

SWEP and Emergency Overnight Accommodation for rough sleepers – Update in currently severe weather

This note sets out the latest position on pan-London SWEP provision, agreed with partners including UKHSA, ADPHL, GLA, London Councils, Housing Justice and Healthy London Partnership. It will be formally circulated as part of the public health escalation process for the Life Off the Streets (LOTS) core group in the next few days. It is also an approach which London boroughs may want to take to ensure rough sleepers are protected in the spell of cold weather.

Key Messages

- Given the current spell of severely cold weather¹, limited accommodation, and unprecedented demand, immediate action was taken on 9th December to increase the number of people sharing the space in pan-London SWEP provision beyond the previous agreement limit (of 5 or less), with a range of mitigation measures in place.
- Following an urgent escalation meeting on 12th December **it has been agreed that the risk to life of remaining on the street in current weather conditions is considered to outweigh the risk to health of the spread of infectious diseases through the use of communal sleeping provision.**
- **Recommended mitigation measures for communal sleeping arrangements, previously agreed for pan-London SWEP provision, are set out below.**
- This is a **temporary and pragmatic stance** due to exceptional circumstances and **only applies during this spell of severe weather.**²

Context

You will have seen the ADPH London **Principles of Good Practice for Emergency Overnight Accommodation**, that were shared on the 10th November. Those principles highlighted that where possible, local areas should continue to prioritise providing single room emergency accommodation over communal night shelters, to protect the health and dignity of individuals who may use these shelters and achieve our collective ambition to end rough sleeping.

However, given the current spell of severely cold weather (which could last until w/c 19th December), limited accommodation and unprecedented demand, immediate action was taken on 9th December to increase the number of people sharing the space in pan-London SWEP provision beyond the previous agreement limit (of 5 or less), with a range of mitigation measures in place.

Following an urgent escalation meeting on 12th December the following approach has been agreed in relation to pan-London SWEP provision, and sets out an approach which London boroughs may want to take to ensure sufficient accommodation is available and a consistency of offer in London. Larger scale voluntary and community sector providers are more likely to be able to put the mitigation measures recommended here in place.

¹ Trigger point for pan-London SWEP activation of 0°C on any one night to ensure consistency across the capital. London SWEP guidance 2022-23.pdf

² Until SWEP Stood down.

- **Taking a risk based approach, the risk to life of remaining on the street in current weather conditions is considered to outweigh the risk to health of the spread of infectious diseases through the use of communal sleeping provision.**
- Any emergency overnight accommodation which uses shared sleeping spaces should seek to mitigate the risk of the spread of infectious diseases (see Annexes 1, 2 and 3).
- Those with clinical risk factors which put them at higher risk from respiratory illness should continue to be provided with single-occupancy accommodation wherever possible (see Annex 2 for clinical vulnerability criteria).
- Mitigation may not prevent outbreaks, and therefore outbreaks should be reported to your local health protection team.
- Mitigation is unlikely to prevent outbreaks, and therefore infections and/or outbreaks should be reported to your local health protection team.
- This is a **temporary and pragmatic stance** due to exceptional circumstances and **only applies during this spell of severe weather.**

Annex 1. Mitigation measures (as agreed previously through Life off the streets core group for SWEP provision)

The following mitigations are recommended for situations where there is no alternative to communal accommodation:

- Those sharing the provision would be made aware of the potential infection risk.
- Shared accommodation would not be used for those who are clinically extremely vulnerable and other vulnerabilities, including age, will also be considered.
- Changes (throughput) in those sharing a room would be minimised.
- There would be symptom screening (for respiratory infections) prior to entry*.
- A thorough health screening, including vaccination status, would be part of the initial assessment, with access to vaccines offered for all those who are eligible.
- Measures would be in place for rapid recognition of symptoms, rapid testing on entry and isolation of any symptomatic and/or positive cases*.
- Staff regularly tested for COVID19*.
- A range of Infection Prevention Control (IPC) strategies such as hand washing, ventilation and social distancing.
- Enhanced environmental cleaning.
- Ensuring there is a means for the provider to contact individuals when they move on – to allow for contact tracing if needed.
- Opportunities to promote vaccination and GP registration should be maximised

***Further detail on LFT test kits and dealing with someone who is unwell**

COVID lateral flow tests

- All settings should encourage staff, volunteers and service users to take a test when individuals are displaying symptoms of COVID-19 and have:
 - a high temperature; or,
 - are feeling too unwell to go to work or do normal activities.
- How to register for test kits : A nominated individual from a setting will access the GOV.UK self-referral portal. The link to the self referral portal is here: <https://request-onboarding.test-for-coronavirus.service.gov.uk/private-public/>

Dealing with someone who is unwell

- Provide covid LFD (lateral flow device) test
- **Isolate away from others ideally in a separate room.**
- Ask them to wear a face mask particularly if they have respiratory symptoms ie coughing and sneezing
- Staff to wear a face mask when working with that person and maintaining a distance of 2m as much as possible
- If needed arrange for GP to see them or dial NHS 111 for advice
- For advice on testing and infection control contact the Find and Treat team on haltteam.cnw1@nhs.net. Referral forms are available [here](#).

**Annex 2. Criteria used on pan-London overflow SWEP referral for clinical vulnerability screening
(as of 8th December)**

<p>Does client have any of the following that will make them highly vulnerable to respiratory illness (COVID-19 & flu)</p> <p><i>If you are unsure about any whether the person being referred has one of these clinical risk factors, please do mention this when making the referral</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Down's syndrome <input type="checkbox"/> Certain types of cancer (such as a blood cancer like leukaemia or lymphoma) <input type="checkbox"/> Sickle cell disease <input type="checkbox"/> Chronic kidney disease (CKD) stage 4 or 5 (on dialysis/transplant list/letter from doctor confirming severe kidney problem) <input type="checkbox"/> Severe liver disease <input type="checkbox"/> Had an organ or bone marrow transplant <input type="checkbox"/> Certain autoimmune or inflammatory conditions (such as rheumatoid arthritis or inflammatory bowel disease) <input type="checkbox"/> HIV or AIDS and have a weakened immune system <input type="checkbox"/> A rare condition affecting the brain or nerves (multiple sclerosis, motor neurone disease, Huntington's disease or myasthenia gravis) <input type="checkbox"/> A severe problem with the brain or nerves, such as cerebral palsy <input type="checkbox"/> Severe or multiple learning disabilities <input type="checkbox"/> A weakened immune system due to a medical treatment (such as steroid medicine, biological therapy, chemotherapy or radiotherapy) <input type="checkbox"/> Severe Asthma/COPD not controlled by medication or leading to hospital admission in the last year <input type="checkbox"/> Chronic heart disease <input type="checkbox"/> Cerebrospinal fluid leaks <input type="checkbox"/> Asplenia or dysfunction of the spleen <input type="checkbox"/> Pregnant <input type="checkbox"/> Aged over 60
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