



Public Health
England

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Dear Chair,

RE: Public Health England advice to the Home Office regarding asylum accommodation at Napier Barracks

Thank you for your letter of 11 May 2021, regarding Public Health England's (PHE's) advice to the Home Office regarding COVID-19 measures and the use of dormitory accommodation at Napier Barracks. I do apologise for the delay in responding.

PHE has been in a positive ongoing dialogue and working collaboratively with Home Office (HO) colleagues on a range of COVID-19 related issues since spring 2020.

The HO contacted PHE about an accommodation specification on 4 September 2020. This was not specific to Napier barracks, and asked for public health advice on a generic accommodation specification.

This specification document stated that the HO was seeking COVID-19 secure accommodation. It was divided into high level criteria, detailed criteria (referred to as 'configured to offer as a minimum') and desired criteria (referred to as 'not essential'). The HO also stated that they were looking to take over sites during the following week.

To assist as quickly as possible, and to build on joint learning from several outbreaks in Initial Asylum Centres across the country, PHE responded on the same day, with comments against the criteria, which are reproduced in the table below. At the time of sharing, PHE advised that the issue of housing asylum seekers in COVID secure settings would need to be carefully thought out, particularly with respect to functioning of facilities and the number of organisations involved.

Please see further detail below in response to your specific queries.

- (i) whether Public Health England had advised the Home Office that opening multi-occupancy dormitory-style accommodation was not supported by current guidance, prior to the opening of Napier barracks in 2020

- (ii) if so, on what date that was communicated to the Home Office, and what response was received from the Home Office to that advice
- (iii) if not, what advice was given by Public Health England to the Home Office on the opening of multi-occupancy dormitory-style accommodation during the pandemic,
- (iv) when Public Health England was first consulted on the decision to house asylum seekers in Napier barracks and what was your response

Set out below are the PHE comments provided on the specification document. We did not provide comments specifically about Napier Barracks.

Wording on the HO specification document	PHE response
We are interested in sites of any size and capacity but our immediate priority is for large sites that can accommodate in excess of 200 people <i>(part of the high-level criteria in the document)</i>	... the entire accommodation would need to be tested and probably isolated in single rooms with single bathroom facilities in the case of any outbreak...
We are primarily looking for accommodation which can accommodate large numbers of people in a hostel style environment but are also interested in any self-contained accommodation units comprising kitchen, bedrooms and bathrooms on a house/flat/bedsit configuration suitable for family groups. <i>(part of the high-level criteria section in the document)</i>	Lots of people in hostel environment is not good from a COVID or any type of infection prevention and control perspective.
Dormitories which can be adapted to be covid-19 compliant are acceptable. <i>(part of the high-level criteria section in the document)</i>	don't know how dormitories can be COVID compliant
Bathrooms should ideally be within accommodation however sites with external shower and toilet blocks that can be made covid-19 compliant are acceptable. <i>(part of the high-level criteria section in the document)</i>	Not good from a COVID secure perspective.
We anticipate needing to use the accommodation for a minimum of three months but potentially up to 12 months. <i>(part of the high-level criteria section in the document)</i>	COVID will be here for another year
We require accommodation sites which can be configured to offer as a minimum: Individual bedrooms or the ability to reconfigure dormitories to comply with social distancing. <i>((part of</i>	No- only use as below: This is the youth hostel guidance on gov.uk (at the time of response): Current government guidance states that private rooms in all indoor accommodation with en-suite showering

<i>the Detailed criteria section in the document)</i>	facilities, or one designated shower facility per guest room, will be able to reopen. Shared toilet facilities can also be opened. If shared toilet and shower facilities are in the same room, guests are able to use the toilet but can only use the shower if it is assigned to one household or support bubble or run using a reservation and clean rota. Dormitory rooms will be closed (except where housing parties from the same household or support bubble), as will other indoor shared facilities (e.g. guest kitchens or TV rooms where social distancing cannot be observed). Outdoor accommodation (i.e. campsites) will be allowed to reopen shared showering facilities, as long as they are operated in the manner set out below."
We require as minimum: Space for a communal area/social space. <i>((part of the Detailed criteria section in the document)</i>	Not ideal
For self-catering sites: access to cooking facilities/kitchen. <i>((part of the Detailed criteria section in the document)</i>	Ideally per household/individual

In December 2020 PHE published guidance for providers of accommodation for asylum seekers which is consistent with this advice given and is available here:

<https://www.gov.uk/government/publications/covid-19-guidance-for-providers-of-accommodation-for-asylum-seekers/covid-19-guidance-for-providers-of-accommodation-for-asylum-seekers>.

In our guidance and in correspondence with HO colleagues we recognised that in extremis there may be circumstances whereby our recommended approach could not be followed. We therefore set out an approach to 'cohorting', which could be considered if absolutely necessary in those circumstances where isolation in rooms were not available and the steps to be taken in these instances.

The local PHE Health Protection Team (HPT) was first informed by telephone of the opening of Napier Barracks as contingency accommodation for asylum seekers on 14 September. PHE was invited to the Folkestone & Hythe Initial Multi-Agency Meeting Accommodating and Supporting Asylum Seekers. PHE's HPT attended the first meeting on 15 September.

On 24 September, HO and Clearsprings (the accommodation provider) sent two documents to PHE's HPT. The first document was titled: 'Management of Infectious Diseases (Coronavirus) and Pandemics' and the second titled: 'Clearsprings Group: Risk Assessment Form'. PHE's HPT informed HO and Clearsprings that the COVID-19 risk assessment provided was not sufficient for the protection of residents, staff and visitors and that this required urgent attention. Even though it was not the role of the local HPT of PHE to advise on the COVID-19 secure risk assessment of

the site, PHE's HPT did advise Ready Homes, who managed the site, regarding outbreak control.

On 23 October, Clearsprings presented a risk assessment at a meeting arranged by the local authority and attended by PHE's HPT. PHE's HPT advised that the risk assessment was not sufficient for COVID-19 outbreak planning and management purposes. An agreement was made to meet to discuss and develop the outbreak management plan. The first meeting took place on 26 October. All subsequent communication with PHE's HPT has focused on supporting HO and the accommodation provider to develop an Outbreak Management Plan for Napier Barracks

- (v) what access you had to the site in advance of providing your advice
- (vi) what response was received from the Home Office to that advice

On 8 October PHE's HPT was asked to arrange a COVID-19 risk assessment visit to Napier Barracks during a meeting of the Folkestone & Hythe Ministry of Defence Accommodation Health Sub-Group. Both during and pre-pandemic, the local environmental health teams (and Health and Safety Executive, depending on the setting), carry out site visits, where indicated, reviewing risk assessments and measures in place. Local authorities and the HSE have enforcement roles and expertise and may also carry out advisory visits when requested. During the COVID-19 pandemic the Kent County Council public health team have also had a role in reviewing COVID-19 risk assessments for a range of settings. PHE's HPTs do not carry out COVID-19 risk assessment visits to settings therefore, in line with standard practice, PHE's HPT directed HO and the accommodation provider to consult with local authority public health and environmental health teams, as the organisations with the responsibility for this and expertise required. PHE has also advised speaking with the clinical commissioning group in respect of infection control practice.

PHE continues to provide support to the HO and accommodation providers to develop their outbreak plans and risk assessments.

I hope you have found this response helpful. Please do not hesitate to contact me if you have any further questions.

Yours sincerely



Michael Brodie
Interim Chief Executive