



**Juliet Lyon CBE**

Chair, Independent Advisory Panel on Deaths in Custody

**Copied to:**

**Gillian Keegan MP**

Minister of State for Care and Mental Health

**Kit Malthouse MP**

Minister of State for Crime and Policing

14 December 2021

Dear Juliet

**COVID-19 NEW VARIANT OF CONCERN**

Thank you for your letter on behalf of the Independent Advisory Panel on Deaths in Custody (IAPDC) and the Panel's advice for prisons and other closed places of detention in light of the new Variant of Concern (VoC), Omicron.

Covid-19 continues to present a unique set of challenges for prisons. From the outset of the pandemic, ensuring the safety of those working and living in prisons has been, and continues to be, our priority. We continue to work closely with UK Health Security Agency (UKHSA) and be guided by public health advice. We have well-developed policies and procedures in place to manage outbreaks and infectious diseases and are well prepared to take immediate action whenever cases or suspected cases are identified.

In light of the Prime Minister's announcement of the move to Plan B measures in the community, and the evidence of increased transmissibility risks presented by Omicron, we are now reviewing our preventative measures in custodial settings. We have reinforced the importance of handwashing and the use of face coverings in crowded areas, as well as uptake of vaccinations and participation in regular testing for both staff and prisoners. Events are moving very quickly, and we continue to be guided by public health advice on the potential need for additional preventative measures.

**Vaccination**

The Joint Committee on Vaccinations and Incentivisation (JCVI), as an independent advisory committee, continues to guide the Government's vaccination roll-out, including the booster vaccine programme. On the 29 November 2021, JCVI recommended that the booster vaccine be made available to all those aged 18 and above, three months after their second dose. In this advice, they continued to recommend vaccinations should be prioritised based on age and clinical vulnerability. On this basis, we are continuing to support healthcare colleagues to vaccinate prisoners as quickly as possible in line with JCVI advice and priority order.

We are working with NHS partners to prioritise the rapid administration of booster vaccines over the coming weeks. Alongside healthcare teams, we continue to provide support, education and encouragement to both staff and prisoners to accept the vaccine and booster when they become eligible. All prisons have been instructed, in light of the Omicron variant, to prioritise vaccination clinics working with local healthcare providers to support the rollout of booster vaccinations.

## **Testing**

We continue to deliver an extensive Covid-19 testing regime for both staff and prisoners, developed in partnership with public health colleagues. This is continuing to help us identify cases early, limit transmission of Covid-19 into and between prisons and restrict major outbreaks.

All staff working in prisons have access to a twice weekly LFD and once weekly PCR. Prisoners who carry the greatest risk of transmitting Covid-19 into and between prisons also have access to testing. This includes at key transition points such as on reception, transfer, release on temporary licence, court and release. In addition, prisoners entering, or transferring between establishments, are subject to additional measures to prevent spreading infection including the use of reverse cohorting. Since August 2021, daily testing has also been on offer for staff who have been contacts of positive individuals through our Daily Contact Testing and Risk Mitigation Testing schemes to enable them to return to work safely.

We have been proactive in supporting governors to improve testing uptake in their prisons, launching an extensive communications campaign and providing bespoke advice to low uptake sites. We will also be strengthening our understanding of the Covid-19 risk level in prisons, and the most effective testing response, through rolling out wastewater-based surveillance, initially to 60 sites across the estate by March 2022.

## **Individual health checks**

During the pandemic, NHS England and NHS Improvement and UKHSA have worked closely with HMPPS to ensure appropriate arrangements are in place for people in prison to continue to access the physical and mental health care services they need.

All people in prisons receive an early health assessment within the first 24 hours of entry. The initial assessment is fully comprehensive to ensure that all of the physical and mental health needs of an individual are identified and addressed at an early stage. A general health assessment and second stage screening should be carried out within 7 days of arrival. This will incorporate questions to establish any mental health concerns and allows referrals to the mental health team if indicated.

Healthcare providers in prison have robust processes in place to identify, assess and treat offenders with mental health needs, and integrated mental health teams work with HMPPS colleagues and attend regular multi-disciplinary meetings about those people in prison at risk, or with complex needs.

## **Bereavement support**

HMPPS' chaplaincy response to Covid-19 forms part of chaplains' routine provision and chaplains continue to provide bereavement support as a regular part of their work in all establishments. As a multi-faith team, the chaplaincy service is able to advise establishments on cultural and religious practices surrounding grief and to make appropriate provision for those who need it. We are also facilitating CRUSE bereavement training for chaplains. HMPPS has also worked with senior faith and belief leaders to develop and publish prisoner communications supporting the roll-out of the vaccination programme.

## **Communication**

Throughout the pandemic we have carried out extensive communications campaigns to ensure clear and regular information is available for people in custody, and their families, in formats that are accessible to their needs. We have made use of prison radio and TV, peer mentors, as well as providing information to staff to support conversations with prisoners. As we respond to the potential impact that the COVID-19 new variant of concern may have on our prisons, the recovery of key work will remain a top priority.

### **Re-introduction of mitigations**

Regime mitigations are still available to those sites that go into outbreak and a number of establishments have been supported to temporarily introduce mitigations in response to the suspension of social visits or due to regimes restrictions as part of outbreak management. We continue to keep regime mitigations under review and, in the event of significant outbreaks across the estate, we will consider whether further mitigations should be introduced.

### **Early release on licence**

The temporary release of low risk prisoners, introduced in April 2020 under advice from UKHSA, was a necessary measure to protect life and prevent thousands of prisoners becoming infected. Over subsequent months, HMPPS and health partners were successful in controlling the virus in prisons and in August 2020 we paused the temporary release scheme. This decision will be kept under review.

We are grateful for the ongoing advice from the IAPDC and my officials will continue to engage with you as part of the Recovery Independent Advisory Forum and wider engagement.

Yours ever

A handwritten signature in blue ink that reads "Victoria Atkins". The signature is written in a cursive style with a large initial 'V'.

**VICTORIA ATKINS MP**