



Ministry of Housing,
Communities &
Local Government



Public Health
England

Protecting and improving the nation's health

COVID-19: guidance on isolation for domestic abuse safe-accommodation settings

Guidance to support domestic abuse survivors including their children in domestic abuse safe accommodation settings, including refuges and other types of safe accommodation



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Who this guidance is for?

This guidance is to support the management of survivors of domestic abuse and their children who are cared for in domestic abuse safe accommodation settings, including emergency safe accommodation. This guidance covers:

- Specialist refuge/safe accommodation (shared house)
- Specialist refuge/safe accommodation (self-contained units with some shared spaces)
- Dispersed, self-contained accommodation with support
- Move-on accommodation
- Properties within Sanctuary Schemes or with other enhanced security measures

It provides advice on managing isolation for clients and their children under 18 in the event that either they or an accommodation staff member either shows symptoms of COVID-19 or is confirmed as having the disease.

Symptoms of coronavirus (COVID-19) are a high temperature (37.8 degrees Celsius or above) or a new, continuous cough.

This guidance should be read alongside the [guidance on social distancing](#).

General guidance for all domestic abuse safe accommodation settings

Refuges and other forms of domestic abuse safe accommodation do not need to close unless directed to do so by Public Health England or the government.

Refuges (shared houses), refuges (self-contained units), dispersed accommodation, move-on accommodation, sanctuary schemes and other forms of emergency safe accommodation, are usually considered households for the purposes of the household self-isolation policy. Individual accommodations may be made up of one or more households for the purpose of this guidance.

If a client or their children show symptoms, they should self-isolate in line with the [guidance for households](#). Staff can continue to enter and leave the rest of the site as required. However, continuity of staff should be maintained as far possible and staff should follow infection control procedures.

These households, in contrast with other households, will almost always need to have staff and other professionals arriving and leaving unaffected areas of the premises during the period of self-isolation. We also recognise that these households, some of which care for some of the most vulnerable children and young people, will also need to review guidelines for professional visitors and contractors.

Careful infection control measures should be followed during and after visits, in line with the [social distancing guidance](#), as any self-isolating household would do if they had unavoidable visitors (eg to undertake urgent repairs). Guidance on cleaning and disposal of waste is available [here](#). No-one should visit a refuge or safe accommodation if they have symptoms of COVID-19.

These infection control measures would apply to:

- Domestic abuse refuge managers
- Domestic abuse refuge support workers
- Children's support workers
- Police investigating domestic abuse cases
- Advocacy workers
- Clinicians providing healthcare
- Councillors and therapists
- Any visiting professionals
- Contractors
- Any other visitors

Staff, clients and visitors should be reminded to:

- wash their hands for 20 seconds, more frequently than usual each day
- to use hand sanitiser gel in addition to soap and water and, in any case, if soap and water are not available
- cover their mouth and nose with a tissue or their sleeve (not hands) when coughing or sneezing, throw the tissue away and wash their hands,

For the purpose of this guidance, domestic abuse safe accommodation settings may be made up of one or more households. Whether it should be treated as a single household or as multiple households, and how self-isolation is practised, will depend on the physical layout of the setting and its staffing arrangements. For example, where safe accommodation provision is spread across several, separate self-contained units, providers may wish to treat these as different households.

Staff ratios must be maintained at a safe level to protect the clients and their children. If the accommodation setting cannot maintain safe ratios due to COVID-19, the same procedures should be followed as in any other case of staff absence.

If any members of staff become unwell on site with a new, continuous cough or a high temperature, they should be sent home. Staff will be eligible for statutory sick pay (SSP) when staying at home.

Domestic abuse safe accommodation sites should assess staffing levels on a daily basis and liaise with local authorities and commissioners.

Where staff and support workers travel between different domestic abuse safe accommodation sites or other residential settings, and one is an affected setting, they will need to apply careful infection control. Staff and support workers who are well should

avoid close (face-to-face) contact with people showing symptoms and practice social distancing (staying 2 metres apart) and ensure frequent hand washing.

Where possible, accommodation settings should ensure continuity of staff to minimise the risk of transmission. If this is possible in some circumstances, safe accommodation providers should maintain staffing continuity as far as possible.

Supporting clients and their children in domestic abuse safe accommodation through self-isolation will be a complex task. Consideration should be given to the needs of the entire household and to individual children's and young people's needs, working closely with the parent client and support workers.

What to do if a resident becomes unwell?

Specialist refuge/Safe accommodation (shared house)

All refuges working jointly with local authorities should assess the risks both for the residents of the refuge and the individual concerned.

If a refuge client or their children becomes unwell with a new, continuous cough or high temperature, both they and their family should remain in their own room and follow the self-isolation guidance. Ideally, a window should be opened for ventilation.

Staff should go online to [NHS 111](#) or call 111 (if they don't have internet access). In an emergency, call 999 if the person is seriously ill or their life is at risk. The unwell person should not visit a GP, pharmacy, urgent care centre or a hospital.

The refuge can remain open with refuge staff and visiting professionals being able to leave and enter the unaffected areas of the refuge as required. However, continuity of staff should be maintained where possible and staff should follow infection control procedures.

Staff should ensure that the unwell person minimises visiting shared spaces, such as kitchens, bathrooms and sitting areas, as much as possible and keep shared spaces well ventilated if possible. Wherever possible, unwell persons should not visit shared spaces when others are present. The unwell person should aim to keep 2 metres from other clients and staff in the refuge and not share a bed with their children.

If toilet or bathroom facilities are shared, the unwell client should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using regular cleaning products before being used by other clients or staff.

If a separate bathroom is not available, consideration should be given to drawing up a rota for washing or bathing, with the person who is unwell using the facilities last, before thoroughly cleaning the bathroom themselves (if they are able or it is appropriate). If a child is ill, their parent should clean the bathroom.

A person who is unwell should use separate body and hand towels from other people.

They should avoid using shared kitchens while others are present. They and their children should take their meals back to their room to eat and use a dishwasher (if available) to clean and dry crockery and cutlery.

Staff should follow the guidance on cleaning and disposal of waste – available [here](#).

Specialist refuge/Safe accommodation (self-contained units with some shared spaces)

If a refuge client or one of their children becomes unwell with a new, continuous cough or high temperature, both they and their family should remain in their self-contained unit and use their own bathroom and kitchen if at all possible. They should follow the self-isolation guidance. Ideally, a window should be opened for ventilation.

The refuge can remain open with refuge staff and visiting professionals being able to leave and enter the refuge as required. However, consistent staff rotas should be used where possible and staff should follow infection control procedures.

Staff should ensure that the unwell person minimises visiting shared spaces, such as kitchens and sitting areas, as much as possible and keep shared spaces well ventilated if possible. . Wherever possible, unwell persons should not visit shared spaces when others are present. The unwell person should aim to keep 2 metres from other clients and staff in the refuge and not share a bed with their children.

If they are not able to avoid using shared kitchens while others are present, they and their children should take their meals back to their unit to eat and use a dishwasher (if available) to clean and dry crockery and cutlery.

Staff should follow the guidance on cleaning and disposal of waste – available [here](#).

Dispersed safe accommodation with support

Households living in semi-independent accommodation should follow the general [guidance for households](#) published by the Government.

Visiting professional workers can continue to provide support to clients and their children but should follow infection control guidelines particularly closely. Wherever possible, support should be provided over the telephone or via the internet instead of in person.

Properties within Sanctuary Schemes or other enhanced security measures

Properties within sanctuary schemes are domestic abuse survivors' own homes, where it is safe for them to remain and families should follow the general [guidance for households](#) published by the Government.

Visiting professional workers can continue to provide support to clients and their children but should follow infection control guidelines particularly closely. Wherever possible, support should be provided over the telephone or via the internet instead of in person.

Mental health

It is important to take care of mental as well as physical health and seek support if needed. There are also sources of support and information that can help, such as the [Every Mind Matters website](#) for adults, and [Young Minds](#) for young people.