**GOLD BRIEF – Prime Minister’s announcement on 14/6/2021**

**Purpose**

To provide an update on the implications for prisons of the Prime Ministers announcement on Monday 14 June.

Please note that the announcement by the Prime Minister was focused on England only and we expect an announcement from the First Minister in Wales later in the month. The content of this briefing however applies to both England and Wales.

**Summary**

On Monday evening, the Prime Minister announced that there would be a four-week delay beyond 21st June before moving to Step 4 of the roadmap in England. This means that the remaining community restrictions will not be lifted until 19th July. This is due to the continued growth of the Delta Variant that is spreading quickly across the country, with an increase in cases now impacting nearly every part of England.

In prisons, we continue to follow our National Framework and the existing mechanisms for progression remain in place, with the Gateway to Stage 2 remaining open. Establishments are not required to further review their regimes following this announcement. The Stage 1 Gateway remains closed, but we continue to plan for the opening of Stage 1. The announcement however does mean that this will be delayed until at least 19th July, at the very earliest, to reflect what is happening in the wider community.

We have always been clear that we would be guided by data rather than dates and we will continue to work with public health authorities to monitor the situation. Throughout the pandemic our number one priority has been to keep our staff and those in our care safe. This remains our main concern moving forwards. Public Health experts are clear, prisons are vulnerable to prolonged outbreaks of infection because the people in them are living and working so closely together. This increased risk means that we must continue to proceed cautiously, following closely the public health measures designed to keep us all safe. It is because the risks in prisons are so different, that we also cannot automatically follow what is happening in the community.

We absolutely want to continue with our recovery, and see restrictions removed, which is why we need to do all we can to keep the virus out of our prisons now. The delay highlights that we are in a period of increased COVID-19 risk, but we have experienced this before, and we know that our controls are effective as long as they are correctly applied.

The delay in easing community restrictions is designed to allow time for more people to be vaccinated, with two thirds of the adult population expected to be double jabbed by 19th July. Crucially, this will increase the number of our own staff and prisoners being offered the vaccine. Public Health England (PHE) have stated that a large proportion of staff working in prisons need to be vaccinated to reduce transmissions and prevent further outbreaks. Therefore, accurate reporting of vaccination levels on SOP remains vitally important, and Governors and Directors are asked to continue to encourage staff to take up their vaccination and record it on SOP. Disclosure of vaccination status is voluntary, but we would encourage all staff working within prisons to assist us in this endeavour by reporting their status on SOP.

The continued focus on the delivery of the prisoner vaccination programme is also crucial in ensuring that those in prison remain best protected. Establishments are kindly reminded of the importance of engaging and assisting their local healthcare providers in addressing vaccine hesitancy and in facilitating vaccination clinics. To date, a whole prison approach has proven the most effective way to drive uptake rates.

Scientific data is clear that the Delta variant of the virus is more transmissible than other variants of the virus and therefore staff testing also remains critical to helping us identify the virus early and respond quickly to prevent onward transmission. Recent efforts to increase staff testing have been noted and appreciated and we are seeing some excellent examples across the estate.

However, uptake nationally remains low for PCR at just 40%. PCR tests are an important measure in preventing prison outbreaks. Through early detection and high accuracy, PCR tests are sensitive to Variants of Concern and can serve to protect staff, prisoners and regimes.

The latest data from the Department of Health and Social Care (DHSC) also shows that only 8% of staff LFD home tests are being registered on GOV.UK. To support our ongoing testing regime and understanding of COVID-19 prevalence, we ask Governors to promote the importance of registering home tests, thank staff for their support in this and emphasise the ongoing need to engage in the available testing regimes. Further, the ability to LFD test occasional visitors is critical and we ask that you maintain a team to supervise and process LFDs for these individuals wherever possible. Staff should also be encouraged to engage with local surge testing where applicable.

The separation of key cohorts of prisoners through compartmentalisation must remain in place as per the Cohorting and Compartmentalisation Strategy - establishments must continue to place symptomatic and COVID-19 positive prisoners into protective isolation to reduce the likelihood of transmission to other staff and prisoners, and new arrivals and transfers must continue to be reverse cohorted as per the transfer risk assessment model (RAG model).

It is critically important that staff do not attend establishments if they are unwell or may be developing symptoms, or if they or members of their households have tested positive. Staff should be encouraged to test at the earliest opportunity. We need to be vigilant to the risk that, with more people vaccinated there may be a rise in asymptomatic transmission.

Social distancing must remain in place across the estate, with all staff and prisoners always asked to remain 2m apart. In areas where 1m+ distancing has been approved (POELT training, reception and social visits), sites must continue to follow agreed [SOPs](https://hmppsintranet.org.uk/ersd-guidance/2020/04/15/safe-operating-procedures-sop-using-ppe/) to reduce risk. Please note that this applies to England only and in Wales, 2m social distancing remains in place without exception.

The HMPPS Face Mask and Face Covering strategies for staff and prisoners will remain in place and there is no plan to rescind these within the foreseeable future. In line with the policies, Governors and Directors are encouraged to continue to work with their local health practitioners and stakeholders to review the mandatory usage of face masks and coverings according to local risk.

Infection prevention and control measures such as good hand hygiene and good standards of cleanliness remain crucial and it is important that standards of hygiene remain high during this period of risk. Increased frequency of cleaning, disinfecting of general room surfaces, and regular hand washing reduces the presence of the virus and the risk of contact. We must also continue to ensure the best possible fresh air ventilation in all areas.

COVID-19 Reporting will remain at twice per week with exceptional case reporting, but we will keep this under review and may need to increase reporting in line with any escalation of the COVID-19 situation.

A prompt response to any new cases remains the appropriate approach, but this will not mean an automatic reversion to more restricted regimes where cases are reported. Existing mechanisms for regime regression will continue to be operated where required and will be fully controlled by the Governor with PGD oversight and Gold approval. HMPPS will also continue to operate system wide surveillance of all reported communicable diseases in establishments. This may lead to further national intervention if the risk picture nationally requires an estate-wide approach, but this will only occur if absolutely necessary. Communications with both staff and those in custody should be open about this possibility and continue to structure expectations with reference to infection levels.

We know some experience COVID symptoms of longer duration (known as long COVID). Due to the duration and impact of symptoms, staff may need a gradual return to work, also known as ‘phased return’ or Part Time on Medical Grounds (PTMG). Occupational Health continue to support managers in making decisions about how to support staff who suffer longer lasting effects with compassion, sensitivity and as supportively as possible.

As ever, good and consistent engagement with our recognised trade unions remains essential (please ensure they are updated in respect of this brief) and we continue to see many strong examples of this across the estate.

COVID-19 guidance for prisons continues to be accessible via the Operational Guidance Platform at <https://hmppsintranet.org.uk/ersd-guidance/>. Please remember that this link is best accessed via Firefox, and the link is not to be shared externally.

Please direct any queries to [COVID19.RegimesOpsGuidance1@justice.gov.uk](mailto:COVID19.RegimesOpsGuidance1@justice.gov.uk) in the first instance.

Kind Regards,

**Ed Cornmell**

**COVID-19 Gold Commander**