorded within the past year.

**PREGNANCY**

**No current evidence of significantly increased risk to mother or baby unless mother has significant medical problems.**

**Please see below extract from Royal College of Obstetrics and Gynaecology**

**(**<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-09-10-occupational-health-statement-rcog-rcm-fom.pdf> **)**

***Clinical guidance:***

*The clinical evidence relating to the risks of coronavirus (COVID-19) infection and pregnancy is contained within the substantive Coronavirus (COVID-19) infection in pregnancy clinical guidance available on the RCOG website. It is important to note that:*

* *Pregnant women of any gestation are at no more risk of contracting the virus than any other non-pregnant person who is in similar health*

*• For those women who are 28 weeks pregnant and beyond, there is an increased risk of becoming severely ill should you contract COVID-19 (this is true of any viral illness contracted, such as flu).*

*Our clinical advice is that social distancing is particularly important for all pregnant women who are 28 weeks and beyond, in order to lessen their risk of contracting the virus. For women with other medical conditions in addition to pregnancy, this should be considered on an individual basis.*

*This clinical advice must be considered by your employer as part of your workplace risk assessment. The remaining factors involved in reaching a decision about your safety at work must be evaluated in an individualised risk assessment, conducted by your employer, that is individual to you and your employment setting. Employers are guided on this by sector specific advice published on the UK government Working safely during Coronavirus (COVID19) and NHS Employers websites. The RCOG is not able to comment or advise on these aspects as it is outside our area of expertise.*

*Employers have a responsibility to protect the health and safety of pregnant women who are working. This responsibility is laid out in the Management of Health and Safety at Work Regulations 1999. Under these regulations, employers are required to carry out risk assessments. If there are risks, your employer must take reasonable action to remove the risks by altering your working conditions or hours of work; by providing suitable alternative work on the same terms and conditions; or by suspending you on full pay (if there is no suitable alternative work*).

***Other Useful resources:***

Healthier Business UK- Candidates home page:

[**https://www.hbcompliance.co.uk/candidate-news/corona-virus-information-for-hcws/**](https://www.hbcompliance.co.uk/candidate-news/corona-virus-information-for-hcws/)

PPE considerations:

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe>

Asthma

<https://www.asthma.org.uk/advice/triggers/coronavirus-covid-19/shielding-advice-high-risk/>

Cancer and Covid-19

<https://www.cancerresearchuk.org/about-cancer/cancer-in-general/coronavirus-and-cancer>

Cardiovascular Conditions and COVID-19

<https://www.bhf.org.uk/informationsupport/heart-matters-magazine/news/coronavirus-and-your-health>

Diabetes and COVID-19

<https://www.diabetes.org.uk/about_us/news/coronavirus>

Haematological conditions and COVID-19

<https://news.wfh.org/specific-risks-of-covid-19-to-the-bleeding-disorders-community/>

Inflammatory Bowel Disease and COVID-19

<https://www.bsg.org.uk/covid-19-advice/bsg-advice-for-management-of-inflammatory-bowel-diseases-during-the-covid-19-pandemic/>

Neurological conditions and COVID-19

<https://alama.org.uk/covid-19-medical-risk-assessment/neurological-conditions-and-covid-19/>

Pituitary Disorders and COVID-19

<https://pituitary.org.uk/news/2020/03/coronavirus-advice/>

Renal Conditions and COVID-19

<https://www.kidneycareuk.org/news-and-campaigns/coronavirus-advice/>

Respiratory conditions and COVID- 19

<https://www.blf.org.uk/support-for-you/coronavirus/what-is-social-shielding>