**Gold Brief – Return to Stage 2 and Social Distancing due to Omicron Risk**

**14 December 2021**

**Purpose**

In the [Gold Briefing](https://pogp.hmppsintranet.org.uk/plan-b-and-winter-guidance/) issued on 9 December we set out the immediate implications for the custodial estate of the Government’s decision to implement Plan B in response to the emergence of the Omicron variant. The 9 December briefing outlined a holding position and committed to provide further operational guidance following a review by the HMPPS Leadership Team (HLT) informed by UK Health Security Agency (UKHSA) advice. On 12 December the UK was moved COVID alert level 4. This document outlines additional controls and regime restrictions now agreed to counter the risk of the Omicron variant of COVID-19.

UKHSA now recommends that the prison estate should reimpose additional controls to counter the immediate and escalating risk. Therefore, all prisons at Stage 1 must reintroduce Stage 2 controls reintroducing social distancing. Those at Stages 2 or 3 must maintain social distancing and maintain their current controls.

**Immediate actions**

* *All Stage 1 prisons* ***must*** *reintroduce social distancing and other Stage 2 controls*

*unless there is an agreed exception*

* *Stage 3 and 2 prisons should continue to operate at their current level but ensure that the controls required for that stage are operating effectively.*

**National Framework Controls**

An overview of each stage within the Prisons National Framework is provided below:

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| Stage | Description and additional controls/changes now required |
| 1 | No social distancing but other SOP controls. Movements and regime groups operated to deliver a full regime balancing safety with sufficiency. Aim to expand regime based on available resource determined by the Regime Management Plan (RMP). |
| 2 | Social distancing in place and other SOP controls.Regime in all areas subject to controls and social distancing in operation. Work, education and regime activities operated. Social visits operating with contact controls. |
| 3 | Social distancing in place and other SOP controls. Regime delivered under more restricted local operating procedure adhering to Exceptional Delivery Models (EDM). Predominantly essential work for prisoners only. Social visits with contact controls but no refreshments, creche or property exchange. |
| 4 | Prison locked down, regime restricted except for essential services (meals, showers, healthcare, family contact (telephone and video calling) and TiOA) and associated provision. High level of social distancing and controls. Social visits suspended or exceptionally approved but with no contact. |
| 5 | Full prison lockdown below essential regime delivery. This will only be enacted under exceptional circumstances where staffing availability due to the pandemic requires a regime focused to preserve life where there is extreme and immediate pressure. |

With immediate effect sites operating at Stage 1 must reinstate social distancing and transition to operate in accordance with Stage 2 expectations. It is accepted that prisons may not necessarily regress to their previous Stage 2 regime having made more recent changes, but they must now move their current regime to Stage 2 by introducing social distancing and in turn reducing mixing and movement in the prison. The precise level of regime activity operated within each regime Stage will continue to be subject to local risk assessment and review. It is accepted that whilst this Stage 2 level of operation is the baseline, Governors may operate higher levels of control in some parts of their prison; indeed it is often the case that wings are subject to Stage 4 equivalent controls where there is an identified risk such as in outbreak conditions and the wing is separated and contained from the less restricted regime operating in the rest of the prison. This continues to remain appropriate. The regime operated must continue to be proportionate to the risk assessed locally, considering all factors e.g. the number of local cases, testing and vaccine levels for staff and prisoners (including booster doses), the relative vulnerability of the prisoner population, and the community position.

Progression from Stage 2 to 1 is suspended at this time and prisons due to progress in the days following the publication of this briefing should pause these plans until further notice. Stage 2 prisons should retain their social distancing. However, if a prison regresses to a lower regime Stage and subsequently wishes to progress back to Stage 3 or 2, central Gold authority is not required – the decision may be made by the PGD in response to a request from the Governor. Such progression decisions must not be made without first considering local public health advice, representations as part of recognised trade union engagement and the view of the Executive Director. The previous formal approval process to implement the initial regime stages in each prison will not need to be followed to make this return to a previously agreed regime stage for the prison, but after PGD approval the decision must be communicated to Gold for reporting and ratification. All decisions to regress or progress regimes both within a regime stage and from one stage to another must be recorded within the local defensible decision log. Those prisons currently at Stage 3 are still able to progress to Stage 2 for the first time seeking initial regime stage approval in accordance with previously issued guidance.

**Exceptions**

There is an exceptions process to the national direction to restrict regimes to Stage 2 as a minimum and implement social distancing. If a Governor (supported by their PGD) believes they should be permitted to continue to operate at a Stage 1 level (without social distancing) they should submit a short summary of their case to the Covid Gold Heatmap panel who will review it. The submission should include:

1. Vulnerability of the establishment’s population
2. Evidence of good adherence to Covid controls (e.g. testing uptake) at the establishment
3. Any other controls brought in to mitigate the risk (e.g. reduction of mixing)
4. Any other unique local circumstances they would like the panel to consider

The Heatmap panel will consider any initial requests for an exception at its meeting on Friday 17th December. Submissions for consideration **must be received by 12noon on Thursday 16th****December** to [christopher.huckle1@justice.gov.uk](mailto:christopher.huckle1@justice.gov.uk). It is accepted that prisons applying for this will remain at Stage 1 until that decision is made. The Heatmap panel will continue to meet on a weekly basis and any submissions for exceptional consideration should be received the Thursday before each Heatmap panel.

As of 10th December, all establishments across the estate have been RAG rated as a minimum of AMBER by the Heatmap panel. This is informed by the increased community transmission risk from omicron and means that we are **re-instating reverse cohorting across all prison transfers**. This reverse cohorting is in accordance with existing guidance accessible [here,](https://pogp.hmppsintranet.org.uk/2020/04/15/cohorting-and-population-management/) and is 14 days as standard but can be reduced to at least 7 days where testing is utilised. The level of identified risk will continue to inform the RAG rating including the areas of the country where omicron is most emergent. Establishments must continue to consult the [heatmap](https://pogp.hmppsintranet.org.uk/2020/09/28/heat-map-for-reverse-cohorting-requirements-to-review-regime/) when locally assessing risk and any decisions around regime activities or regression.

**Higher risk activity**

In accordance with UKHSA advice you must review your regime to reduce the risk of mixing among large groups, especially across groups working or living in different parts of a prison, including cohorting staff groups and compartmentalising the prison wherever possible. Larger events which may have been planned over Christmas that bring groups together that do not ordinarily mix must be reviewed, with a default to cancel them unless wholly exceptional circumstances apply.

**Social Distancing**

Social distancing is the maintenance of a minimum 2 metre distance from those that do not reside together in a “household”. The v8 HMPPS SOPs detail circumstances where the 2 metre social distancing rule cannot be maintained and the controls that should be in place to manage specific activities. These are accessible [here.](https://pogp.hmppsintranet.org.uk/2020/04/15/safe-operating-procedures-sop-using-ppe/) The key mitigation in these circumstances is the use of face masks as PPE to allow sub-2 metre contact.

**Work from Home Guidance**

As outlined in the Gold Brief of 9th December **all non-essential footfall must be stopped** to limit the risk of incursion of the virus into the prison. Those that can work from home should work from home, however those that cannot deliver their role or service remotely must attend work. This work from home guidance is different from the “stay at home” direction previously in the pandemic. Where elements of the regime such as education continue to operate for example, teaching staff will continue to need to attend the prison. A wide range of other roles will require attendance in the prison to conduct their work and Governors and line managers much consider the “business need” in making decisions about whether a staff member or contractor should be in attendance physically. Ultimately our aim is to ensure that we reduce footfall into our prisons and those that can work remotely do so.

Regional Psychologists and teams will discuss deployment of psychologists directly with Governors locally, however, the general position is an expectation that psychology staff will attend on-site where there is work to be done which cannot happen remotely, and include potential cross-site work for critical statutory work. Where remote attendance is a possibility (e.g. meeting attendance), the Regional Psychologist will agree the overall position with the Governor to ensure that services are effectively delivered, whilst balancing the risk of increased footfall into the prison. Psychology teams are regularly deployed in smaller team ‘bubbles’ across a week and we would expect this workforce management to be maintained.

Offending Behaviour Programmes are a critical element of progression for many prisoners and OBP delivery remains essential activity which should be maintained where possible. Therefore, facilitators delivering these programmes are required to attend work. It is acknowledged that plans to increase provision in larger groups will need to be kept under review. Probation staff who require face to face access to prisoners are expected to continue to attend prisons when required by business need.

Essential services such as maintenance, the delivery of new accommodation, the delivery of replacement technology and work to support the operation of prisons must of course continue onsite as required. Again, the determination made in permitting entry to the prison is based on whether the work required is essential, meets a business need and cannot be completely remotely.

Finance and HR Business Partners will provide a remote service, working from home, unless there is a significant business requirement for them to attend on site and should minimise the amount of cross site working that is undertaken in person.  FBP/HRBPs remain contactable via MS Teams, emails and telephone.

PGD teams and those from certain headquarters functions determined as essential by senior leaders will continue to need to access prisons where necessary, subject to ongoing assessments of risk.

In addition, we continue to review our controls around additional footfall through face to face **social visits** and how we can strengthen these arrangements. Outbreak responses have required visitors to not only submit a negative LFD test for contact but also for entry to the prison. We are reviewing the extension of these arrangements and will communicate the outcome in due course. Similarly, we are keeping under close review additional footfall that is generated through **ROTL** movements and whether any further action is required to reduce potential risks.

**Planning for an increase in illness and potential hospitalisations:**

We should anticipate a rise in ill health and hospitalisations as the wave of infection rises. Oximeters have been successfully utilised during the pandemic and additional guidance was made available to Health Care providers last year on the use in prison of various oxygen therapies. Prisons should check for any update on these interventions with Health Care providers to ensure adequate stocks of oximeters are in place and steps have been taken to provide oxygen therapy where able. Where stocks are required, these should be ordered. The additional guidance is available [here](https://pogp.hmppsintranet.org.uk/plan-b-and-winter-guidance/).

Prisons should check they have enough trained staff to deploy with FFP/BP-RPE for any increased COVID positive bed watches. This should review existing trained numbers considering staff leavers. Prisons should consider a worst-case scenario of potential hospital escorts and schedule immediate training for FFP/BP-RPE where current training figures would not sustain a predicted need. Training should be arranged via the local health & safety teams.

It is imperative that we maintain or increase our controls around the most vulnerable prisoners in our custody to prevent serious ill health. The continued provision of shielding as per the current v6 compartmentalisation guidance is important and we should reduce cross contamination and high levels of contacts with these prisoners who are of the highest vulnerability. The provision of the vaccine (specifically including the booster dose) remains central to reducing the most serious risks.

**Other actions:**

The Gold Brief of 9th December and associated linked guidance detailed all other actions that should be taken at this time and provides guidance to inform safe operating practices locally in areas such as handwashing, cleaning, testing and vaccinations: [Plan B and Winter Guidance](https://pogp.hmppsintranet.org.uk/plan-b-and-winter-guidance/)

Additionally, it is expected that all establishments will have reviewed their face mask and face covering strategies and have mandated **routine usage of face protection** across their establishments. This should be in line with the agreed guidance.

Similarly, all establishments should actively review their **ventilation** options in line with the guidance available [here](https://pogp.hmppsintranet.org.uk/wp-content/uploads/2021/12/V4-Ventilation-Guidance-.docx).

**Please submit any queries regarding this guidance to:**

[**COVID19.RegimesAndOpsGuidance@justice.gov.uk**](mailto:COVID19.RegimesAndOpsGuidance@justice.gov.uk)

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**14/12/21**