

**Guidelines for HMPPS non-healthcare staff on undertaking a visual and temperature screening (VAT) to identify signs of COVID-19**

**Purpose**

This document outlines a process for a member of HMPPS staff to undertake a non-clinical screening of a prisoner to gauge whether they are potentially showing signs of COVID-19. This process is intended for use in Category D prisons during periods when there is no healthcare practitioner available and prisoners are returning from external work placements out of hours. This process is not a healthcare assessment and should not be assessed as such. It is a process to identify prisoners who may be at risk/symptomatic and a referral to healthcare staff to make an assessment.

**Introduction**

As part of national measures to reduce movement into and out of prisons to counter the risk of COVID-19, the majority of ROTL and working out placements for Category D prisoners have been suspended. However some establishments still have essential workers in outside employment. These workers are coming into and out of the establishment each day and therefore represent a risk of transmitting COVID-19 into the establishment. It is therefore advantageous to have systems in place for referring them for a healthcare assessment if they show signs of symptoms.

Some Category D establishments do not benefit from 24/7 healthcare provision and as such may not have a healthcare member of staff on duty when prisoners return from outside work out of hours. Category D prisons retaining a group of outside workers remaining in employment during the COVID-19 period have therefore asked to commence a programme of prisoner screening for signs of COVID-19 infection when prisoners return from work each night.

**COVID-19 symptoms**

It is important to acknowledge that no two individuals have an identical presentation when symptomatic. There are believed to be several strains of the COVID-19 virus and individuals may exhibit several symptoms in combination. However two recognised symptoms are a high body temperature (fever) and continuous dry cough.

Normal body temperature is different for everyone and this may fluctuate for various reasons including recent physical activity or exposure to varying temperatures. However the standard temperature for an adult is approximately 37 ℃ (98.6 F). Whilst a temperature of 37.4 ℃ is described as concerning, a temperature of 37.8 ℃ or more is considered a high temperature. Symptomatic individuals may also exhibit a new, continuous cough – normally defined as either coughing for an hour or more or having three or more coughing fits in the space of 24 hours.

**Visual and temperature (VAT) screening**

Only a trained healthcare professional can diagnose the presence of COVID-19. The VAT screen is not a healthcare assessment. It is an early referral process for a healthcare assessment. We are also not asking non-healthcare staff to make a diagnosis, or to discharge a healthcare responsibility. Instead, in the absence of healthcare professionals when prisoners are returning from external work parties, we are asking staff to undertake a visual and temperature screen (VAT) to flag prisoners for a healthcare assessment.

When a member of healthcare staff is available, they should perform an assessment of every prisoner entering the establishment in line with pre-existing reception procedures. The VAT process is designed for those periods when no healthcare practitioners are available. A member of staff will complete the screen on returning prisoners. The establishment will need to determine the frequency of these screenings, which may not be deliverable every day. Prisoners should be made aware of the programme and provided information on what it involves.

Prisoners should also be issued with information on the symptoms of the virus and what to do if they develop them. Prisons should consider whether they mandate that prisoners agree to the temperature checking procedures as a condition of external employment during the COVID-19 period. This is a local decision which should be recorded on the local defensible decision log. Establishments also need to determine an approach for managing instances where prisoners refuse to cooperate.

Relevant prisoners should be visually screened following the guidance described in the next section. Those who display at least one COVID-19 symptom/appear symptomatic, can potentially be further checked with a Tritemp thermometer. This thermometer plays an indicative role for a future healthcare assessment only. Also, prisoners who do not display any symptoms/appear symptomatic do not have to be checked with the thermometer.

Prisoners who appear symptomatic as a result of these checks are not to be treated as symptomatic until the healthcare assessment takes place. Establishments need to decide on their overnight location in line with the local cohorting strategy and capabilities in order to mitigate potential risks, whilst understanding that those prisoners are not considered symptomatic at this point. Local consideration should be given to the work arrangements and whether prisoner can be asked to wait with attending work until the healthcare assessed them.

The VAT screen itself consists of two elements: the visual check of the prisoner presentation is the first step. The second step can be used if there is a concern whether the prisoner may be symptomatic and takes a form of a temperature check that can provide additional information but by no means constitute an equivalent of healthcare assessment. Hence, it serves only as a secondary tool for information to the healthcare team. The two elements are outlined in more detail below:

1. **Visual check**

Staff undertaking visual assessments are not trained healthcare professionals and this assessment is not a healthcare procedure to give a formal diagnosis. Instead the visual check is an observation of the prisoner presentation to detect the signs of any indicators that the prisoner may be symptomatic. This is a subjective assessment and it is not 100% accurate, it is simply to highlight potential signs that can be followed up by a trained healthcare practitioner. Staff should explain to the prisoner that they are making a visual check and explain how information generated will be used.

We have deliberately not developed a script or additional materials for this check as it is a visual check and does not require formal scripting. Staff are simply looking for signs of a fever or new, continuous cough. Staff do not need to interview the prisoner but may wish to ask some discrete questions to illicit information. In all cases it is imperative that the inspection is completed discretely and sensitively and that prisoners are aware of what is happening. Prisoners should be encouraged to cooperate but cannot be forced. A local mechanism for referring cases to the local healthcare provider will be required. Staff may wish to ask prisoners questions to illicit further information. These questions may include the following:

“Do you feel you may have a high fever?”

(Here the prisoner can be asked to touch his/her chest and back and can be asked to report whether they feel hotter than usual, which may indicate a high temperature. )

“Do you have a new, continuous cough?” (This is normally defined as either coughing for an hour or more or having three or more coughing fits in the space of 24 hours.)

“Do you know of anyone in your workplace/home who has been ill with COVID-19 symptoms?”

“Have you been in contact with anyone who has COVID-19 or you suspect might have COVID-19 symptoms?”

If prisoners declare to have either a high fever, or they appear to have a fever despite claiming otherwise, they should be referred to healthcare for screening as soon as possible and the establishment will determine the prisoner’s location overnight according to local cohorting arrangements. Also, their temperature can be checked as an additional source of information. From this point the algorithm found in the table in the next section should be followed. Please note that the prisoner who appears to be symptomatic can be referred to a healthcare screening even if the temperature checked falls within the normal range. If they declare to have a new, continuous cough or they appear to have this symptom, their case will be referred to healthcare for screening as soon as possible and the establishment will determine the prisoner’s location overnight according to local cohorting arrangements.

Visual checks do not need to be recorded but the prison should develop a local mechanism for recording the visual checks that resulted in the temperature check and referral to the healthcare. A form for this purpose is enclosed below. Prisoners should be told what information is being recorded. In the case that symptoms are detected, the establishment will need a local policy on where the prisoner will be located pending the healthcare assessment.

1. **Temperature check**

The temperature check will be conducted using a Tritemp thermometer which has already been provided to every prison. Non-healthcare staff should be able to effectively use the equipment and recognize the cough as a symptom of Covid-19. When concerns are raised in line with an algorithm described below, the member of staff will refer the individual for a healthcare screening. In line with the establishment’s local cohorting strategy, a decision will then need to be made about the prisoner’s immediate location overnight.

Tritemp thermometers determine temperature by measuring the heat emanating from the surface of a person’s body. However, the measurements can be imprecise in certain environments and when staff using the equipment do not carefully follow instructions. It is therefore extremely important that the relevant instructions are adhered to. Detailed guidance is enclosed in a PDF document below. It is important to notice that because of the risk of human error resulting in the potential inefficacy of the technology, this can only suggest that symptoms are present and should be understood within its indicative nature.



*Instructions:*

1. Take the temperature of individuals as per local strategy using appropriate level of PPE. If disposable gloves are already being worn for personal protection, keep them on. Gloves for using the TRITEMP are not usually necessary as there is no contact with the person, however regular hand washing with soap and water for at least 20 seconds at a time remains important.
2. Please follow the below algorithm to help you to make a decision on next steps:

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| --- | --- | --- |
| **Temperature recorded** | **Meaning** | **What happens next?** |
| 37.3℃ or less | Temperature is normal. | No actions taken; prisoner can continue their work as normal whilst following current expectations regarding hygiene and social distancing, where possible. |
| 37.4 – 37.7℃ | Temperature is above normal and shows there is a slight fever. | If their temperature falls within this range they can be referred to healthcare. |
| 37.8℃ or above  (Or appearing symptomatic) | A high fever is present. | Their case will be referred to healthcare for screening as soon as possible and their location will be determined by the local cohorting strategy and individual circumstances. |

1. Record the Temperatures above the threshold (37.4℃) in the form below (annex A)
2. From legal point of view, temperature of prisoners should only be recorded when it is above the set threshold. This should be treated as a sensitive data and stored accordingly.
3. The form must then be forwarded to healthcare.
4. The cleaning instructions that are provided with the thermometer must be followed.
5. The decision regarding the overnight accommodation and treatment of the prisoner have to be in line with the local cohorting strategy

**Annex A**

**HMP XXXXXX VAT assessment log**

**Infra-red Thermometer Temperature Checks**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Time** | **Temp** | **Prisoner Name** | **Prison Number** | **Comments** | **Action Taken** |
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**Assessing officer (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Annex B**

**PRISONER NOTICE**

**Covid-19 Infection Control Action**

**Notice on Temperature Checks for ROTL Prisoners**

In the interests of protecting your health and safety as a resident in our care, as well as other prisoners and staff, HMPPS wants to take the best safety measures to contain and decrease the likelihood of a potential spread of Covid-19 into the prison.

To reduce the risk of spreading this infectious virus in our prison, all Prisoners on ROTL will be subject to a visual check to screen for symptoms. Those who appear to be symptomatic will be checked using a thermometer.

The thermometer will record the body temperature 2 finger widths away from the forehead and you will not be touched by the device. The below will explain how the assessment is made:

|  |  |  |
| --- | --- | --- |
| **Temperature recorded** | **Meaning** | **What happens next?** |
| 37.3℃ or less | Temperature is normal. | No actions taken; continue your work as normal whilst following current expectations regarding hygiene and social distancing, where possible. |
| 37.4 - 37.7℃ | Temperature is above normal and shows there is a slight fever. | If your temperature falls within this range you can be referred to healthcare. |
| 37.8℃ or above  (Or appearing symptomatic) | A high fever is present. | Your case will be referred to healthcare for screening as soon as possible and you will be expected to follow the reasonable steps in line with local strategy until the healthcare assessment is made. |

We recognise that it is a challenging time, but we are also aware of our priority and responsibility to protect the well-being of every person within our prison. Thank you for your understanding and cooperation.