

Overview of outbreak management in short term asylum seeker accommodation settings

Background information

This is a practical guide for managing cases or outbreaks of infectious disease in asylum accommodation settings such as:

- short-term holding sites
- initial support asylum accommodation settings, including accommodation for unaccompanied asylum seeker children

Immigration removal centres have different arrangements for healthcare and are therefore not included in this plan.

Aims of this overview

This overview has been developed to help ensure that:

- roles and responsibilities of all partner organisations are explicit and well understood by all
- any outbreaks or significant cases are identified in a timely way, and that processes for notification, clinical assessment and treatment are clear and in place
- the right information is available to be passed to local UKHSA health protection teams (HPTs) find your HPT
- all asylum seeker accommodation settings understand the importance of infection prevention and control (IPC), and have a clear reference guide on how to implement IPC measures and when to seek support

This overview also provides space for a contact list for each setting, which will help staff when notifying HPTs of significant cases or outbreaks.

Roles and responsibilities

Many different organisations are involved in the management of outbreaks or significant cases affecting residents and staff living and working in asylum seeker accommodation settings. The table below outlines each organisation's responsibilities.

It is recommended that the key contacts section is completed for each individual setting at the time of opening, and kept up to date.

Organisational roles and responsibilities and contact details

Asylum seeker accommodation managers and staff

Responsibilities

- support residents to seek urgent healthcare if unwell, including arranging transport when necessary
- help residents access GP or primary care for advice on non-urgent health matters
- notify local HPT if they feel the setting may be experiencing an infectious disease outbreak, for example more than one resident or staff member has acute respiratory symptoms, or diarrhoea and/or vomiting, or skin rashes
- ensure basic IPC measures are in place as advised by HPT, local health services and local authority

 provide a safe working environment for staff attend incident management team (IMT) meetings if required 	
Key contacts – name, email, telephone Name of setting:	
Address including postcode	
Daytime contacts Monday to Friday:	
Night and weekend contacts:	

Home Office contracted provider (for example Clearsprings or Serco)

Responsibilities

- attend IMT meetings if required
- support the registration of residents with primary care
- support delivery of public health actions as advised by the HPT; this may include stopping the transfer of cases, suspected cases and close contacts
- assist in providing the HPT with names and contact details of cases and contacts to assist in implementing public health control measures
- support implementation of IPC measures in accommodation where outbreaks are reported/recommendations made
- encourage all staff working in asylum seeker accommodation to be up to date with their vaccinations

vacentations
 ensure staff in asylum seeker accommodation have access to appropriate personal protective equipment (PPE)
 ensure staff in asylum seeker accommodation have received training on the correct process for putting on and removing PPE
Key contacts - name, email, telephone
Name of setting:
Address including postcode
Daytime contacts Monday to Friday:
Night and weekend contacts:

Local health services, for example, primary care or commissioned provider

Responsibilities

- register residents with primary care as appropriate
- assess and treat individual healthcare issues identified
- provide clinical assessment, arrange testing and provide treatment for suspected cases and close contacts as advised by HPT
- notify HPT of <u>notifiable</u> diseases in the normal way
- notify HPT of outbreaks (2 or more cases) of other diseases of potential public health importance for example scabies, diarrhoea and vomiting, acute respiratory infections
- attend IMT meetings as appropriate
- give advice on IPC

Key contacts - name, email, telephone

Daytime contacts Monday to Friday:

Night and weekend contacts:

UKHSA local health protection team

Responsibilities

- provide specialist advice on managing cases and outbreaks of infectious diseases relating to the setting
- give outbreak IPC advice
- record and investigate cases and outbreaks of significant infections that are reported
- co-ordinate and manage any outbreaks following outbreak management processes
- notify local stakeholders of outbreaks, including other agencies listed in the plan

Key contacts - name, email, telephone

Daytime contacts Monday to Friday:

Night and weekend contacts:

Local authority

Responsibilities

- safeguarding responsibilities
- facilitate liaison with the community and voluntary sector where appropriate
- maintain an assurance role over the risks to public health in the wider community
- provide environmental health and IPC support as required
- attend IMT meetings as required

Key contacts - name, email, telephone

Daytime contacts Monday to Friday:

Night and weekend contacts:

Integrated Care Board

Responsibilities

- attend IMT meetings as required to inform decisions about level of NHS response and release of ICB resources
- co-ordinate the response of any community, acute or primary care providers

Key contacts - name, email, telephone

Daytime contacts Monday to Friday:

Night and weekend contacts:

Other - fill in as appropriate

(May include third sector organisations and reflect local relationships)

Responsibilities
Key contacts – name, email, telephone
Daytime contacts Monday to Friday:
Night and weekend contacts:

Common scenarios

The table below describes some common potential scenarios with the actions that should be taken. It is important that staff and residents are able to seek appropriate medical care to protect themselves and others.

Table 2: Specific actions for different scenarios

Scenario		Action	Responsible
Emergency	Any medical emergency	Call 999	Accommodation setting staff
Cases of diarrhoea and vomiting	Two or more cases of diarrhoea and vomiting in staff or residents within 48 hours	 direct and support affected individuals to get medical advice as needed ensure where possible that cases have access to a single bathroom not used by others and are not involved in any food preparation deep clean any areas where people have been ill ensure all residents and staff have access to handwashing facilities with soap and hot water (not hand sanitiser or alcohol gel) support residents with symptoms to stay away from communal areas until 48 hours free of symptoms, for example providing meals in rooms send symptomatic staff home and ask them not to return to work until 48 hours symptom free notify HPT and follow advice given on preventing further spread work with environmental health officers in the local authority as necessary 	 accommodation setting staff are responsible for liaison with HPT and implementing basic IPC measures HPT will risk assess situation and lead management of the outbreak clinician/labs will notify HPT of notifiable infections as normal

Scenario		Action	Responsible
Cases of itching and/or rash	Two or more staff or residents develop rashes, skin lesions or itchy skin	 direct and support affected individuals to get medical advice as needed staff are advised to see their own GP if they develop any skin conditions staff and residents should ensure potentially infected skin lesions are covered when in communal areas clinicians/labs should notify the HPT of any confirmed or suspected notifiable diseases notify HPT and follow advice given on preventing further spread 	 accommodation setting staff are responsible for liaison with HPT and implementing basic IPC measures HPT will risk assess situation and lead management of the outbreak clinician/labs will inform HPT of notifiable diseases as normal
Cases of acute respiratory infection	Two or more staff or residents develop symptoms of acute respiratory infections, and are unable to carry out their normal activities or require medical treatment. Symptoms may include cough, sore throat, headache, muscle ache, and high temperature and chills	 direct and support affected individuals to get medical advice as needed ensure all residents and staff have access to handwashing facilities with soap and hot water ensure symptomatic residents/staff have access to face masks for use in communal areas support residents with symptoms to stay away from communal areas, for example providing meals in rooms consider sending symptomatic staff home, see People with symptoms of a respiratory infection including COVID-19 notify HPT and follow advice given on preventing further spread 	 accommodation staff are responsible for liaison with HPT and implementing basic IPC measures HPT will risk assess situation and lead management of the outbreak clinician/labs will inform HPT of notifiable diseases as normal

Annexe 1: Outbreak management data gathering

In the event of an outbreak being declared, gather the information below to aid the HPT in their risk assessment

Outbreak data gathering (Fill in details)

Name and address of the affected setting:

Contact details for a manager/appropriate person (including name, position, telephone number and email)

Date of notification

Details of person/agency providing the notification to UKHSA HPT

Nature of setting:

- number of rooms:
- number of guests:
- number of staff at the facility:
- number of staff working (including cleaners, external contractors, temporary staff):
- layout of setting floors, units or outdoor space access:
- room types single, double or ensuite number of each:
- type of setting, for example contingency, single male setting, family hotel:

Details of the outbreak (residents)

- number of confirmed cases:
- number symptomatic:
- date of onset in first case:
- date of onset in most recent case:
- nature of symptoms and severity:
- any cases requiring admission to hospital, any deaths:

Outbreak data gathering (Fill in details)

Details of the outbreak (staff):

- number of confirmed cases:
- number symptomatic:
- date of onset in first case:
- date of onset in most recent case:
- nature of symptoms and severity:
- any cases requiring admission to hospital; any deaths:
- job roles (hotel admin, security, catering or cleaning staff):
- additional jobs worked elsewhere outside this setting:
- days or shifts worked during incubation period and while infectious:

IPC including appropriate cleaning, linen and laundry

- what IPC measures have already been implemented:
- reinforce education of staff and guests about hand and respiratory hygiene
- ensure infection control policies are up to date, read and followed by all staff

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Annexe 2: Infection prevention and control poster for asylum seeker accommodation settings



Health protection for migrants and asylum seekers

Information for accommodation staff

Introduction

- we are seeing an increasing number of infections in people who have come to the UK to seek asylum.
- the reasons for this include sharing accommodation facilities and overcrowding, long journeys and poor conditions while travelling, low vaccination coverage, and higher rates of some infections around the world
- these infections include:
 - skin infections: Group A strep, MRSA, diphtheria, scabies
 - respiratory infections: influenza, coronavirus (COVID-19)
 - gastrointestinal infections such as norovirus

There are things you can do as accommodation providers to help reduce the risk of these infections.

What you need to do



Signpost all residents to how they can register with a GP www.gov.uk/guidance/nhs-entitlements-migrant-health-guide#gp-services

What to do if you suspect an infection



If resident unwell or new symptoms - contact 111 or on-site clinical team (non-emergency), or 999 if very unwell. Inform them of the signs and symptoms.

If there is a suspected or confirmed infection in a resident then:



Support residents to isolate in their room immediately until health protection advice can be given.



Provide equipment and products for resident to clean their room.



Advise resident to bag laundry and leave outside their room. Double bag if laundry is going off to a commercial laundry.



Provide meals in room. Ensure resident has their own individual crockery, utensils, linen and towels.



Undertake regular welfare checks. Ask about any new symptoms.

What do we need?

The local Health Protection Team (HPT) from UKHSA may need to carry out a risk assessment. Contact the HPT if you are aware of multiple people developing the same symptoms in a short space of time or if you are informed of a diagnosed case of infectious disease. The HPT may ask about who the individual has been in close contact with, for example sharing a bathroom or kitchen, so that they can advise on any additional preventive measures such as vaccination and antibiotics. Please provide the HPT with a contact point at the accommodation who can assist as soon as possible, including phone number and email address.

Questions, concerns or new cases?

Please call your local Health Protection team - www.gov.uk/health-protection-team
Further advice and guidance on the health needs of migrants - www.gov.uk/government/collections/migrant-health-guide