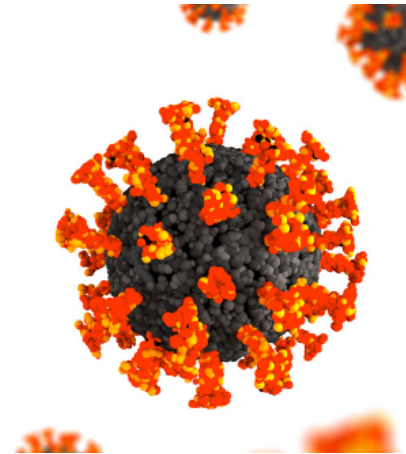


What can I do to help keep myself safe from coronavirus while I'm in prison?

A patient guide



Some of the answers to these questions were originally written for *Inside Time*, the national newspaper for prisoners and detainees.

Keeping safe in prison

Q: Is it safe to go out on the exercise yard?

A: As for everyone in the community, if you go out for exercise, you need to be careful to keep 'social distancing' rules, staying at least 2 metres away from anyone else. This is particularly important for people at higher risk of severe illness with coronavirus due to underlying medical conditions.

Q: Is it safe for an officer to come into my cell?

A: It is important for everyone in secure environments – both residents and staff – to follow the public health guidance on social distancing, self-isolation and shielding. Sometimes it will be necessary for officers as part of their duties to come into a cell. Depending on whether you have symptoms or are shielding and depending on the task they have to do, personal protective equipment (PPE) may be worn. Sometimes staff may wear a surgical mask, gloves and an apron. At other times, depending on the situation, they may wear goggles or a visor, a gown and a different type of mask.

Q: Can I catch the virus from food or from things bought from the canteen?

A: COVID-19 transmission occurs mainly through droplet (coughing, sneezing) and contact (contaminated surface) spread. The risk of the virus being spread through the air is increased during certain medical and dental procedures. That is why dental services have been very restricted and why special PPE is needed if, for example, someone has a cardiac arrest and they need assistance to help get their heart pumping effectively. COVID-19 virus has also been found in stools and other body fluids, including urine and tears. This means regular handwashing (for at least 20 seconds), avoiding touching your face, and cleaning of any surfaces that are touched is very important.

Food that has been prepared should have been done so following strict health and safety guidelines and canteen products should have been packaged and distributed following similar guidance.

Q: What are 'cohorting' and 'shielding'?

A: These can be quite confusing terms and they have been used in different ways over the past few weeks.

'Cohorting' is the grouping of residents, whether they are at risk of severe infection from coronavirus, or whether they might risk infecting others. On the advice of Public Health England, three types of 'cohort units' have been introduced into prisons:

- **Reverse Cohort Unit (RCU)** for temporary separation of
 - a) newly received residents to monitor them for emerging symptoms (to prevent potential infection spread from the community) and also to protect them from infection where there is a confirmed COVID-19 outbreak.
 - b) patients recently returned from hospital.
 - c) household contacts of symptomatic residents but there are several options in this situation, and local decisions will be made depending on a number of other different factors.

- **Protective Isolation Unit (PIU)** for temporary isolation of symptomatic residents

- **Shielding Unit (SU)** for temporary isolation of 'extremely vulnerable' residents who are at risk of severe illness from coronavirus (COVID-19), in line with national guidance.

These 'units' may not be in three separate areas, and things are likely to change over time.

'Shielding' is the protection of someone who is at particular risk of severe infection with coronavirus. This will involve staying behind their door to minimise face-to-face contact with others and medicines and food being brought to their room. Different establishments will have different arrangements for exercise, showering and telephone calls for this group of residents.

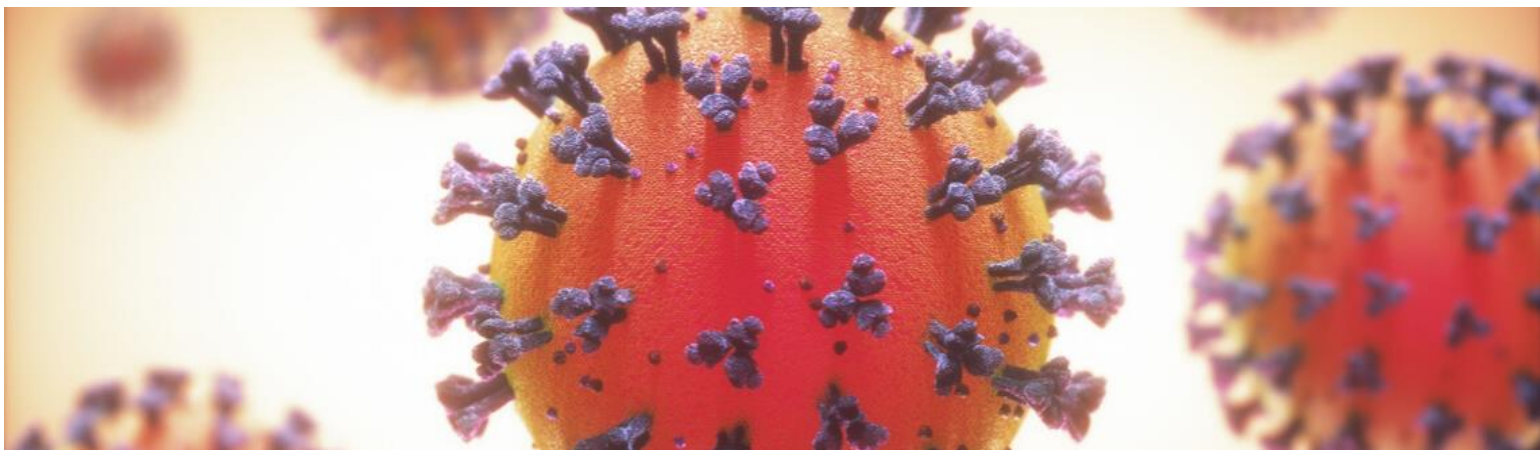
Q: Who needs to wear facemasks?

A: As we have seen over recent weeks, guidance on wearing PPE is changing. Advice is provided by Public Health England: Residents will only need to wear a face mask if they are thought to have coronavirus and if they are in a communal area or may come into contact with other people, for example while being interviewed or transported to and from hospital.

Q: Should my Ramadan fasting be any different this year?

A: Your local Imam and healthcare team will be able to give you advice about fasting for Ramadan. This year, it is more important than ever to check with the healthcare team to see if it will be safe for you to fast if you have an underlying medical condition, particularly one that puts you in the 'high risk' or 'extremely vulnerable' group for severe illness with COVID-19 infection (see below). If you take medication, where safe, it will be given to you or, if you cannot safely keep it in your possession, it should be available for you to take to fit in with fasting times. If you need to take medication during the day and your health will suffer if you don't, then it is permissible to abstain from fasting.

At times of the day when you are not fasting, it is important to make sure you stay hydrated (which will usually mean drinking 6-8 cups of water every 24 hours.) If you become unwell with coronavirus symptoms, particularly if you get a fever, it will be important for you to seek medical advice immediately, to break your Ramadan fast and drink plenty of water. Even if you are not sure if your symptoms are related to COVID-19, it is very important that you seek medical advice if you become unwell. Once you have fully recovered from COVID-19 or any other illness, you must check with the healthcare team before restarting your fast.



Keeping on top of your health in prison

Q: If I get a cough and a fever, will I be tested?

A: At the time of writing this article, if you get a cough and a fever, you will need to stick to 'stay at home' advice. You will not be allowed to mix with other residents on your wing again for at least seven days and until 48 hours after your fever has settled, without using paracetamol. Tests are being done on people with symptoms who need admission to hospital. Nevertheless, things are changing fast, so when you read this, tests may be more widely used!

Q: Is paracetamol any use in relieving symptoms?

A: Paracetamol is the first choice medicine for relieving symptoms that people may experience with coronavirus, including fever, headaches or other flu-like symptoms such as aching muscles. After looking at the available evidence, the NHS and the National Institute for Health and Care Excellence (NICE) have agreed that it is also safe to use ibuprofen at the lowest dose possible and for as short a time as needed to relieve symptoms.

Q: I've heard everyone should be taking Vitamin D. Can I get it prescribed for me?

A: Vitamin D helps to control the amount of calcium and phosphate in our bodies. Both are needed for healthy bones, teeth and muscles. Vitamin D is found naturally in a small number of foods including oily fish, red meat, liver and egg yolks. It is difficult to get all the vitamin D we need from food and the main source is from sunlight acting on our skin. During autumn and winter, the sun is not strong enough for the body to make Vitamin D and everyone is advised to consider taking 10 micrograms of vitamin D a day.

During the spring and summer, most people can get enough sunlight and do not need to continue taking vitamin D supplements. Advice about vitamin D and the coronavirus was recently published on the [NHS website](#). It encourages people to consider taking 10 micrograms of vitamin D a day to keep their bones and muscles healthy. This is because people are likely to be staying indoors more than normal for this time of year, either because they are following the government's 'stay at home' advice or because they may be shielding. There is currently no evidence that Vitamin D reduces the risk of catching or getting ill with coronavirus.

The advice for people who spend a lot of time indoors usually, who have dark skin (for example with an African, African-Caribbean or south Asian background) or who wear clothes that cover up most of their skin is that they may need to continue taking vitamin D all year round, to avoid vitamin D deficiency. This advice has not changed.

Multivitamins containing vitamin D can be bought from a chemist in the community and they are available on the canteen for people in prison. They will not be prescribed by the

healthcare team. Some people may have a medical condition that means they should either take more than this amount of vitamin D – or should not take it at all, because it could be dangerous for them. Please contact your healthcare team if you are not sure.

Q: If my cellmate starts coughing what should I do?

A: When someone you are living with shows symptoms that could mean they have coronavirus it is normal to be worried. It is important to remember that coughing is a common symptom and may be due to another condition such as asthma – or even due to something simple like clearing the throat or breathing in a biscuit crumb! It is important to check how your cell mate is feeling and then agree to press the cell bell to alert an officer. It is important that you don't leave the room to let someone know, as this could increase the risk of spreading the virus, if this is the cause of the cough.

Q: What health conditions can put someone at extra risk with COVID-19?

A: There are two categories of people at extra risk of severe illness with coronavirus; those in the 'highest risk' or 'extremely vulnerable' group will be offered the option of shielding during the pandemic wave and during any outbreaks in prisons that follow this initial 'wave'. They will receive a letter about shielding, from the healthcare team. This includes people who:

- have had an organ transplant
- are having certain types of cancer treatment
- have blood or bone marrow cancer, such as leukaemia
- have a severe lung condition, such as cystic fibrosis or severe asthma
- have a condition or are taking medicine that makes them much more likely to get infections
- are pregnant and have a serious heart condition

The second group, at increased risk of severe illness with coronavirus includes people 70 or older, those who are pregnant and those with 'high risk' medical conditions, listed by the government and NHS as:

- lung conditions, such as asthma, COPD, emphysema or bronchitis
- heart disease, such as heart failure
- chronic kidney disease
- liver disease, such as hepatitis
- conditions affecting the brain and nerves, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
- diabetes
- problems with your spleen – for example, sickle cell disease, or if you've had your spleen removed

- a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
- being very overweight (having a BMI of 40 or above)

In practical terms, people are likely to fall into this group if they are usually offered an annual flu vaccination. They will, like other people in the community, be advised to be very strict at observing social distancing and only leave their rooms for collecting food and medicines, showering and telephone calls, exercise and any medical need.

Q: Is it still possible to see a nurse or a doctor if I have problems that aren't related to COVID-19?

A: It is very important to continue to ask for help if you are concerned about your health. People who come into prison often have a number of different medical problems and they may not have been able to look after their health very well before coming in, for all sorts of different reasons. While we understand that prison is a difficult place to be, particularly during this time of COVID-19, healthcare staff are still able to help you. **Do not ignore symptoms that you are worried about, particularly if you think they might be due to a serious medical condition that needs emergency treatment or urgent referral, for example a heart attack, a stroke, an asthma attack, or cancer.** Although you may not want to put extra pressure on busy staff or may be afraid of catching COVID-19 if you ask to be seen, you must not delay asking for help. Precautions will be taken to keep you safe from COVID-19. This may mean you start off by talking to one of the healthcare team over the telephone, or that they see you while wearing PPE.

Q: What will happen to my usual medicines while I am in prison and when I go home?

A: Where it is safe to do so, you are likely to be given your medicines in possession, for up to 28 days at a time. It will be important to let a member of the healthcare team or prison staff know if you have any concerns about looking after your medicines or about taking them safely. When the time comes for you to go home, you are likely to be given a supply of up to 28 days of your usual medicines (or a prescription for this amount.) This is to allow for difficulties you may have in getting to see a GP when you are first released, during the time of COVID-19.

Q: What about if I am taking methadone or buprenorphine when I am released?

A: If you are taking medicines (like methadone or buprenorphine) for problems with drug use, your team in the prison will contact the community drug services local to the area to which you will be released, so that they can offer you an appointment, where they are able to. You should be given a prescription for up to 14 days so that you can continue with your medicine, even if it is difficult to get to see the community drug team. It is important that your prison substance misuse team checks whether or not the pharmacy you will be using is still able to offer a supervised consumption service during COVID-19 (for you to take

your methadone or buprenorphine while you are in the pharmacy). If the pharmacy cannot offer this service, you should make sure you are given a prescription with instructions for 'daily pick up', so that you can collect your medicine once a day from the chemist.

Q: I am supposed to have an appointment at the hospital. What will happen to this?

A: Appointments that are urgent, for example cancer referrals or those that need you to attend the hospital for treatment that cannot be delayed, will continue at the hospital. Some 'routine' appointments may be offered over the telephone (or possibly by video, where this service is available). Others will be put on hold to allow hospitals to cope with the increased demand for care as a result of COVID-19. The hospital will contact your healthcare team if your appointment is going to be changed or delayed. Even if you have been told that your appointment has had to be delayed and will be rearranged, it is important to remember to speak to a member of the healthcare team if you have symptoms that are worrying you or that seem to be changing or getting worse.

Q: Is it normal to feel more anxious than usual?

A: These are very difficult times for everyone. Many people are noticing that they feel more vulnerable, anxious or irritable than normal and that they are finding it difficult to concentrate or sleep.

It is helpful to keep in contact with family and friends, which will be mainly by telephone at the moment. Other ways to manage anxious feelings include relaxation and breathing exercises, yoga, reading, craft activities or writing letters to loved ones.

I have been struck by how well staff and residents have been managing such difficult times, while showing great resilience and respect for one another. However, I am also aware that, at times, people in prison have felt alone or forgotten. This is not the case; there are dedicated teams in NHS England and Public Health England, as well as healthcare providers and specialists, who are working around the clock and closely with HMPPS to ensure we protect the health and wellbeing of everyone in prison during the COVID-19 pandemic. We are all committed to getting everyone through this very difficult period and we will be guided by the best clinical and scientific information, applying this to prison settings.

If you find any of this information confusing or different from the latest guidance you have seen on the news or read about, or if you have concerns or questions about your health, you should speak to a member of the healthcare team where you are currently staying.

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