



COVID-19

REGIME FOR THOSE IN ISOLATION

The Health Protection Scotland (HPS) Social or Community Care and Residential (SCCR) Guidance, which is applicable for prison settings, advise that any individuals in the facility who are displaying common symptoms of COVID-19 i.e. high temperature or fever and/or new continuous cough are advised to:

- to self-isolate for seven days from the start of the symptoms even if the symptoms are mild.

In addition, it is now recommended that all individuals living in the same household as a symptomatic person should self-isolate for 14 days (household isolation) and “stay at home.” Advice for people who are self-isolating and their households, can be found on NHS Inform.

Health Protection Scotland have advised the SPS that in order to limit the spread of transmission within a prison closed setting they should consider a prison cell a household and any advice which references a ‘household’ should be substituted as the individual’s cell for the purpose of the prison closed setting environment.

Symptomatic Person in Custody

Anyone in custody who is displaying signs/symptoms of COVID-19 must be held in isolation on Rule 41 for a minimum of 7 days or until they are asymptomatic. In line with HPS SCCR guidance for households where someone is symptomatic, the following general principles that prisons and individuals can follow to prevent the spread of respiratory viruses, including COVID-19 are:

- Wash hands regularly.
- Wash hands with soap and water before eating and drinking, and after coughing, sneezing or going to the toilet; or use alcohol-based hand rub (ABHR) where soap and water are not available.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Wherever possible, avoid direct contact with people that have a respiratory illness and avoid using their personal items, such as their mobile phone.
- Follow the “stay at home” guidance if you or someone in your household has symptoms of COVID-19.

- Cover your nose and mouth with a disposable tissue when sneezing, coughing, wiping or blowing your nose. Dispose of all used tissues promptly into a waste bin, then wash your hands. If facilities are not available, use alcohol-based hand rub (ABHR). If there are no tissues available, cough and sneeze into the crook of your elbow.

Social or community and residential facilities should:

- Ensure routine cleaning and disinfection is undertaken of frequently touched objects and surfaces (e.g. hand rails, tables, the arms of chairs, telephones, keyboards, door handles, desks and tables).
- Ensure regular and thorough environmental cleaning is done.
- Promote hand hygiene by making sure that all individuals including staff, contractors, and visitors have access to hand washing facilities and where available ABHR in prominent places, where it is safe to do so.
- Ensure any crockery and cutlery in shared kitchen areas is cleaned with warm water and general purpose detergent and dried thoroughly before being stored for re-use.
- Keep areas clutter-free and avoid leaving food stuffs exposed and open for communal sharing.
- Restrict sharing of personal devices (e.g. mobility devices, books and electronic gadgets) between individuals.

In order to operationalise this guidance, the SPS has introduced the following measures:

- Provide separate cutlery, crockery, towels, bedding
- Provide adequate cleaning products for cleaning their cell, sink and toilet area
- Provide all meals in cell
- No access to recreation
- Restricted access to communal phones – Where the individual requires to use the phone, they should be provided with a fluid repellent mask which they must wear while out of cell. The staff must be in full PPE (Fluid repellent mask, gloves, sleeveless apron and goggles). The phone must be cleaned before and after use, using the disinfectant wipes provided.
- Those who are symptomatic should not be given access to outside exercise under normal circumstances.
- Where someone has been in prolonged isolation and there are concerns regarding their mental wellbeing, a risk assessment should be completed in partnership with the local Health Protection Team, to consider limited access to outside exercise.

Sharing with or close contact with a Symptomatic Person / Confirmed case in Custody

Anyone in custody who is sharing a cell with someone who is displaying signs/symptoms of COVID-19 must be held in isolation on Rule 41 for a minimum of 14 days and the advice above must be followed.

In order to operationalise this guidance, the SPS has introduced the following measures:

- Provide separate cutlery, crockery, towels, bedding
- Provide adequate cleaning products for cleaning their cell, sink and toilet area
- Provide all meals in cell
- No access to recreation
- Restricted access to communal phones – Where the individual requires to use the phone, they should be provided with a fluid repellent mask which they must wear while out of cell. The staff must be in full PPE (Fluid repellent mask, gloves, sleeveless apron and goggles). The phone must be cleaned before and after use, using the disinfectant wipes provided.
- Those who have been in contact with someone who is symptomatic should not be given access to outside exercise under normal circumstances.
- Where someone has been in prolonged isolation and there are concerns regarding their mental wellbeing, a risk assessment should be completed in partnership with the local Health Protection Team, to consider limited access to outside exercise.

Anyone who is in isolation will continue to have access to health and care and prescribed medication. All cells have hot water so those in isolation are still able to wash on a daily basis.

There are mental health self-help leaflets available which should be issued to those who are isolating.

Where staff identify that someone may be struggling with their mental health, they should advise NHS Prison Healthcare.

These measures are in line with HPS guidance to prevent the spread of COVID-19 in prisons. HPS have identified prisons as a high risk area for the spread of COVID-19 due to large numbers of people living in close proximity. Stringent measures are required to prevent the spread of the disease among the prisoners and staff and, as with the community, reduce the pressures being placed on NHS facilities.

SHIELDING

Clinically extremely vulnerable people

People in custody who are clinically extremely vulnerable will be notified via a letter from the NHS telling them they are in this group.

Clinically extremely vulnerable people may include the following people.

1. Solid organ transplant recipients;
2. People with specific cancers:
 - people with cancer who are undergoing active chemotherapy
 - people with lung cancer who are undergoing radical radiotherapy
 - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - people having immunotherapy or other continuing antibody treatments for cancer
 - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary (COPD).
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as Severe combined immunodeficiency (SCID), homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.

On the advice of HPS, those who are shielding under this category will be:

- accommodated in a single cell;
- provided with all meals and medication in cell;
- given restricted access to communal showers;
- given restricted access to the communal phone; and
- given restricted access to outside exercise

The local NHS staff should plan and determine clinical care requirements for individuals on a case by case basis and record these via patient pathway processes.

Where someone is shielding because they are Clinically extremely vulnerable, the communal showers and telephones must be cleaned with disinfectant before and after use. Where possible, someone who is shielding because they are clinically extremely vulnerable should be offered an opportunity to take outside exercise 3 times a week. Only small numbers of prisoners should be out on exercise during this time and social distancing **MUST** be adhered to. The person shielding should wear a fluid repellent mask while out of cell.

Those with Underlying Health Conditions

Some people in custody may wish to shield due to an underlying health condition such as Diabetes or Asthma. These individuals are not considered clinically

extremely vulnerable but may still wish to restrict contact with others. Those who are in this category should be:

- accommodated in single cell accommodation, where possible;
- provided with all meals and medication in cell;
- given access to communal showers;
- given access to the communal phone; and
- given access to outside exercise

Where someone wishes to shield due to an underlying health condition, they should be offered outside exercise on a daily basis and social distancing should be adhered to at all times. Disinfectant wipes will be available to clean communal showers and phones before use.

Scottish Prison Service
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