

## Camden & Islington Public Health

# Guidance for those providing services to someone who is unable or unwilling to self-isolate

VERSION 4.2

8 April 2021

**Please note this is interim local guidance while national guidance is awaited.**

**If you have questions relating to this guidance please contact Public Health:**

[CIPHAdmin@islington.gov.uk](mailto:CIPHAdmin@islington.gov.uk)

### **This guidance contains**

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## **1 About this guidance**

*This local guidance does not replace national guidance. Local guidance has been produced to facilitate the interpretation and application of national guidance to specific local services and situations, taking full account of national guidance and evidence.*

This advice is intended for those providing residential services to someone who has the symptoms of coronavirus (Covid-19), or has tested positive, but is unable or unwilling to follow self-isolation instructions.

This may include service users with learning difficulties, dementia, or multiple complex needs such as substance addiction and mental ill health. Some service users may be prepared to remain onsite but not self-isolate from other residents, while other service users may decide to leave the site.

You know your service and service users best – in particular, you are best placed to judge which measures below are likely to be practical and which may do more harm than good. We will keep this guidance under constant review in light of the evolving COVID-19 situation and changes to national guidance

## **2 Keep your service users up-to-date and, where possible, enable them to make informed choices**

Your service users may not have access to the same range of information as you. Clear, up-to-date verbal briefings, leaflets and/or posters can help inform them of the national situation, what this means for them, and how best they can protect themselves and others. Easy read and translated information are also available. See resources at the end of this guidance for leaflets and posters.

Against the backdrop of the new Regulations and the Mental Capacity Act 2005 staff members should be able to identify that all practicable steps have been taken to support the service user to make the right decision. Take a pragmatic approach and check that you have:

- Advised any families and carers involved to support the service user to self-isolate.
- Steps have been taken to seek to explain why not going out is important, and to support their decision-making capacity in this context.
- Steps have been taken to maximise the service user's autonomy - i.e. assist the service user to make the decision for themselves.
- Thought about creative and flexible approaches to support the service user to maintain well-being: for example, supporting them to take exercise in circumstances which minimise risk.

## **3 Plan how best to use the facilities to keep all residents safe**

Where possible, provide a dedicated bathroom for the symptomatic person or group of symptomatic people.

If this is not possible, give service users sharing bathroom and/or kitchen facilities with the symptomatic person priority access to sanitisers and cleaning products, and up-to-date information about how to use them.

## **4 Ensure regular cleaning of shared spaces that the service user continues to enter**

Encourage frequent handwashing for 20 seconds with soap and water for all who use shared spaces. Provide support with handwashing for those who need it.

Arrange regular cleaning of shared spaces, especially hard surfaces that are frequently touched.

Make essential shared spaces as easy to clean as possible. This may involve temporary removal of items (e.g. kettles from kitchens) to ensure surfaces are quick and easy to wipe down.

Ensure all shared spaces are well-ventilated, preferably by an open window.

Stay up to date on [cleaning guidance](#).

## **5 Limit access to shared spaces where possible**

For non-essential shared spaces, close these or limit access. If a shared space is a throughway, remove or cover seating and resources to discourage service users from congregating.

In larger buildings, consider if it is possible to restrict access between different areas, so you can reduce the amount of mixing that service users do.

## **6 Limit social contacts**

Reduce the amount of face to face contact with support or healthcare workers through the provision of personal (or frequently cleaned) phones.

Ensure staff and volunteers who fall into vulnerable groups (see guidance below for the definitions of vulnerable groups) are able to work elsewhere and are fully informed.

## **7 Actions to take if a service user refuses to self-isolate**

Consider the following:

### **Could the service user be persuaded to self-isolate?**

If appropriate, discuss with the service user why they are leaving their room or premises, and whether their needs can be met onsite. Consider whether service users can be offered incentives – such as food or laundry services – to comply. For service users with alcohol or drug dependency, we are aware of this issue and are working as a system on solutions. In the meantime, please contact your local drugs and alcohol service if you need to discuss this.

### **Could any other residents at increased risk be temporarily re-located?**

Please see guidance for vulnerable groups at [Staying Alert and Safe Social Distancing](#)

Some service users may fall into the “clinically extremely vulnerable” category, and whilst “shielding” is currently paused, should still take additional precautionary measures. Please note that at time of writing this includes those with severe COPD, which is more common in homeless populations. Please see the guidance at [Guidance on Shielding and Protecting Extremely Vulnerable Persons from COVID-19](#).

### **Should you close part or all of a site to new entries?**

Please discuss with your commissioner and the London Coronavirus Response Cell (0300 303 0450, [LCRC@phe.gov.uk](mailto:LCRC@phe.gov.uk) or [phe.lcrc@nhs.net](mailto:phe.lcrc@nhs.net)) if you are considering this step, which should be weighed against the likely consequences of clients not having access to your services. Contact your local public health team ([CIPHAdmin@islington.gov.uk](mailto:CIPHAdmin@islington.gov.uk)) if you require additional public health input on this.

### **What to do if a service user leaves their room or the premises?**

If possible, put in place a system for explaining why an incident took place, how they might have impacted on the individual and/or others and what steps were taken to mitigate those impacts.

Consider applying to use the emergency powers to restrain the individual who is refusing to self-isolate. See section below.

## **8 Use of emergency powers**

Under public health legislation, PHE has powers to test and isolate individuals in limited circumstances. However, these are very much a last resort. If you believe you have a case where these powers might need to be invoked, please contact Public Health England to discuss (London Coronavirus Response Cell 0300 303 0450, [LCRC@phe.gov.uk](mailto:LCRC@phe.gov.uk) or [phe.lcrc@nhs.net](mailto:phe.lcrc@nhs.net)). In general, it is accepted that we can only do our best to support individuals to follow guidance and to take measures to protect those around them where this is not possible.

## **9 Additional Resources**

[Easy read guidance](#) from PHE

Easy reads guidance from [MenCap](#)

PHE [cleaning guidance](#)

PHE [guidance for hostels](#)

PHE [guidance for care homes](#)

PHE [stay alert and safe guidance](#) for everyone:

PHE stay at home [guidance if someone has the symptoms of coronavirus](#)

Doctors of the World have [translated the latest NHS Guidance into 36 languages](#)

Groundswell have [produced specific advice for rough sleepers and those in hostels and temporary accommodation](#)

Books Beyond Words have produced a [wordless story](#) that will help people to understand what to do if you have Coronavirus and how to keep yourself and those who you care about safe. The story also shows how to safely help others who may be self-isolating