

# PWYLLGOR ANSAWDD, DIOGELWCH A SICRHAU PROFIOD QUALITY, SAFETY AND EXPERIENCE ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD:	02 February 2021
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Penally Camp Update
TITLE OF REPORT:	
CYFARWYDDWR ARWEINIOL:	Jill Paterson, Director of Primary Care, Community and
LEAD DIRECTOR:	Long Term Care
SWYDDOG ADRODD:	Anna Swinfield, Head of GMS Sustainability
REPORTING OFFICER:	Matt McGivern, Business Manager of General Medical &
REPORTING OFFICER:	Provider Services

Pwrpas yr Adroddiad (dewiswch fel yn addas)	
Purpose of the Report (select as appropriate)	
Er Sicrwydd/For Assurance	

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

In September 2020, the Health Board was informed by the Home Office (HO) of its immediate intention to develop the Penally Camp MOD site near Tenby as Initial Accommodation for asylum seekers housed, at the time, elsewhere in Wales and England. Despite the significant concerns raised at this point by the Health Board and Local Authority, among other stakeholders, the HO advanced plans with its accommodation provider, Clearsprings Ready Homes. As many as 179 asylum seekers, all adult males (mostly from Eritrea, Iran, Iraq, Syria and Palestine) have resided at the camp at any one time.

The Health Board was required to respond immediately to provide appropriate services to the asylum seekers. Significant concerns continue to be expressed regarding the unsuitability of the accommodation, and the context with local services and the COVID-19 pandemic.

This report provides an update on the services provided to the asylum seekers residing in the Camp, and the continuing challenges experienced in providing these services.

The number of asylum seekers resident on the Camp on 15th January 2021 stands at 132.

#### Cefndir / Background

Penally Camp is a Ministry of Defence (MOD) facility near Tenby, used most recently as a Defence Training Establishment by cadet forces. It became immediately apparent that both the facilities on the camp itself, their poor condition, and its geographical location made the camp unsuitable for the purpose identified by the HO. This challenge was further compounded by the scale of works and measures required to make the facilities and accommodation minimally compliant with Infection Prevention and Control (IP&C) measures, and in particular for COVID-19. Significant concerns about the repurposing of the Camp continue to be expressed by the local community, the Health Board, stakeholders including the Local Authority and Police, local politicians and Welsh Government (WG). These concerns have been escalated to the HO and have been subject to lengthy discussion.

Asylum seekers began to be transferred to the camp in groups from 21<sup>st</sup> September 2020, with numbers increasing as accommodation blocks on the site were deemed ready for occupation by Clearsprings. Transfers in and out throughout the operation of the site have been erratic and have reflected the changing picture with COVID-19 restrictions in Wales, and the areas and tiers the asylum seekers were moved from in South East England and the Midlands.

A period of rapid scoping and mobilisation of essential Primary Care services from nearby Tenby Surgery Managed Practice took place in September and October 2020. It should be noted that the Health Board did not operate any pre-existing service for asylum seekers, and considerable co-ordination was and continues to be required with numerous stakeholders to build an integrated service to meet the needs of the asylum seekers. Initially, regular clinics were established in the site Medical Centre to meet the immediate needs of the newly arrived residents. However, the poor quality of the facilities and concerns about staff safety based on poorly managed incidents on-site resulted in services being relocated to South Pembrokeshire Hospital.

Site visits to Penally Camp including members of the Primary Care team and Infection Prevention and Control (IP&C) team took place in September and October 2020 to assess the environment and facilities. Findings from these visits, and the subsequent experiences since, have raised significant and enduring concerns, including lack of required IP&C measures, general environment and accommodation of a poor standard and incompatible with social distancing, lack of evidence of robust COVID-19 escalation planning, and unsuitable facilities in the Medical Centre. Security for Health Board staff working on-site was identified early as a concern, and a disturbance on-site on 20th October 2020, which required Police attendance and an emergency evacuation by the clinicians on-site at the time, led to the immediate withdrawal of all clinics on-site and relocation to South Pembrokeshire Hospital. Police have had to attend the site on numerous occasions since September 2020 to respond to incidents within the Camp, and organised protests, for and against, at the gates.

Despite significant concerns raised regarding governance and suitability, a private agency nurse was contracted by Clearsprings in October 2020 to provide clinics on-site. These concerns were escalated rapidly, resulting in the prompt termination of this arrangement.

An outline core service model using staff from Tenby Surgery was devised and quickly established. The broader Primary Care proposed service model was sent to the HO in October 2020, comprising core and enhanced level services:

1. General Medical Health Care Services Model (Core) – to provide immediately necessary and urgent treatment for any conditions assessed as requiring an urgent response, excluding medical emergencies. This includes assessment (including by remote means), treatment, prescribing and onward referral to local services where appropriate. It was recognised that the asylum seekers have particular needs, and that local services and the camp itself was not appropriate for asylum seekers with complex medical needs, including complex mental health needs. Assurance was

given that the asylum seekers transferred to Penally would have been pre-assessed as suitable for local services prior to transfer. This proved not to be the case.

In the context of the COVID-19 pandemic, the remote triage model widely adopted by practices across Wales for the safety of staff and patients is being used with daily telephone calls at fixed times. The service is led by the Advanced Paramedic Practitioner at Tenby Surgery, supervised and supported by the GP Lead. Language needs are met using Language Line interpretation services.

In addition, face-to-face clinics with the Advanced Paramedic Practitioner are operating at South Pembrokeshire Hospital twice weekly. These clinics can be accessed on request by the asylum seekers through Clearsprings welfare staff and Migrant Help workers on-site. All requests for face-to-face consultation are initially assessed remotely by the Advanced Paramedic Practitioner, and then booked if appropriate or managed by remote means.

Arrangements are in place with local Community Pharmacies in Tenby for regular collections of prescribed medication and any Over The Counter (OTC) medications by the Clearsprings team.

2. General Medical Health Care Services Model (Enhanced) – it quickly became apparent that no clinical assessments had taken place at previous locations for the asylum seekers transferred to Penally, and medical records existed for only 4 individuals, fewer than 6%. Following close consultation with Cardiff Health Access Practice (CHAP) asylum seekers service and specialist training sessions at CHAP, a comprehensive nurse-led Initial Health Assessment (IA) service was established in December 2020 to address the backlog. This has developed to include Blood Borne Viruses (BBV) screening with onward referral as appropriate to a respiratory consultant-led Tuberculosis (TB) clinic. The IA service is suspended temporarily to prioritise the delivery of COVID-19 vaccination locally.

This service model was proposed to the HO in October 2020, alongside costings for the workforce model to support its delivery.

#### Asesiad / Assessment

The Health Board has been central to the multi-agency, integrated response to the Camp's establishment. The delivery of safe and appropriate Primary Care Services to the asylum seekers at Penally Camp has been complex and exacting, and continues to be challenging on many levels.

Ongoing challenges include:

1. Security – security concerns have related to both the asylum seeker residents within the Camp and a series of protests and demonstrations outside the Camp, which have been both in opposition and in support of the asylum seekers. The transfer of the Core and IA services to South Pembrokshire Hospital has addressed safety concerns for staff. The clinics are held in the Outpatients area of the hospital and, due to local sensitivities, the asylum seekers wait in their vehicle to be called in. Arrangements are in place to address lone working for the

- clinicians. There has been no history of incidents in clinics at South Pembrokshire Hospital.
- 2. Environment the poor standard of accommodation and shared facilities on-site increase the risks associated with disease transmission. Processes were tested with an asylum seeker who was symptomatic for COVID-19 (tested negative), and a suspected TB case (tested negative). Clearsprings failed to follow action cards and isolation facilities were inadequate. There have been frequent reports of asylum seekers not maintaining social distancing on site.
- 3. Cultural it was apparent that the asylum seekers had very little understanding of the National Health Service (NHS) or how services operate in the UK. The majority of initial contacts with the service were inappropriate and varied, from requests to expedite asylum applications to requests to intervene in housing. Language needs are met via Language Line, and some asylum seekers have basic English.
- 4. Challenges in clinical management:
  - Unsuitability of those transferred complex mental health needs are a
    known feature of asylum seekers, and a very common aspect of
    consultations. Work has been undertaken with local mental health
    services to establish a referral pathway, which has led to a high volume of
    referrals to Community Mental Health Teams (CMHT). There is an
    identified lack of compliance amongst some asylum seekers with antidepressant prescribing.
  - Pathway a clear pathway for asylum seekers to access Core services
    has been established. However, difficulties persist with Clearsprings staff
    continuing to signpost dental issues inappropriately, which is slowly
    improving. Asylum seekers are also being inappropriately directed to faceto-face clinics for issues which could be addressed remotely, e.g. repeat
    prescriptions.
  - Records Lack of records or IAs from previous providers. Records from CHAP or other previous providers have been received for 4 asylum seekers in total (approximately 6%). This has significantly hindered any continuity of care for longer-term conditions and added to the clinical workload with the Advanced Paramedic having to 'start from scratch'.
  - Transfers in and out in rare cases, individual asylum seekers are transferred out of the Camp, having recently been referred to local mental health or secondary care services. This has meant that the individual has relocated by the time the appointment comes through. Likewise, asylum seekers transferred into the Camp have been due to be seen by services elsewhere within days and have had to recommence with local referral processes.
- 5. Management working with the HO and Clearsprings has brought its own challenges. There are a number of meetings and interfaces to manage this operationally, including daily calls to the site, weekly operational and oversight meetings, weekly multiagency meetings, weekly meetings with representatives on-site (British Refugee Council, Migrant Help, Migrant Coalition and the Welsh Refugee Council), and national meetings. These all require significant input.

6. Funding – the service model proposal forwarded to the HO included costings to support backfill of the clinicians delivering the service since September 2020. To date, £13,200 funding has been received from WG.

## **Argymhelliad / Recommendation**

This report provides an assurance on the services provided to the asylum seekers residing in the Camp, to address the continuing challenges experienced in providing them.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	4.2 Provide evidence based and timely advice to the Board to assist it in discharging its functions and meeting its responsibilities with regard to the quality and safety of health care provided and secured by the University Health Board
	5.10 Provide assurance to the Board in relation to its responsibilities for the quality and safety of mental health, primary and community care, public health, health promotion, prevention and health protection activities and interventions in line with the Health Board's strategies.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	Risk 1023: Risk of COVID-19 infections and isolation on the Penally site – score 16 Risk 1024: Inadequate arrangements on the Penally
Datix Risk Register Reference and Score:	site to manage emergency incidents – score 12 Risk 1025: Inability to provide appropriate services to the residents of the Penally camp – score 6
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety 2.4 Infection Prevention and Control (IPC) and Decontamination 2.7 Safeguarding Children and Safeguarding Adults at Risk
	All Health & Care Standards Apply

Effaith/Impact:		
Ariannol / Financial: Ansawdd / Patient Care:	Contained within the report.	
Gweithlu / Workforce:		
Risg / Risk: Cyfreithiol / Legal:		
Enw Da / Reputational: Gyfrinachedd / Privacy:		
Cydraddoldeb / Equality:		