



HM Prison &  
Probation Service

Official - Sensitive

# COVID-19 Operational Guidance – Exceptional Regime & Service Delivery

Version 3.0

03 April 2020

Official - Sensitive



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Version	Amendments from previous
V3.0	Updates: Evidence Based Research (page 6), ERMP guidance around Safety (13), Adjudications (19), Education guidance (22), New GPC document (23), IMB (24), Ordering (26), Prisoners Monies (28), PPE and Hygiene (29), Safety (31), Small Repairs and FM (33), Additions: YCS reference in operating assumptions (5), Cohorting(21), Funeral Escorts (22), MDT (25), PCVL (30),Regime Reporting (30),YCS Guidance (35)

# 1 Introduction

## Background

Due to a significant increase in confirmed Corona-Virus (COVID-19) cases in the UK, HMPPS is taking steps to monitor, manage and mitigate the threat of large numbers of staff and prisoners becoming infected over a short period which poses a considerable risk to safety and stability across the prison estate.

Initially, operational guidance was based on the assumption that current staffing levels would offer the ability to maintain slightly higher levels of regime than those offered at Minimum Staffing Levels (MSL) in order to support prison stability for as long as was feasible. As such, instructions were based on PSI 07/2017 Regime Management Plans (RMP), which supports prisons to flex the delivery of local regimes to meet deployable staffing resources as well as clarifying MSLs and the regime they deliver.

On Monday 23 March 2020, the government announced new rules on staying at home and away from others as part of the public health measures in response to the coronavirus (COVID 19) pandemic.

These rules explained that the single most important action we can all take, in fighting coronavirus, is to stay at home in order to protect the NHS and save lives. When we reduce our day-to-day contact with other people, we will reduce the spread of the infection. That is why the government introduced three new measures.

1. Requiring people to stay at home, except for very limited purposes;
2. Closing non-essential shops and community spaces;
3. Stopping all gatherings of more than two people in public.

Every citizen must comply with these new measures.

In prisons, this means that people in prison will spend more time in their cells. They will, however, be given access to essential services including meals, showers, telephone contact with loved ones and legal advisors, access to health services, and where possible time in the open air.

The core elements of the document have been retained for continuity, with the withdrawal of some guidance which is no longer applicable and clarity around other elements in the light of new Government guidance. Where activity has already taken place in line with previous guidance, it should be reviewed as opposed to restarted.

Establishments were originally asked to design an Exceptional Regime Management Plan (ERMP) which would support establishments in delivering key regime deliverables where resources were restricted. ERMPs are still required from all establishments but now require immediate implementation as opposed to waiting on resource pressures to trigger.

## Purpose

The purpose of this document is to assist management teams in prisons to create a local 'Exceptional RMP (ERMP)' for the duration of the COVID-19 period. The ERMP does not replace the existing RMP and is specifically designed to cover a period which is outside normal operating parameters. The provision of additional services such as video-link court/parole hearings should be maintained as long as is safe and practicable. Any reduction in these services should be fed through the COVID-19 Prison Response Model.

HMPSS is taking steps to maintain staffing levels at the highest possible level at every site through a range of measures to increase resourcing whilst also reducing demands (e.g. cancelling training). We should aim to maintain MSL staffing levels or better so far as possible and for as long as possible. Separate guidance has been issued to support any measures taken around pay and reward, or the management of additional staffing resources.

Whilst facing these exceptional circumstances, we must continue to provide some form of essential regime, ultimately focused on our fundamental care of duty and life sustaining services. The temporary, ERMP is built around provision of four key regime priorities – meals, medication, prisoner safety and welfare and family contact.

ERMPs should be initiated immediately.

## How to use this guidance

Upon receipt of this guidance, establishment Governors/Directors should convene a Regime Management Meeting at the earliest opportunity involving recognised local trade unions including H&S representatives, healthcare and all local stakeholders including controllers in PMPs. This meeting should be used to undertake the following priority actions to plan for COVID-19:

- Ensure that their existing RMP and associated operating procedures remain relevant and are communicated to all staff. These should outline the safe ways of working at all staff levels from patrol state through to full Safe, Decent and Secure Staffing Level (SDSOL) for every area (and should already be in Annex B of each establishment RMP).
- Develop an ERMP for a reasonable worst case scenario. This should include establishing a plan in line with this guidance on how to safely deliver the 4 Key Regime Priorities:
  1. Meals
  2. Medication
  3. Prisoner safety and welfare
  4. Family Contact

This should provide both staff and prisoners with a clear understanding of the expectations of an exceptional regime and the impact this will have on the normal daily operations of the establishment. Guidance is provided on what should be included in each of the 4 areas within this document.

- Initiate a Defensible Decision Log. A template is included within this guidance. Establishments should record any decisions which are made outside of policy and why it was felt necessary to work in this way. Given the potential spread of the virus, it is likely that current policy will not adequately cover all possible eventualities for managing a prison through the peak of the period. It is good practice to discuss actions outside of policy with the local POA and other recognised trade union representatives.

- During the COVID-19 situation we are operating in command mode which will see establishment BRONZE report to “regional” SILVER (a number of prisons grouped together) and a dedicated national COVID GOLD. This command model will form the core line for communication and decision making supplemented as necessary with PGD support around business as usual.
- For Privately Managed Prisons, the reporting line will remain through their own SILVER arrangements with a dotted line to ‘regional SILVER,’ so the full picture is understood.
- Where reference is made to SILVER throughout the document, please consider this in the above context of Regional SILVER for PSPs and Provider Silver for PMPs.

There should be two outputs from the Regime Management Meeting:

## **Output 1: ERMP**

All prisons must produce a temporary ERMP for agreement with Regional SILVER (informed by PGDs where possible) by 31<sup>st</sup> March 2020. The ERMP will outline plans for delivery of four essential regime priorities during the COVID-19 period. ERMP will only cover the period during which Government restrictions around movements and social distancing remain in place or where the establishment cannot reach their MSL. The staffing position will be monitored daily through the COVID-19 command structure and expected return from BRONZE to SILVER and a SILVER return to GOLD. The strategy will be to return establishments to their pre-existing RMP as soon as possible and only utilise ERMP or specific alternative practices as determined by the emerging operational situation.

ERMP need not be as comprehensive as an existing RMP but must contain a plan for each of the four regime priority areas. Safe operating procedures for reduced staffing in all prisoner facing areas will form part of the existing RMP and should be considered when making ERMP plans for each area. Dynamic, risk based decisions which sit outside of standard processes may be required for managing establishments during COVID-19 and every such decision should be recorded and communicated appropriately.

## **Output 2: Defensible decision log**

As we are entering an unprecedented period of operational pressure, it is also recommended that establishment Governors (BRONZE) open a defensible decision log and keep this open for the duration of the COVID-19 situation. Establishment BRONZE commanders will be required to demonstrate the elements of regime they have committed to deliver locally but also to justify potentially complex decisions not to operate or prioritise other elements. The national defensible decision log template previously provided by NIMU can be utilised for this purpose.



Defensible Decision  
Log.docx

HMPPS is committed to giving Operational Managers within the command structure the space to make informed tactical decisions at a local level within this context but that we have clear visibility around decisions being taken with the right level of escalation based on the issue or risk being managed. In turn this will allow us to best provide as much support and resource as we can nationally to deliver this.

## Operating assumptions

**Decisions taken in the context of an ERMP must be clearly focused on the 4 Key Regime Priorities, without regard to the prison performance rating system and in proper response to the operational situation as it emerges.** This is understood and supported at all levels of HMPPS and by our Ministers.

**Governors/Directors must prioritise the safety of staff and prisoners and the ongoing stability of the establishment above all else during these exceptional circumstances.** We appreciate that establishments will have to make difficult decisions about tasks to postpone or stop doing during the COVID-19 period, particularly tasks associated with the security function. Under exceptional circumstances, we accept that prisons may need to cease searching, Accommodation Fabric Checks, MDT and other core security processes to prioritise the four key regime priorities. However prisons must continue to conduct roll checks at the locally required frequency and maintain basic intelligence systems; the latter will be particularly important at times of heightened risk of instability.

The four elements of regime that establishments must prioritise and deliver consistently during ERMP staffing levels are set out below. Establishments need to make a plan for delivering each area during sub-MSL periods. Individual Governors (BRONZE) can determine the look and style of these plans. Prisons should ensure these plans are communicated to all staff and prisoners as required when activated, that plans are widely understood and these are recorded so establishments can present them as they see fit. It is accepted that resource to provide formal plans will be impacted in the same manner as regime delivery through high absence rates. The defensible decision making log must be used in the design of each regime element to record those elements that are not incorporated and why.

It is recognised that whilst Youth Custody Services (YCS) will operate under the same Government guidelines as the adult estate, there are some specific differences in working with children which need to be considered. YCS specific guidance is included in Section 3 of this document.

## 2 Key Regime Priorities

### UPDATE 27.03.19

Following the announcement on March 23<sup>rd</sup> of nationwide restrictions to support social distancing recommendations during the COVID-19 outbreak, an ERMP state regime should be implemented immediately in all establishment. This includes the indefinite suspension of visits, education, non-essential work and mass movements. Establishments also need to consider how to maintain social distancing when delivering time in open air, access to showers and access to phones, bearing in mind existing guidance on household isolation. Some evidence based research has been provided about the isolation, how to mitigate the impacts and how best to encourage compliance.



Evidence Based



Evidence Based



Evidence Based

Practice Summary - I:Practice Summary In:Practice Summary In:

Each ERMP will outline how establishments will provide four key regime deliverables during the COVID-19 period. These key regime deliverables are the provision of meals, healthcare and medication, prisoner safety and welfare, and family contact. Every element must be addressed in an ERMP which must then be signed off by the respective SILVER. The section below provides detailed guidance on each of these four regime priorities that must be provided in the ERMP enabling prisons to design a plan for each one.

### KEY DELIVERABLES: 01) provision of meals

#### Immediate action(s):

Governors/Directors must meet with their local catering provider(s) and recognised trade unions at the earliest opportunity to agree the level of catering service to be provided during the COVID-19 period.

#### Required Outputs:

Establishments must agree and communicate a plan for catering services (including the provision of Ramadan packs between 23 April and 23 May).

Product	Description (responsible owner)
Local catering plan	<p>This outlines agreed local catering service during COVID-19 period:</p> <ul style="list-style-type: none"> <li>- It is assumed that establishments will continue to operate a traditional catering operation based in their local kitchen until this is no longer viable although with a reduced work party and whilst maintaining social distancing measures.</li> <li>- In their plans establishments should develop contingencies for service at every level from full staffing levels through to minimal or zero specialist catering staff.</li> <li>- Plans should consider appropriate and safe staffing levels and prisoner levels for each level of service. It is the responsibility of the catering manager to ensure staffing levels to deliver the agreed service.</li> </ul>

	<ul style="list-style-type: none"> <li>- Plans must include a mechanism for ensuring stock is maintained</li> <li>- A process for ensuring deliveries are expected and can be planned for (this should be information fed into the morning operational meeting to ensure the gate is sufficiently staffed)</li> <li>- Consideration should be given to alternative catering provision such as microwaveable meals, increased cold options etc.</li> <li>- Consideration must be given to ensuring we still adhere to food safety requirements including the temperature of food at point of service and other mandated Health and Safety requirements.</li> <li>- Plans must incorporate training requirements for staff deployed to unfamiliar tasks in the kitchen such as heating up pre-prepared meals using industrial equipment.</li> </ul>
	<p>Produced by: Catering Manager Signed off by: Governor/Director</p>

### Further guidance

Subject area	Expectation/guidance
Staffing and prisoner labour	<p>Considerations should include:</p> <ul style="list-style-type: none"> <li>- The minimum required resource for catering staff to provide meals</li> <li>- Existing safe operating procedures and how they can be adhered to using alternative arrangements</li> <li>- A minimum number of prisoners required to provide a kitchen-based catering operation</li> <li>- Early identification of a volunteer group of non-catering staff who could be trained to receive basic skills in the use of prime catering equipment in order to ensure sufficient cover.</li> </ul>
Meal delivery options	<p>Considerations should include:</p> <ul style="list-style-type: none"> <li>- Safe operating procedures for controlled meal service and meals to cell doors including expected timings, staffing requirements and required prisoner support.</li> <li>- What is the difference between a controlled meal service and meals at cell doors at the local establishment and when it is appropriate to move from controlled meal service to meals at cell doors.</li> <li>- Emergency meal options including ready meals and dehydrated meals</li> <li>- Appropriate merging of meal service (e.g. provision of breakfast packs with evening meals)</li> <li>- Consideration needs to be given to how meals will be moved from the point at which they are heated to the point at which they are served. Consideration also needs to be given to identifying how they will be moved from the point of access onto a unit to each cell door safely and without compromising medical safeguards.</li> <li>- Provision of food containers for meals to reduce infection risks.</li> </ul>

- Consideration should also be given to increasing the provision of tea/breakfast/snack packs.
- Provision of Ramadan packs for the period of 23 April to 23 May.
- Colleagues in PSPI are exploring other ways to enhance food provision for prisoners to offset any potential reduction in the size or quality of prisoner food. These include possibly increasing canteen allowances or providing in-cell packs containing essentials for every prisoner. Further guidance on these initiatives will be issued in the near future.

Colleagues in PSPI have drawn up further guidance on catering provision during the COVID-19 period which is contained in section 3 of this document.

## KEY DELIVERABLES: 02) provision of healthcare and medication

### Immediate action(s):

Governors/Directors must meet with their local healthcare provider(s) and recognised trade unions at the earliest opportunity to agree the level of healthcare service to be provided during the COVID-19 period.

### Required Outputs:

Establishments must agree and communicate a plan for how core healthcare services (including the provision of medication) will be maintained.

Product	Description (responsible owner)
<b>Local healthcare delivery plan</b>	<p>This outlines agreed local healthcare service during COVID-19 period:</p> <ul style="list-style-type: none"> <li>- States level of healthcare staffing to be provided</li> <li>- Emergency response arrangements</li> <li>- Provision of medication (subject to separate risk assessment)</li> <li>- Provision of specialist services (such as mental health support)</li> <li>- List of all tasks that will continue and delivery plan for each one</li> <li>- A generalised plan for managing any prisoner with confirmed COVID-19 diagnosis considering their isolation location, monitoring, provision of healthcare, regime, welfare and security.</li> <li>- An agreed position on routine appointments, escorts and bedwatches (<b>AIM</b> to return current bedwatches if possible and minimise appointments),</li> <li>- A plan for provision of medication – assuming all medication will be issued in possession or provided to the cell door.</li> <li>- A process by which all prisoners on regular medication are risk assessed for their suitability to hold this medication in-possession (<b>AIM</b> to reduce daily rounds via defensible decisions on each case)</li> <li>- A plan for controlled medications to be issued to the door (<b>AIM</b> is to maintain pre-COVID levels of medication issue for all prisoners.</li> <li>- Staffing model to enable this plan can be delivered consistently including a plan for any tasks to be performed in emergencies by non-healthcare staff. This must state the circumstances under which this emergency provision will be invoked.</li> <li>- A review of all prisoner social care packages to ensure continuity in liaison with the social care provider. Prisoners cannot be used as a substitute for social care staff.</li> </ul>
	<p>Produced by: Head of Healthcare Signed off by: Governor/Director and Head of Healthcare</p>

## Further guidance

Subject area	Expectation/guidance
Healthcare staffing	<ul style="list-style-type: none"> <li>- Healthcare staff will be encouraged to continue to work on units as long as it is deemed safe for them to do so from a medical and security perspective</li> <li>- Head of Healthcare must maintain reasonable staffing levels and is responsible for ensuring these are consistently met.</li> <li>- Health and prison-based social care services must provide a daily breakdown of staffing detail to inform operational planning</li> <li>- Emergency response staffing must be maintained at all times in prisons where this service is contracted to the healthcare provider</li> <li>- The Governor and Head of Healthcare can consider the use of non-healthcare personnel “in emergencies” to support the distribution and administration of in-possession medications (e.g. issuing but not prescribing). The Governor and Head of Healthcare can determine when local circumstances satisfy the definition of an “emergency”.</li> <li>- Any use of non-healthcare staff must be covered by a risk assessment. Re-allocated staff should not be asked to undertake tasks which they are not competent to undertake.</li> <li>- The Head of Healthcare will provide guidance for staff re-allocated to a healthcare task with which they are not familiar. The Governor will make equivalent information available on prison regime and security for any healthcare staff who are working in the prison for the first time</li> </ul>
Provision of medication	<ul style="list-style-type: none"> <li>- The Head of Healthcare and Governor will develop a plan for providing medication it will all be held I/P or issued to the cell.</li> <li>- The Head of Healthcare must ensure that risk assessments for in-possession (I/P) medication are reviewed as soon as possible to maximise the individuals able to safely manage their own medication.</li> <li>- Provision of controlled drugs (maintenance medication) will be prioritised above other routine duties and Heads of Healthcare will ensure sufficient staff are available for this task.</li> <li>- Antivirals, antibiotics and other medications to treat flu will be provided, where available as I/P meds unless exceptional circumstances mean an individual is not capable of self-medicating.</li> <li>- In exceptional circumstances, prison staff (non-medical) can be used to support prisoners to self-administer their medications however this can only be done if supported by the local risk assessment which must have taken account of any risks associated with this practice and be signed off by the Governor and Head of Healthcare</li> <li>- Prison staff will be required to enable the provision of medications where face to face contact is required. However every effort must be made to minimise unnecessary contact between staff and prisoners. Therefore efforts must be made to find safe dispensing methods that enable a barrier to remain in place between staff and prisoners.</li> <li>- In exceptional circumstances, Prison staff can issue certain medications provided this is from healthcare supply, is supported by local risk</li> </ul>

	assessment and the decision to administer it in each case has been verified with healthcare and documented before the item is issued.
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Subject area	Expectation/guidance
Support for prisoners	<ul style="list-style-type: none"> <li>- The Head of Healthcare will work with the establishment management team to agree an individual isolation plan for any prisoner with a COVID-19 diagnosis. Generalised plans for dealing with this eventuality should be designed and communicated at the earliest opportunity.</li> <li>- Healthcare practitioners will hold responsibility for decisions regarding the medical treatment and care arrangements for each prisoner but will make sure plans for each person are realistic and take account of operational pressures and security risks.</li> <li>- Healthcare staff will make prisoners aware of the symptoms of COVID-19 infection how to report the presence of such symptoms.</li> <li>- Healthcare staff will ensure that all prisoners with complex needs such as those with mental health diagnosis continue access to receive specialist services wherever possible, even if the means of delivery has to change as a result of COVID contingencies.</li> </ul>
Provision of information	<ul style="list-style-type: none"> <li>- Healthcare staff will provide essential information about health and social care delivery to prisoners, visitors and staff once the service is agreed.</li> <li>- Healthcare staff will ensure effective communications are in place between health and social care providers, regional NHS England Commissioners and other external stakeholders.</li> <li>- Healthcare staff in consultation with prison management will inform local hospitals and the Ambulance Service of the restricted regime in place at the establishment and how this is expected to impact.</li> <li>- Healthcare colleagues will provide information about reasonable steps to minimise the likelihood of infection. These will include;               <ul style="list-style-type: none"> <li>• Washing hands regularly, following recommended practice</li> <li>• Maintaining a positive hygiene regime</li> <li>• Using cleaning products provided</li> <li>• Covering your mouth and nose when you cough or sneeze</li> <li>• Placing tissues straight into the bin and emptying this promptly</li> <li>• Not touching your eyes, nose or mouth</li> <li>• Not sharing items such as dishes, drinks bottles, towels and vapes.</li> </ul>               It will also cover ways to recover quickly, such as resting and sleeping, keeping warm, drinking plenty of water to avoid dehydration             </li> </ul>
Bedwatches & Hospital appointments	<ul style="list-style-type: none"> <li>- The Governor and Head of Healthcare will discuss arrangements for routine appointments however it is expected that all non-emergency appointments will be postponed. Emergency escorts must still take place. Existing risk assessments for a hospital escort will be followed as normal, albeit Healthcare colleagues must advise on any medical considerations to ensure the prisoner and staff are protected from COVID-19.</li> <li>- Consideration should be given to returning any prisoners currently at outside to the prison if safe and practical to do so.</li> </ul>
Discharge & Reception	<ul style="list-style-type: none"> <li>- The Head of Healthcare will ensure reception and discharge processes continue. First night processes must include a healthcare assessment that</li> </ul>

meets national policy. A member of healthcare staff must see every prisoner prior to discharge. Healthcare staff will ensure any information relevant to COVID-19 is shared with community health providers at the point a prisoner is discharged. A prisoner cannot be held in prison custody due to being in COVID-19 isolation.

## KEY DELIVERABLES: 03) Prisoner Safety & Welfare

### Immediate action(s):

Governors/Directors must consult with their appropriate functional head and safety team, recognised trade unions, prisoner council or equivalent groups where appropriate and any other local stakeholders to agree safer custody and welfare support for prisoners confined to cells for extended periods due to COVID-19.

### Required Outputs:

Establishments must agree and communicate a plan for prisoner safety and welfare services and how they will be maintained.

Product	Description (responsible owner)
<b>Local safety and welfare plan</b>	<p>This outlines agreed local safety and welfare service during the COVID-19 situation:</p> <ul style="list-style-type: none"> <li>- Maintenance of essential safer custody delivery</li> <li>- Plan to provide prisoner products for in-cell ablutions and cleaning</li> <li>- Provision of in-cell pastoral care and services in substitution for group services (<b>AIM:</b> to provide pastoral services in-cell that are equivalent to existing services)</li> <li>- In-cell distraction packs, hobbies and leisure activities</li> <li>- In-cell education packs.</li> </ul>
	<p>Produced by: Head of Residence &amp; Safety (and/or Safer Custody lead) Signed off by: Governor/Director</p>

### Further guidance

Subject area	Expectation/guidance
Safety	<p>It is more vital than ever that we make sure that residents are safe. Staff should be briefed to use all the interactions that are possible in this period of regime restrictions and social distancing to check on welfare, taking any opportunity to communicate hope and encourage self-care, as well as to identify any change in appearance or behaviour that gives rise to concerns about raised risk of self-harm or suicide. Each resident should be seen at least once each day, and it is good practice to record that this has occurred (there may not be time for this to be done on an individual basis, but a landing or wing record may be possible).</p> <p><b>ACCT/Suicide and Self Harm</b></p> <p>Every effort must be made to ensure resources are available to support prisoners on ACCT on the basis that for many, the risk of self-harm could increase due to prolonged periods in cells. Considerations should include:</p>

- Resourcing ACCT assessments, reviews and observations (which must be maintained to the required levels)
- Collating a list of staff within reasonable travelling distance not based at the home establishment who can provide ACCT support. Consider providing training or upskilling in ACCT Case Management and Assessments for staff, including non-operational staff, who would not generally be involved in ACCT work. Guides for staff conducting assessments and reviews are available.
- Ensure all staff are briefed that despite staff shortages, ACCT is even more important during periods of increased periods of time in cell and must be initiated whenever concern is raised.
- Maintain access to Samaritans phones and Listeners wherever possible
- Contingency for ACCT reviews where prisoners test positive for COVID-19
- Introduce distraction packs and in-cell activities for any prisoner on ACCT and others more generally as far as possible.
- Ensure all ACCT prisoners have a television unless the presence of such is a specific trigger to their self-harm.  
Disapply normal provisions to remove televisions from any prisoner during periods of increased periods of time in cell.

#### **CSIP/Management of Violence**

We recognise the need to continue using CSIP where resources allow but to apply a risk based approach where resources are reduced to safely manage those prisoners who post the highest risk. Guidance attached.

#### **CSRA**

CSRA processes should still be used, this includes still following required CSRA processes in Reception and reviewing CSRAs where violent incidents occur particularly if this relates to in cell violent incidents.

#### **Family Liaison Officers**

Consider how to deploy FLOs. Guidance attached on informing the next of kin by telephone about the death of a prisoner and guidance if you have to use untrained staff to undertake this role.

#### **Safety Bronze Role Brief**

Written to assist you manage the risks around Safety each day and allocate resource to manage risk; an overview and checklist to identify risk and record actions taken while you operate in Command Mode. Guidance attached.

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Resident hygiene

Considerations should include:

- Daily access to showers for as long as is safe and practicable, and reduced access where full access is no longer possible.
- Access to in-cell ablutions kits where access to showers cannot be

	<p>provided. Consider also enhancing the level of canteen spend and/or subsidising it with HMPPS funded additions to help prisoners maintain their personal hygiene. Reasonable local costs will be covered centrally. PSPi with responsibility for prisoner retail will issue guidance on such enhancements to prisoner provisions.</p> <ul style="list-style-type: none"> <li>- Provision for full kit exchange as frequently as possible and maintain a wing laundry service for as long as staffing allows even if all prisoners are in cells for extended periods; the wing laundry orderly should be unlocked to work as a 'key worker'.</li> <li>- Where establishments have a laundry, this must be prioritised and kept open and staffed sufficiently wherever possible, particularly if this facility is servicing other prisons. It may be necessary to increase the number of Instructional Officers working in the laundry and the hours it's open to account for any additional workload.</li> <li>- Consider relaxing the rules on items a prisoner can receive in for a six week period, this could include provisions of extra clothing or even equipment for personal hygiene (accepting there is some security risk associated with allowing liquids that may contain illicit substances)</li> <li>- Ensure that as a minimum, prisoners are given sufficient soap for hand-washing and where possible provide materials for laundry in sinks where access to a laundry cannot be guaranteed noting that batch laundry services are essential to eliminate infection and should be the default option.</li> <li>- Where in cell sanitation is not available, a clear plan should be in place to ensure prisoners have access to toilet facilities with a clear cleaning protocol in place.</li> <li>- Consideration of allowing clothing from stored property to be issued where prison clothing is unavailable.</li> </ul>
In-cell activities	<p>Considerations should include:</p> <ul style="list-style-type: none"> <li>- Extending provision of reading materials, either from the library or from a local newsagent where practicable</li> <li>- Consider tasking gym staff with supervising an in-cell workout session from a central point on the landing. Consider whether in-cell workout programmes can be designed by prisoners and recorded. Ask gym staff to develop and distribute an in-cell workout guide for prisoners.</li> <li>- Liaise with local education providers to ensure prisoners can continue education programmes in-cell wherever possible. Every attempt should be made to ensure courses continue, particularly distance learning courses provided the outside provider is operating during COVID.</li> <li>- Consider a one-off purchase of radios for every cell and ensure that all prisoners on basic are provided with a television at the earliest opportunity.</li> <li>- Task staff and prisoners with developing competitions to be run during periods of extended cellular confinement. Incentivise participation.</li> <li>- Increase the weekly allocation of letters a prisoner can send and ensure the prison operates email a prisoner or equivalent schemes.</li> <li>- Use local in cell communication systems (Way Out TV etc.) for positive messaging about mental and physical health, supplement this with guidance documents issued to cells.</li> <li>- Promote access to National Prison Radio as a primary means on national information on prisons and the COVID-19 situation.</li> <li>- Develop a comms strategy and ensure all prisoners receive regular</li> </ul>

	<p>updates on the national and local position outside of mainstream media.</p> <ul style="list-style-type: none"><li>- [REDACTED]</li></ul>
Pastoral care	<p>Considerations should include:</p> <ul style="list-style-type: none"><li>- Suspending religious groups and faith services. We advise that prisons devise a comms strategy for giving this message carefully to minimise the risk of instability.</li><li>- Chaplaincy staff providing 'at-door' pastoral services for prisoners who request it and visit as much as possible during the week to offset the loss of formalised services. Requesting that coordinating chaplains take proactive steps to maximise their available resources.</li><li>- Consider requesting that chaplaincy colleagues create in-cell guides for undertaking private acts of worship.</li><li>- The use of prison radio to deliver live faith services and the prisoner information channel to relay pastoral information will be considered</li><li>- Plan for upcoming religious celebrations including Ramadhan (23 April to 23 May) Eid al Fitr (23 May), Good Friday (10 April), Easter Sunday (12 April), Easter Monday and Passover (8 – 16 April)</li></ul>

## KEY DELIVERABLES: 04) Family Contact

### Immediate action(s):

Governors/Directors must consult with their local family services teams, Heads of Reducing Re-Offending, Heads of Ops, recognised trade unions, prisoner council or equivalent groups where appropriate and other local stakeholders at the earliest opportunity to agree the maintenance of Family Contact services during the COVID-19 situation.

### Required Outputs:

Establishments must agree and communicate a plan for how Family Contact services will be maintained.

Product	Description (responsible owner)
<b>Local Family Contact Plan</b>	<p>This outlines agreed local Family Contact services during COVID-19 period:</p> <ul style="list-style-type: none"> <li>- A communications strategy outlining the suspension of visits for prisoners and visitors to ensure that they are aware of changes to visits protocols as they happen (mechanisms should also be set up for communicating requirements to staff working on external booking lines)..</li> <li>- Technological solutions for in-cell virtual visits are being explored for the longer term. Further comms will be issued on this issue when the technology becomes available.</li> <li>- Promotion of the GOV.UK website for visitors where national information is shared.</li> <li>- A mechanism for ensuring prisoners have increased access to letter writing materials at prison cost and procedures to ensure that post is collected and distributed effectively and promptly, even with staffing pressures.</li> <li>- Where in-cell telephony is not available, a process for enabling access to telephones (unless or until it is impossible to facilitate time out of cell without undermining social distancing measures).</li> <li>- Access to alternative in cell telephony which is being nationally procured when available.</li> <li>- Active use of local family service providers to support prisoners and their families and provide information on behalf of the prison</li> </ul> <p>Produced by: Head of Operations Signed off by: Governor/Director and Head of Healthcare</p>

### Further guidance

Subject area	Expectation/guidance
Suspension of Visits	In line with UK Government guidelines around social distancing and restrictions on the public's movements on 23.03.20, social visits at all

	<p>prisons have been suspended. This message should be managed appropriately with support and advice on access to alternative forms of communication provided to prisoners and families.</p>
Communication Strategy	<ul style="list-style-type: none"><li>- Use of national visits booking agents and websites for the dissemination of information for visitors at the point of booking.</li><li>- Use of prisoner councils and groups to collaboratively design an alternative visits strategy, engagement with the prisoner group is vital through this process.</li><li>- Use of prison radio and TV channels to communicate changes regarding visits procedures.</li><li>- NTS and staff briefings to ensure staff are fully aware of changes and procedures.</li><li>- Door to door communication as required.</li></ul>
Phone access	<p>Considerations may include:</p> <ul style="list-style-type: none"><li>- Scheduling time windows for access to landing phones</li><li>- HMPPS will make provision for temporary in-cell telephony solutions for establishments that do not have this provision, further comms will be issued in the next few days.</li><li>- The ability to load additional credit at the cost to HMPPS on telephony will be available.</li></ul>
Mail	<ul style="list-style-type: none"><li>- Ensuring sufficient staff resource is maintained as far as is reasonable including the use of alternative grades to perform this task. Consideration should be given to the use of staff in at risk groups for this type of work.</li><li>- Develop alternative mechanisms for prisoners to maintain communications with family including setting up Email a Prisoner if this scheme does not operate locally. Consider increasing the weekly allocation of pre-paid letters.</li><li>- Consider monitoring levels if staffing resources do not support whilst still maintaining focus on public protection.</li></ul>
Innovations	<ul style="list-style-type: none"><li>- HMPPS is also exploring other options such as technology given to a prisoner for a fixed time to enable a virtual visit via video messaging software. Other initiatives are also under consideration and further guidance will be provided in the near future as these come on stream.</li></ul>

## 3 Support services

In addition to planning for an ERMP, establishments need to consider how provision of essential support services will be maintained during the COVID-19 period. The purpose of this section is to provide establishments with the latest guidance from specialist support services and to provide a steer on all areas where establishments need to ensure they have a contingency plan in place.

### Adjudications

For now, the position on governor adjudications remains unchanged but will be kept under review.

Where still possible and safe to do so, establishments should continue with governor adjudications. Where an adjournment is necessary, these should be time bound with a clear underpinning rationale documented on the adjudications paperwork. Without this, an indefinite or long delay is likely to significantly increase the risk of dismissing the case when eventually reopened as it may have breached the principles of nature justice.

Further guidance on adjournments and natural justice principles can be found in PSI 05/2018 Prisoner Discipline Procedures (Adjudications) Paragraph 2.20.

### Independent Adjudications



COVID-19 IA  
Hearings Operating

### Catering

Information has gone out to establishments to train non-catering staff how to use kitchen equipment in the event that catering staff are not available. The use of prisoners under supervision can be used for low level tasks but will require some hygiene training. Prisoners already trained as part of the kitchen party would be the ideal workers to be used and supervised for meal production. Prisons are to receive two days' supply of frozen complete meals per prisoner to hold as a contingency stock. Should they require more these will be dispatched by Bid food, our national supplier

Options that are being put in place above the complete meal options include:

- Contingency non-perishable food stocks are being sourced and will be despatched to establishments to hold for a contingency of basic commodities which catering managers have said they could base a menu on.

Depending on the level of staff:

- In the event of a reduced catering staff team, plans should include deferring to a reduced menu that meets all dietary and religious needs if necessary, with a minimum of two choices that meet all dietary and religious needs.

- Local contingency plans to take into account staff shortages especially catering staff as well as lack of prisoner labour have been relayed.
- Volunteer non-catering staff should receive training on how to use prime catering equipment such as ovens as a priority and this should begin immediately.
- Those same staff should receive basic hygiene training that includes receiving and storing food deliveries, re-heating and transportation of hot and cold food, this could be delivered locally by catering staff but should be recorded.
- As some of the contingency food lines will require hydration with boiling water there should be an adequate supply of kettles or flasks on site for prisoner use.
- Local contingencies should include providing sufficient freezer capacity to store frozen ready meals and sandwiches. It may be necessary to rent additional portable freezers - catering managers will be provided with contact details of suitable suppliers.
- In the event of prisoners' meals being delivered to cells it is recommended that any allergen or other dietary requirements of the prisoners are posted outside the cell door.



Catering Risk and  
Impact Assessment -

## Canteen/Retail

Advice from HM Government and PHE around social distancing has resulted in DHL having to reduce the numbers of prisoners in their workshops.

Some of the DHL employees in the workshops have been raising unsubstantiated concerns about our ability to provide a canteen service this week.

Following the intervention of Silver Commanders and the support of Local Bronze we are confident that prisoners will receive a near normal service.

However, it is the case aligned with the systems currently operating in supermarkets in the communities we have had to introduce some caps on the number of items available to purchase on some lines. Where individual issues arise for an odd missing product there will be some contingency stocks available to each site to supplement where possible.

We are extremely grateful for the support and flexibility from Governors of prisons with packing sites and we are working with DHL around the working arrangements for next week and beyond. We are presently mobilising two large warehouses in Gloucester and Knowsley to support our Canteen provision and to safeguard the supply.

Week commencing 29<sup>th</sup> March, canteen orders will not be able to include fruit or items that need to be stored in a fridge or freezer. Fruit will still be supplied from the kitchen as part of the daily food provision. The following week (commencing 5<sup>th</sup> April) we will reintroduce a good selection of fruit items.

We will require ongoing support from prisons as we have seen this week to keep the service as near to normal in the coming weeks and will keep prisons up to date via operational Guidance. If there are any expected changes in this position we will inform Gold/Silver Commanders as a priority.



Retail and Canteen  
- Revised Operation

## Cleaning

Deep cleaning can only be carried out by staff or prisoners who are qualified to do so. Deep cleaning of known infected areas must be carried out by qualified people. More thorough cleaning schedules should be established for communal areas.



Cleaning Guidelines  
- COVID-19 Infection

## Cohorting and Population Management

On 31 March 2020, all Inter-Prison transfers were suspended for the duration of COVID-19 in order to reduce opportunities for transmission of the virus between prisons, and to prevent introduction of infection into prisons where there is no outbreak.

In addition to this national change to restrict movement, establishments are now required to take proactive steps to reduce the risk of COVID-19 spreading locally. Guidance was issued to establishments on 31 March 2020 detailing these requirements, known as cohorting.

This document can be found below, along with a short document answering a number of frequently asked questions that have arisen from establishments as a response to this guidance.



Official Sensitive -  
Cohorting Guidance



Cohorting  
Requirements FAQs.

## Control & Restraint

We will be extending the time period in which staff need to undergo their C&R refresher training by at least 6 months to 18 months. This will allow us to make sure that more staff are available in safe running of the prisons. If any members of staff have concerns around their C&R capabilities caused by this change they should discuss it with their line manager. We will issue further guidance on this in due course.

## COVID-19 Reporting

As of Monday 23 2020, command mode has been entered for COVID-19. Establishment governors will act as COVID-19 Bronze Command and daily local reports must be sent to your regional Silver SPOC. They will then forward all regional reports to the central COVID-19 team by 10am and will update COVID-19 Gold each morning. This report must accurately reflect the impact of COVID-19 on staff numbers and the prison population that morning, including an assessment against ERMP. Full guidance can be seen in the embedded document.



Central COVID  
Reporting.docx

## Education

All group education has been suspended. In cell education packs are being developed and shared. Further guidance on education support is below alongside a volunteering template for education staff.



Education Provision  
Week 2.docx



Prison Educatiaon  
Volunteering Form.c

## Exercise

At all times Governors are advised to consider Government guidance on social distancing when using exercise yards. Local risk assessments should consider ways in which large congregations can be avoided. This may include small number unlocked and access to exercise yards rotated. Arrangements and Government advice should be clearly communicated to prisoners prior to exercise so they are fully aware of our expectations. Although it is accepted that this may be difficult, at all times we must prioritise keeping all our staff, our families and those in our care in at least risk of infection as possible.

We are aware that at some prisons gym equipment has been placed in exercise yards for prisoner use. Please refer to the 'Cleaning Guidelines - COVID-19 Infection Control' for pre and post use cleaning to help protect any users of this equipment.

## Fitness Tests

We have analysed the situation around operational staff's fitness tests. It was decided that the best course of action is to suspend all fitness testing. It will enable us to redeploy the operational staff involved in fitness testing into prisons.

As a result of this we will be extending the time period in which staff must pass a fitness test by at least 6 months to 18 months. We will issue further guidance on this in due course.

## Foreign National Prisoners



Home Office  
Approach - COVID-1

## Funeral Escorts

Requests for funeral escorts should be processed in the normal way with 'loco parentis' consideration to be given where the funeral in question is not that of a parent, sibling or child of the prisoner. When risk assessing the escort, both security and medical risks should be assessed, outlining appropriate social distancing and PPE measures where applicable. Consideration of appropriate isolation measures should be taken for when the prisoner returns to the establishment.

## GPC Cards

Implementing these new measures may require some additional finances. We also realize that some of the decisions must be made very quickly. This is why we are currently finalising the details of the arrangements around GPC cards. We can confirm that all cards have now £10k transaction and £50k monthly spend limit across all MCGs except cash. We hope that it will support establishments in more efficient adjusting to the changes and responding to any arising challenges.



Covid-19 –  
Purchases via Govern

## Gymnasium and Physical Education

As a result of government advice issued on 23 March 2020, all group activity is to be ceased and therefore all prison gymnasiums are to be closed, for **both staff and prisoners**

PSPI have developed further guidance around cell workout packs and staff wellbeing which will be forwarded separately.

## HDC and ROTL

Separate guidance on the maintenance of core OMU services during COVID-19 is contained within this document.

### HDC

Currently there is no suggestion that curtailing HDC would provide any benefit in reducing the impact of COVID-19 and would potentially put more pressure on establishments. Establishments must continue to operate HDC as normal unless otherwise instructed. HDC and ROTL are currently under ongoing ministerial review and it is possible that this position may alter during the COVID-19 period, however establishments are asked not to try and pre-empt any potential changes as this could cause instability.

### ROTL

Establishments should be aware that as of 24 March 2020, advice was issued to effectively curtail Resettlement Overnight Release (ROR) and Resettlement Day Release (RDR) for most purposes except essential 'key' work.

Further guidance can be seen in the below document.



COVID19 ROTL  
ADVICE.docx

If someone is released on ROTL to an Approved Premises and needs to self-isolate then policy allows ROTL to be extended indefinitely if a Doctor confirms that they are too ill to return. Where practicable, they should remain in the AP for seven days in line with current Government advice

but subject to the broader consideration of whether the AP's staffing position allows it to continue in operation. At the end of the isolation period the prisoner should be contacted to determine whether they remain symptomatic (licence continues), whether they return to the establishment or whether the licence is breached.

When someone is released on ROTL to their home or family address and needs to self-isolate they should self-isolate in the address they are released to. They should return to custody following the isolation period except if they are carers for other family members where a Special Purpose Licence may be considered. Governors are to make the judgement as to whether circumstances are significantly compelling and required to follow procedure set out on the ROTL Framework Document.

Risk issues should be balanced with the compassionate needs of the individual and special consideration must be given to those who have 'General Parental Responsibilities' and whether the welfare of children is compromised due to a carer contracting the virus. If a prisoner reports as ill on RDR then they should return to the establishment and self-isolate. We are currently seeking advice on whether establishments will be able to refuse ROTL on health grounds where prisoners have contracted Covid-19.

## **IEP Status**

There is a national instruction to temporarily rescind basic. All basic prisoners should be temporary reverted to standard IEP level.

Establishments must not look to move all prisoners to Enhanced status as a mechanism of providing additional spending power to prisoners as this will result in unnecessary pressure to the prison retail service.

## **Access to Television**

During the COVID-19 period, there is a national expectation that all prisoners, regardless of IEP status, should be provided with a Television.

The standard system for in-cell broadcasting provides prisoners with nine free-to-view channels. Governors are permitted to make additional Free-to-view Channels available, within the constraints of the available infrastructure in their prisons. It is the Governor's responsibility to ensure the suitability of any additional channel chosen for viewing. Governors have discretion to prohibit the showing of any material they consider unsuitable, taking account of the age of the prisoner and any other local factors.

## **Independent Monitoring Board**

The attached is guidance issued to IMB members on 27.03.20. Establishments should facilitate the statutory obligations of the IMB in line with this guidance where it is safe and practicable to do so, and in particular ensure that IMB members are provided with regular updated information, including daily briefings and regime management plans, via cjsm. Any exceptional circumstances where establishments are unable to facilitate these obligations locally should be recorded in the Defensible Decision Log and the relevant log entry shared fully with the board.



27 March  
Coronavirus update

## Industries / Laundries

Contingency requirements for laundry processing for all Public Sector Prisons during the COVID-19 situation have been issued by PSPI Laundry.

- Sites with a Covid-19 outbreak: The establishment should use water soluble (Alginate) bags for all of the linen in the affected accommodation unit, and for all persons using affected cells. All bedding, towels and Prison issue clothing should be placed in these bags, sealed, and then placed in a red banded laundry bag (or a normal laundry hamper which is then identified with a wide red band). This Laundry will go as normal to an existing laundry for processing. No soiled items should be disposed of through waste management units. Water soluble bags will be available from Branston from next week, item number 2058, and from Greenhams.
- Where sites are closed down due to staffing/prisoner workforce shortages: Contact should be made at the earliest opportunity to the laundry team at PSPI so we can direct laundry to other establishments. All work from your establishment will then be either classed as infected or normal, and the receiving laundry will undertake the processing of all Prison issue kit. At this point it may be returned washed, dried and folded but NOT pressed due to available time.
- Where staffing / prisoners are not available to process work: The PSPI laundry team have identified a minimum number of processing sites that we will work with to process work for the Service. If these processing sites are required, the work will be washed, dried, folded and returned as quickly as possible to your site. However, it is extremely likely that the return time for laundry will be extended and it is recommended that you look at your available stock levels to make sure that there is sufficient kit available to cover a 7 day duration at a minimum. Please place orders in the normal way where required, but do not over order as such orders will not be processed.

Return to business as usual: Where an establishment has staff and prisoner workers available to return to work and re-open their laundry, contact should be made at the earliest opportunity with PSPI laundry team to allow a return of laundry processing to your site (if you are a processing site).

## Mandatory Drug Testing

Mandatory Drug Testing (MDT) has been suspended for the period of COVID-19. Any uncollected samples should be destroyed.

## Offending Behaviour Programmes

In light of government advice published on 23 March 2020, OBPs as business as usual activity will cease.

- No new groupwork programmes should commence until further notice
- No new HSP, HII or IM cases should commence until further notice
- No other 1:1 interventions should continue until further notice
- Kaizen/ Rolling Programmes – individuals will be reviewed on a case by case basis for roll down. The expectation is that no new individuals should commence onto Kaizen (or LNM) now and programmes teams should prioritise working with individuals who are currently on the programme recognising individuals can complete if required on a 1:1 basis or enter into treatment breaks.

- Where groups are nearing an end, sites should contact [REDACTED] [REDACTED] [REDACTED] to take appropriate measures based on their operational circumstances.
- Teams should maintain a log of decisions taken
- This situation will be kept under review

## Offender Management

Key-work will be temporarily suspended within establishments.

Where establishments experience staff shortages in their OMU hub, it is likely that they will not be able to maintain a fully operational OM function. During these periods available staff should be used to administer discharge and reception functions plus provide the administration support for any ongoing court activity where relevant. It may be necessary to post staff who are unfamiliar with these processes into these areas, but HMPPS Equip should be utilised to help staff to become familiar with the necessary processes. Further guidance is provided in the attached documents.

For the period/s that we will be operating the ERMPs in prisons, all operational Band 4 POMs will be cross-deployed to operational duties and some/ most probation officer POMs will be cross-deployed to front-line duties in the community. This will mean that most of the work in the OMU will be carried out by administrators and potentially non-operational POM (where they exist AND are not ill). Our guidance reflects this and we expect Senior Probation Officers and Heads of OMU to use their professional judgement in their prioritisation of the work.

In light of the developing COVID-19 situation, the probation service have suggested that local and resettlement services may be prioritised, and probation officers from long term and specialist offices may therefore be redeployed to community offices so that OM work focused on release and resettlement is prioritised.

## Official Visits

Whilst Social visits are suspended, there may be a small number of official visits which need to be proceeded with. This may include access to defence for those subject to a parole hearing or involved in one of the small number of ongoing trials. In all cases, alternatives to face-to-face visits should be utilised as far as is possible. The use of video-link should be maintained to support this. In cell telephony should also be maximised to facilitate this small number of exceptions.

## Ordering

Supply lines for cleaning equipment will likely be affected by COVID-19 due to multiple mass purchases. It is important that sufficient cleaning materials are available to maintain the cleanliness of the establishment to prevent spread of the virus. Where supply lines are unable to deliver in the normal way, other sources should be considered. Guidance around Purchasing and Paying below should be followed to support this. Additional information about Greenham orders has also been provided.



Ordering -  
Covid-19.docx



Covid 19 QA  
supply.Greenham.M

## Pastoral care

Faith services and pastoral care are an important part of prison life. Current guidance from religious leads in the UK are that corporate worship is to be suspended and prisons will reflect the same during the period of COVID-19 in order to prevent the spread of the virus where possible.

We are approaching a busy period for Chaplaincy teams with Ramadan, Eid al Fitr, Easter and Passover all falling within the next 6-8 weeks. It is paramount that the faith needs of those in our care are dealt with sensitively and effectively and this will involve radically adjusting the way pastoral care is delivered. Governors are encouraged to make arrangements with their chaplaincy team to support prisoners with their faith needs. Below is a useful Q&A from Chaplaincy Headquarters to assist establishments in their planning:



Chaplaincy and  
Pastarol Support 2.C

Currently, we are trying to make as much alternative provision as possible. A number of the Faith Advisers have produced worship material and sermons/meditation notes which can be given to prisoners and used in cell. Please make sure that you make use of these. If you have not received these please speak to the relevant Faith Adviser.

In addition there is a daily slot on National Prison Radio which has been shared out amongst the different Faiths providing reflection and spiritual guidance. This includes a Friday lunchtime Muslim sermon and a Sunday morning Christian service. There are also programmes taking place on Wayout TV which have Chaplaincy input for those prisoners who have access to this facility.

## Parole Board Hearings

All face-to-face oral hearings with the Parole Board have been postponed, however the Parole Board is reviewing its caseload to identify cases that could be concluded on paper or via remote telephone or videolink hearing. This does not mean that prisoners will be prevented from progressing to a lower category prison, however it does mean this may be delayed.

If parole boards are taking place via videolink/telephone; escorting to videolink/telephone facilities can be carried out (subject to local circumstances) as long as social distancing can be observed and the room and equipment cleaned before and after use. Parole hearings play an important role in identifying prisoners who can be safely released. Given the increasing population pressures during the Covid-19 outbreak it is important that prisons facilitate remote parole hearings whenever it is safe to do so.

Prisoners should still be able to communicate with their legal teams regarding their Parole Board. Prisoners can write to their legal team to ask for more advice and should be provided with the materials to do so free of charge. They should also continue to have access to cell or wing based PIN phones. See also the advice on Official Visits above.

Offender Management Hubs are responsible for ensuring that sufficient communication is maintained with prisoners regarding the situation surrounding their boards (i.e. informing them that their boards have been postponed/adjourned).

## People Hub & Business Hub

In the event of COVID-19 shortages, establishments must determine at a local level the priorities within their Business and People hub operations that must be maintained. Administration of essential prisoner processes such as prisoner pay, prisoner applications, complaints and canteen should be maintained to a normal level wherever possible to ensure local stability within establishments. Consideration should be given to identifying these essential tasks at the earliest opportunity and to train a small number of staff from other areas to undertake these duties if required.

## Phone Access

It is essential to provide prisoners with sufficient contact with their loved ones. In-cell telephony is a valuable tool that is not currently present in some establishments. Taking into account some potential difficulties in regularly unlocking prisoners to access phones, alternative mobile options are being put in place. Please see the document below for full guidance on this.



Mobile  
Telephony.docx

Due to the limited number of additional lines available, use of the additional mobile phones has been split into Directorate based as outlined below:

### **A.M 0800 – 12:30 – PSP North**

Greater Manchester, Merseyside & Cumbria  
Yorkshire, Tees & Wear  
West, North & East Midlands  
LTHSE – Wakefield, Full Sutton & Frankland

### **P.M 13:00 – 17:30 – PSP South & HMPPS Wales**

Avon & South Dorset, Devon & North Dorset, South Central  
Hertfordshire, Essex & Suffolk  
Bedfordshire, Cambridgeshire & Norfolk  
London, Kent, Surrey & Sussex  
HMPPS Wales  
LTHSE – Long Lartin & Whitemoor

### **ED**

18:00 – 19:00 – PSP North  
19:00 – 20:00 – PSP South & HMPPS Wales

Any questions, please contact [REDACTED]

## Prisoners Monies

The policies surrounding prisoners' monies are currently under review in light of COVID-19.

Currently, pay for prisoners who normally attend activities should continue in all circumstances, even if the prisoner is unable to attend work. All prisoners including those normally unemployed

will receive at least their basic rate of pay; Governors may choose to pay recent average pay where higher, at their discretion.

Recent reporting shows that incoming money for prisoners has risen sharply. Governors should consider the increased pressures on DHL that come with the additional prisoner spending power when making decisions around prisoners monies.

There have been some requests submitted to SSCL for refunds of the Victims of Crime levy deducted from prisoners' recent wages. As has been established in previous guidance, those who had been working on ROTL who are no longer able to work should be supported through average prison wages. As such, there should be no requirement for a reimbursement of previous deductions of the levy as a means of additional financial support. Where requests for reimbursements of levy deductions have already been submitted to SSCL, these will not be processed. This does not affect governors' capacity to vary the level at which the levy is charged in future.

No TV rental payments are to be taken out, in order to allow prisoners access to canteen spends.

## **PPE and Hygiene Provision**



Interim guidance  
(v2.4) for PPE and Hy

Establishments should remain up to date with current Government guidance around social distancing and self-isolation and ensure that local operating procedures are updated to address the issues posed during the COVID-19 period. This can be found at [www.Gov.uk/coronavirus](http://www.Gov.uk/coronavirus).

## **Pregnant Staff**

If you are a pregnant member of staff you are classed as vulnerable to COVID-19 under Public Health England/Wales guidance. HMP/PS will take all reasonable steps to ensure that you are able to work remotely if you request this through your line manager.

## **Prison and Probation Ombudsman**

With regard to existing PPO investigations, investigators will make contact with prisons and seek to continue them – perhaps by obtaining documents or holding out telephone calls. The PPO understand that, at certain points, prisons may not be in a position to assist them due to the exceptional pressures arising from covid-19. If that is the case then Governors have the discretion to explain that to the investigator. If Governors are able to support investigations, at the time of the request or at a subsequent point, then they should endeavour to help as usual.

Meanwhile, prisons should continue to ensure that evidence and other items relating to deaths are preserved so that the PPO can access them when they are in a position to resume our normal service. The stock list of items that the PPO request when they open an investigation is included below – it is tailored according to the case, so they may not need everything in every case and they may add other case-specific items where relevant, but this may be a helpful guide

for the things you should preserve. The items marked in red are those that the PPO think are most at risk of being destroyed, and therefore where special action may be needed to ensure they are preserved.



PPO Notice to Prisoners - COVID-1!



PPO Notice to Staff - COVID-19.docx



DIC request for information.docx

## Prison Court Video Link (PCVL)

Addressing the backlog of convicted un-sentenced prisoners and Custody Time Limited cases held on remand is a priority for Ministers, not least because it will lead to some prisoners being released due to receiving community sentence or time served. We've been working closely with HMCTS colleagues to ensure we have a shared understanding of what is achievable through video hearings and that we maximise our ability to do this, recognising that ensuring the safety of staff and prisoners is paramount. Important information about this is included in the embedded document. Further guidance will follow.



COVID-19 - PCVL Guidance 03 04 20.d

## Purchasing & Paying

Contingency processes have been agreed to ensure that HMPs will be able to purchase and pay for goods and services as normal during this time; support will also be provided for purchasing via GPC and a central team.

Detailed guidance will be issued shortly but please note that at present business as usual processes should be followed. If there are any difficulties ordering goods **under contract** due to low stock levels, please consult with the relevant category lead in CCMD who will be able to advise further.

## Regime Reporting

Prisons will report the status of their regime to the Regional Silver on a daily basis. All establishments should be running to their agreed ERMP and reporting this as 'Red' in line with the limitations against a normal prison regime. Where establishments are unable to deliver the any of the four Key Regime Priorities, they should report this as 'Black.' Where it is identified that regimes are running at 'Black,' and it is projected that this will continue unless remedial action is taken, please contact [REDACTED]

## RPE

### Smoke Hood Refurbishment COVID-19

Due to the current escalating restrictions in place attributed to COVID-19 it is important that whilst there is full capacity available at the supplier to refurbish used Smoke Hoods the transfer of sets is undertaken without unnecessary delay.

Every establishment shall ensure that when Smoke Hoods are used they are sent as soon as is reasonably possible to the identified hubs. This applies to any previously used Smoke Hoods

currently being stored for return and refurbishment. Hubs shall ensure that Branston is made aware at the earliest opportunity of RPE sets to be exchanged or revalidated.

Following the use of RPE Sets. DO NOT put the Set back in the carry case. The set should be double bagged. Place bagged used sets and Bandolier Case in the correct returns box (one box per set (including Bandolier case) and return to the Regional Hub to complete a one for one exchange.

NDC Branston will make more frequent collections from the hubs to increase the flow of RPE.

RPE Refresher training requirements have now been extended from 12 to 18 months.

## **Safe Operating Procedures (SOP) using PPE - Escorts and Infected Prisoner Engagement**

This guidance outlines the use of PPE when escorting prisoners/interacting with isolated prisoners with suspected or confirmed cases of COVID-19. Existing processes for risk assessment should be conducted as with all escorts or specialist unlocks, making appropriate mitigations for any additional risks posed by the PPE. Any heightened security risks should be addressed in the same way as normal, making appropriate mitigations for any additional complications posed by the PPE.

Specific questions have been raised about the use of escorting chains on escorts. Risk assessments should be made about what is appropriate mitigation for escorts which account for both the security risks and the medical risks associated. This may require the introduction of further measures to ensure the risk is appropriately managed as is the case with escorts normally. This may include increasing the resource covering the escort or introducing double cuffing procedures. For example, escort chains can be used as secondary cuffing (alongside cuffing prisoner arms together) to constitute double cuffing as direct equivalent of having staff member "close cuffed" to prisoner. The chain allows a member of staff to supervise and be cuffed but maintain 2 metre distance.



SOP 1 - Escorting Prisoners to Hospital



SOP - 1 Use of PPE - COVID-19 - External COVID 19.doc



Escorts and Bedwats

## **Safety**

We are working to respond to questions from prisons and Group Safety Leads about managing safety during this period and are developing guidance to support establishments. Some headlines are covered below with more in depth guidance attached.

It is more vital than ever that we make sure that residents are safe. Staff should be briefed to use all the interactions that are possible in this period of regime restrictions and social distancing to check on welfare, taking any opportunity to communicate hope and encourage self-care, as well as to identify any change in appearance or behaviour that gives rise to concerns about raised risk of self-harm or suicide. Each resident should be seen at least once each day, and it is good practice to record that this has occurred (there may not be time for this to be done on an individual basis, but a landing or wing record may be possible).

## **ACCT / Suicide and Self Harm**

Provisional Guidance in the form of Q and A has been already circulated to Group Safety Leads and is attached here. This will continue to be updated as required. This includes guidance on undertaking the ACCT Assessor and Case Manager roles during this period, including quick guides to support staff in conducting both ACCT case reviews and assessments as well as written contribution forms for ACCTs.

## **CSIP/Management of Violence**

Guidance has been developed on this subject and is available here.

Again we recognise the need to continue using CSIP where resources allow but to apply a risk based approach where resources are reduced to safely manage those prisoners who post the highest risk.

This includes still following required CSRA processes and reviewing CSRAs where violent incidents occur particularly if this relates to in cell violent incidents.

## **Safety Bronze Role Brief**

To help you manage the risks around Safety each day, to identify and record actions taken we have developed a role brief for a Safety Bronze role while you operate in Command Mode.

This covers a daily multi-disciplinary risk management and review meeting and ACCT/Suicide and Self Harm, CSIP/Violence, Early Days, Segregation and Use of Peers.

## **Use of Family Liaison Officers**

This guidance and briefing pack recognises the current need to notify a prisoner's next of kin of a death of a prisoner by telephone instead of face to face contact and provides guidance if prisons need to use untrained Family Liaison Officers to break the news of a prisoner's death. This guidance is attached in 2 formats – PowerPoint and word.

## **Use of Listeners and Use of Peer Workers**

Guidance has been issued in the SLB and also attached here.

Safety contact points:



ACCT QA -  
provisional guidanc



Form - Individual  
Input.docx



ACCT Case  
Management.docx



ACCT  
Assessments.docx



Safety-Briefing-Sup  
porting-the-Listener



Safety Bronze Role  
Brief final.docx



Acting as FLO by  
phone full guidance

## Segregation Unit Procedures

Establishments should be aware that segregation units will still be required to run their usual procedures. All entry procedures, including healthcare assessments should be maintained, daily rounds should continue and 42 day reviews should continue to be made and signed off by the PGD.

## Social Visits

Due to restrictions on travel and social contact, it is not possible to maintain domestic visits at this time. This is an extraordinary measure during this period in which the nation faces an extreme public health threat. These will be restored at the earliest opportunity, as soon as it is safe to do so.

## Staff deployment prioritisation

As part of the daily meeting which should be held to establish the level of staffing available during COVID-19 period, establishments should consider their available staff and match it to the work commitments on that day. Clearly residential areas must be prioritised and staffed to the highest level possible. However deployments to secondary areas should be varied and set to meet the daily workload ensuring immediate priorities are met.

Establishments must ensure that at least a minimum gate function is maintained to ensure security and facilitate any deliveries into the establishment. Establishments must also ensure that there are sufficient resources deployable to Reception in the event of any discharges or receptions. Comms Rooms or ECRs must be sufficiently staffed at all times.

Establishments should use their regime management meeting to identify a list of priority tasks across the establishment that need to be staffed in order to deliver the key regime priorities. Establishments should then take steps to identify staff suitable for basic training to cover multiple areas in the event of significant shortages over coming weeks and take steps to provide some form of training and basic guides to these staff in the time available.

## Staff Suspension and Disciplinary and Grievance Procedures

Governors should review all suspensions to see whether staff could be returned to work in any capacity, subject to local risk assessment by the governor.

Governors should consider whether investigations, disciplinary hearings and formal attendance review meetings and grievances should be postponed in light of COVID-19, particularly where there are operational or staffing pressures or staff and union representatives are unable to attend. If decisions are taken to postpone, governors must ensure that staff and trade union representatives are kept informed.

Governors should ensure that all relevant decisions are recorded in the Defensible Decisions Log.

## Small repairs & Facilities Maintenance

Repairs and Maintenance should continue as fully as staff availability allows. Consideration should be given to alternative sources of resource (contractors through existing agency lines) if resource becomes particularly problematic.

The three providers Amey, GFSL and Mitie have agreed a common approach regarding PPE for their staff. In addition to the usual footwear, eye protection etc., staff will wear protective gloves at all times.

Face masks will not be worn when safe distances guidance is being maintained, but where staff are expected to enter a residential unit where prisoners are unlocked and safe distancing is not being maintained they will wear face masks.

The provision and wearing of PPE is a matter for each individual company, although we would expect a consistent approach. When a subcontractor attends site it will be for each individual contractor to provide and wear PPE and we need to facilitate their working arrangements. Governors or other managers are not expected to provide PPE for any non-directly employed staff. They should not restrict the use of PPE for any non-directly employed staff.

## **Waste Management**

Waste should continue to be collected from units throughout the COVID-19 period in order to support and sustain as clean an environment as possible. This may require short, supervised cleaning periods where cleaning parties clear the unit waste or doing door to door waste collection during meal services similar to that operated within Care and Separation Units.

Waste collection vehicles should be given access to the establishment where possible. If this is not feasible, large wheelie bins should be brought to the gate area in order to be collected. Further guidance will follow.

## **Ways of Working**

During this period establishments will not be audited and HMIP have confirmed the suspension of formal programmes of inspection. Establishment performance management mechanisms will also be suspended. Under these circumstances establishments should postpone any meetings that do not contribute to the management of the establishment regime.. Establishments may hold a morning meeting as normal and use this forum to review staffing levels and to attribute available resources to the daily work. The defensible decision making log should be updated to reflect all operational regime decisions made during daily meetings.

During this unprecedented period the increased use of prisoner labour through peer workers and risk assessed essential workers should be considered in non-security related roles to enhance the community workforce. The risk assessment of such individuals in advance of their use and appropriate rewards and recognition for their actions must be considered.

Operational managers from HQ have now been redeployed to prisons to provide additional support and regimes have been restricted to take account of the reduced staffing resources. The recently published additional bonus scheme for operational managers working in these difficult circumstances is to recognise the additional working pressures which we are conscious that operational managers are already facing and will face in the coming weeks. The expectation as key workers is that operational managers will continue to operationally support their establishment as best they are able whilst they are fit and well to do so. In respect of working hours, it is important that operational managers work sensibly and talk with their line managers where they are under pressure and faced with family issues at this time to ensure that they are supported. We recognise that everyone is doing their very best in the most difficult of circumstances and certainly there will be no disciplinary consequences for managers who are unable to work more hours due to outside commitments.

## **Ways of Working – Meeting Structures**

During the current nationwide situation it is imperative that all staff are kept up to date with changing advice and guidance that is being centrally published. As you are all aware, staff will become more anxious when they are not included in communication streams. When the Service is operating in a business as usual status Governors generally have large gatherings via full staff meetings and within operational boardrooms. Although the temptation is to continue with this mode of communications, Governors should consider, where possible alternative arrangements for communicating with your staff. There have been reports of large full staff meetings and operational boardrooms with standing room only in the last couple of days. Although as a Service we have been identified as essential key work, this does not mean that we should not consider the Governments advice on social distancing where possible. We are doing everything possible to source PPE from around the world to help protect our front line staff but unnecessarily exposing them at meetings counteracts some of these measures. Different ways in which communications can be cascaded should therefore be considered, for example:

- Holding operational meetings in larger areas such as visits or the chapel;
- Asking people to dial in, where possible;
- Holding smaller meetings and asking managers to cascade messages to smaller audiences;
- Briefing papers sent out to staff.

Managing prisons is extremely difficult at the moment but if we can do anything to help protect our staff and keep all our families safe we should. Doing so will ensure resources within prisons remain as high as possible and assist with the operational running during the difficult period we are going to encounter.

## Youth Custody Service (YCS)

The YCS will operate under the same temporary guiding principles as the rest of the adult estate when it comes to carrying out the Governments' instructions on social distancing, although it is important for children to continue to have social contact and therefore we are referring to "Physical distancing" instead. All non-essential activities and activities involving large groups of people or mass movement of children and young people have been ceased. Children and young people all have access to telephones in their rooms and have been provided with additional PIN credits free of charge.

Children and young people in custody are recognised as a particularly vulnerable group and additional safeguards should be considered where necessary. Human contact is especially important for children and young people, so this should be provided where possible and practicable.

The YCS must take steps to monitor, manage and mitigate the threat of significant numbers of staff and children and young people becoming infected with COVID 19 over a short period. This is so that safety and stability across the Children and Young People Secure Estate (CYPSE) can be maintained. Secure settings have a legal duty to safeguard the vulnerable children and young people held in their care. There is a high level of mental health disorder and neurodisability in this cohort of children and young people, and staff are required to pay particular attention to these needs to ensure there is no increase self-harm or suicide resulting from this extraordinary situation. It is also critical that our staff health and wellbeing are protected and supported.

The Youth Custody Service will shortly be providing detailed guidance to support all three sectors that provide Youth Detention Accommodation (Young Offender Institutions, Secure Training Centres and Secure Children's Homes).

Whilst the below core principles apply to all children and young people in **Secure Training Centres** and **Secure Children's Homes** they are **out of scope** of the broader operational guidance within this document.

### **Young Offender Institution (YOIs) under 18 sites**

Before this guidance and any wider related guidance related to HMPPS response to COVID-19 is applied, the YOIs who hold children and young people need to ensure that any plans or implementation of guidance fit with YCS and NHSE&I core principles.

#### *Core Principles:*

- **CONNECT:** The single biggest risk to mental well-being is isolation and disconnection from others. In the Secure Estate, given the increased risks of social isolation at this time, it is essential we **maximise opportunities for relational connection, whilst maintaining physical distance.**
- **Maintain Relevant Contacts:** Priority should be given to ensuring children and young people can maintain contact with family and Youth Offending Team worker.
- **Promote Physical Health:** Maximise personal and hand hygiene.
- **Provide as much fresh air as possible:** Maintain good physical and mental health by maximising physical activity and access to fresh air (in line with physical distancing guidance).
- **Structure the day & create routine:** Structure can be helpful especially when living with others, as it allows a sense of predictability and control. Establishing (or maintaining) a sense of routine is essential. Ensure regular timing for access to medication, including those who may have received a diagnosis of ADHD.
- **Ensuring there are activities to do:** The need for meaningful activity is paramount in protecting well-being and preventing challenging behaviour.
- **Allocate or maintain meaningful roles:** Where possible, allow young people to maintain or develop particular roles and responsibilities, either as individuals or groups. This may be as helpers, mentors, entertainers etc. Developing a respected role is important in maintaining purpose and belonging with others.
- **Promote openness –** Normalise anxiety and encourage children and young people to access support when they need it be particularly watchful over those that are withdrawn, quiet or find it difficult to ask for help.
- **Crisis plan:** Be pro-active in planning for those children and young people that you suspect may find periods of isolation or high stress particularly difficult. At each site the SECURE STAIRS multi-disciplinary team should be in place to identify and support those children who are most vulnerable. A Formulation and support plan will be critical in providing support.

- **Coordinated YCS and NHSE&I Response:** The Critical Case Panel has been extended to ensure support and advice is coordinated across the CYPSE via daily, weekly and monthly review processes in addition to the central Enhanced SECURE STAIRS team that has been mobilised across YCS, psychology and health.