COVID-19

Prisons and other prescribed places of detention guidance (PPD)

This guidance is correct at the time of publishing.
However as it is subject to changes, please ensure that the information at time of issue is accurate and correct.
Prisons and other prescribed places of detention guidance (COVID-19)
Updated 26 March 2020

What you need to know.

- any prisoner or detainee with a new, continuous cough or a high temperature should be placed in protective isolation for 14 days. Staff should then seek clinical advice on the patient’s behalf using the online assessment at [gov.im/covidtest](https://gov.im/covidtest) to determine whether a call needs to be made to the COVID 111 helpline. Testing can be done by the Prison Healthcare Lead, at the prison, if required. Prisoners or detainees must be isolated for 14 days from the onset of symptoms, regardless of whether the test result is positive or negative. Test results will be texted by COVID 111 to the Prison Healthcare Lead. If the test is positive, details will be passed to the Public Health Contact Tracing Service who will contact the Prison/Prescribed Place of Detention to arrange contact identification and follow up as appropriate.

- if a member of staff or visitor becomes unwell on site with a new, continuous cough or a high temperature, they should go home. They should be advised to seek clinical advice using the online assessment at [gov.im/covidtest](https://gov.im/covidtest) to determine whether they need to call the COVID 111 helpline. They must self-isolate for 14 days from the onset of symptoms, regardless of whether the test result is positive or negative. If the test is positive, details will be passed to the Public Health Contact Tracing Service so any contacts can be followed up and advised.

- staff, prisoners and visitors should be reminded to wash their hands for 20 seconds or more frequently and to catch coughs and sneezes in tissues

- frequently clean and disinfect objects and surfaces that are touched regularly, using your standard cleaning products

- prisoners or detainees who have a new, continuous cough or a high temperature but are clinically well enough to remain in prescribed places of detention (PPDs) do not need to be transferred to hospital

- confirmed cases of coronavirus (COVID-19) should be notified by the prison or the secure home as soon as possible

- people who are severely unwell may be transferred to appropriate healthcare facilities with usual escorts and following advice on safe transfers

- staff should wear specified personal protective equipment (PPE) for activities requiring sustained close contact with possible cases (see below for detail)

- if facing multiple cases of those displaying symptoms, ‘cohorting’, or the gathering of potentially infected cases into a designated area, may be necessary

- PPD leaders should be assessing their estate for suitable isolation and cohorting provision.
**Background**

This guidance will assist healthcare staff and custodial and detention staff in addressing coronavirus (COVID-19) in prescribed places of detention (PPDs).

The following establishments are included within the definition of PPDs used in this guidance:

- prison
- children and young people’s secure home

Controlling the spread of infection in PPDs will rely on coordinating healthcare and custodial staff. This guidance may be updated in line with the changing situation.

**Symptoms**

The most common symptoms of coronavirus (COVID-19) are a new, continuous cough or a high temperature. For most people, coronavirus (COVID-19) will be a mild infection.

**What to do if someone develops symptoms of coronavirus (COVID-19) in a prison or PPD**

In PPD settings, suspected cases are likely to be identified by:

- custodial and detention staff
- other prisoners and detainees
- self-referral
- at reception screening or through other means

All staff should be alert to prisoners or detainees who have a new, continuous cough or high temperature and the prisoner or detainee should be isolated in single occupancy accommodation (for example cell or detention room).

If such accommodation is not available, possible cases should be held alone in higher occupancy accommodation. The prisoner or detainee should wear a surgical face mask while being transferred to an isolation room. Escorting staff do not require PPE but must clean their hands on leaving the prisoner or detainee.

Prisoners or detainees who have a new, continuous cough or a high temperature, but who are clinically well enough to remain in prison, do not need to be transferred to hospital. Regular observations are not required unless indicated for other clinical reasons. Where possible, any assessment should be done without entering the room. Staff should seek clinical advice on the patient’s behalf by using the online assessment at [gov.im/covidtest](http://gov.im/covidtest) to determine whether a call needs to be made to the COVID 111 helpline. Prisoners or detainees must be isolated for 14 days from the onset of symptoms, regardless of whether the test result is positive or negative. If the test is positive, details will be passed to the Public Health Contact Tracing Service who will contact the Prison/PPD to arrange contact identification and follow up as appropriate.
If a member of staff or a visitor has helped someone who was taken unwell with a new, continuous cough or a high temperature, they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell.

If a member of staff or a visitor becomes unwell with a new, continuous cough or a high temperature they should be sent home immediately and advised to follow the Stay at home (self-isolation) guidance. They should be advised to seek clinical advice using the online assessment at [gov.im/covidtest](http://gov.im/covidtest) to determine whether they need to call the COVID 111 helpline. They must self-isolate for 14 days from the onset of symptoms, regardless of whether the test result is positive or negative. If the test is positive, details will be passed to the Public Health Contact Tracing Service so any contacts can be followed up and advised.

All PPDs should have a plan in place identifying an appropriate place to isolate patients with symptoms, preferably with input from an infection control specialist.

As infection can be spread through both personal contact and environmental contamination, it is important to consider reviewing current infection prevention and control practices to ensure they follow national infection prevention and control guidance for PPDs [national infection prevention and control guidance (dated July 2011)](https://www.gov.uk/government/publications/national-infection-prevention-and-control-guidance-for-prisons-and-prescribed-places-of-detention).


**Cohorting**

Should the numbers of cases in an establishment increase, isolation resources could be under pressure. Cohorting is a strategy which can be effective in the care of large numbers of people who are ill by gathering all those who are suspected confirmed cases into one area (or a limited number of areas where it is necessary to keep some prisoners or detainees separate).

Cohorting presents many advantages in infection control. However, the area used for cohorting should not be considered the only source of infection. This is because PPDs are at risk of new cases being imported from the community or other establishments. The suitability for cohorting should be considered and conduct risk assessments on the co-location of prisoners who would normally be kept separated.

**Cleaning and waste**

See guidance on cleaning in non-healthcare settings.

**Advice on the use of PPE for healthcare staff and custodial staff with patient-facing roles**

Healthcare staff are most likely to work directly with patients with symptoms of coronavirus (COVID-19).

Those who are severely unwell will be transferred to an appropriate facility. The facility that receives the individual must be informed that the patient may have an acute respiratory disease that will require precautionary isolation.

Custodial or healthcare staff in close contact with confirmed or suspected cases:

Staff should minimise any non-essential contact with suspected coronavirus (COVID-19) cases. For activities requiring close contact with a possible case, for example, interviewing people at less than 2 metres distance, or arrest and restrain, the minimum level of PPE that custodial and escort staff should wear is:

- disposable gloves
- fluid repellent surgical face mask
- if available, a disposable plastic apron and disposable eye protection (such as face visor or goggles) should also be worn

Healthcare staff in close contact with confirmed or suspected cases where aerosol generated procedure is being undertaken

PHE advises that the minimum level of PPE for healthcare staff required where aerosol generated procedure is being undertaken is:

- FFP3 respirator
- gloves with long tight-fitting cuffs
- disposable fluid-resistant, full-sleeve gowns (single-use)
- disposable eye protection, preferably face visor

For all staff, PPE must be changed regularly, either every 2 to 4 hours or in between patients.

PPE should be removed in a specific order that minimises the potential for cross-contamination. The order of removal of PPE should be:

1. Peel off gloves and dispose of in clinical waste
2. Perform hand hygiene, by handwashing with soap and water, or using alcohol gel
3. Remove apron by folding in on itself and place in a clinical waste bin
4. Remove goggles or visor only by the headband or sides and dispose of in clinical waste
5. Remove fluid repellent surgical face mask from behind and dispose in clinical waste
6. Perform hand hygiene

All used PPE must be disposed of as Clinical Waste. Scrupulous hand hygiene is essential to reduce cross-contamination. Coronaviruses can be killed by alcohol hand gel and most disinfectants.

Information on donning and doffing of PPE is available, see Appendix 3 of the guidance COVID-19 Infection Prevention and Control (dated 27 March 2020).
Limiting spread of coronavirus (COVID-19) in PPDs

Managers of PPDs can help reduce the spread of coronavirus (COVID-19) by reminding everyone of the public health advice.

Staff, visitors and prisoners or detainees should be reminded to wash their hands for 20 seconds more frequently than normal.

Frequently clean and disinfect objects and surfaces that are touched regularly, using your standard cleaning products. Bleach-based disinfectant products (such as Titan-Chlor tablets) are recommended in PPDs for disinfection.

This document has been localised for Isle of Man use and adapted using wording taken from the Public Health England COVID-19: prisons and other prescribed places of detention guidance.