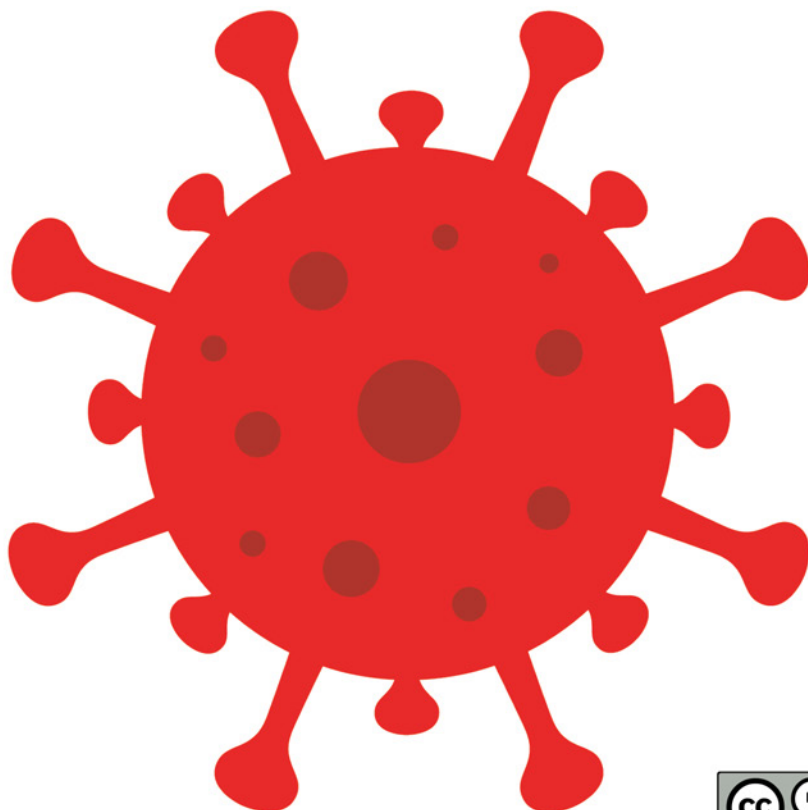


Understanding COVID-19 in Secure Settings

By Sheila Hollins, Caroline Watson and Michael Emmett
illustrated by Beth Webb

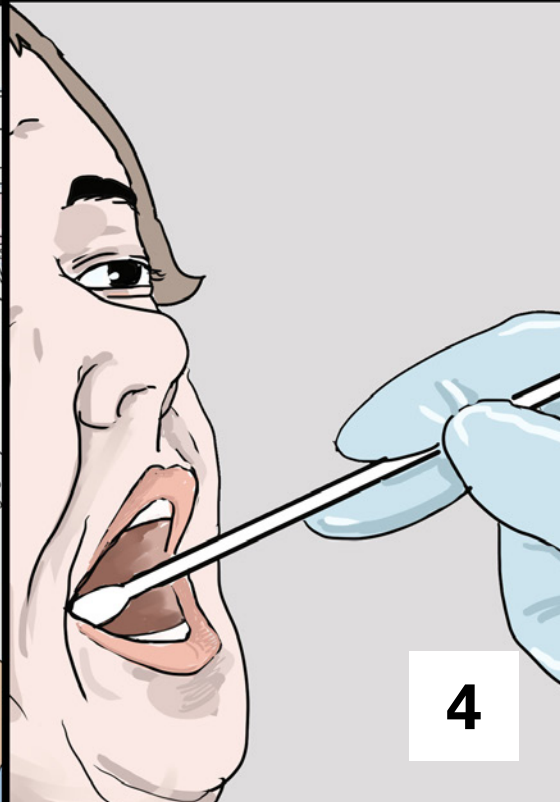
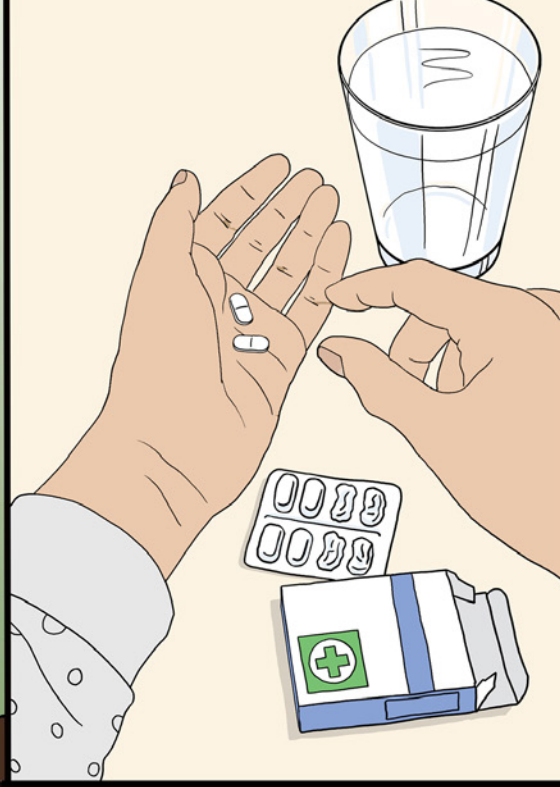


Jed's story





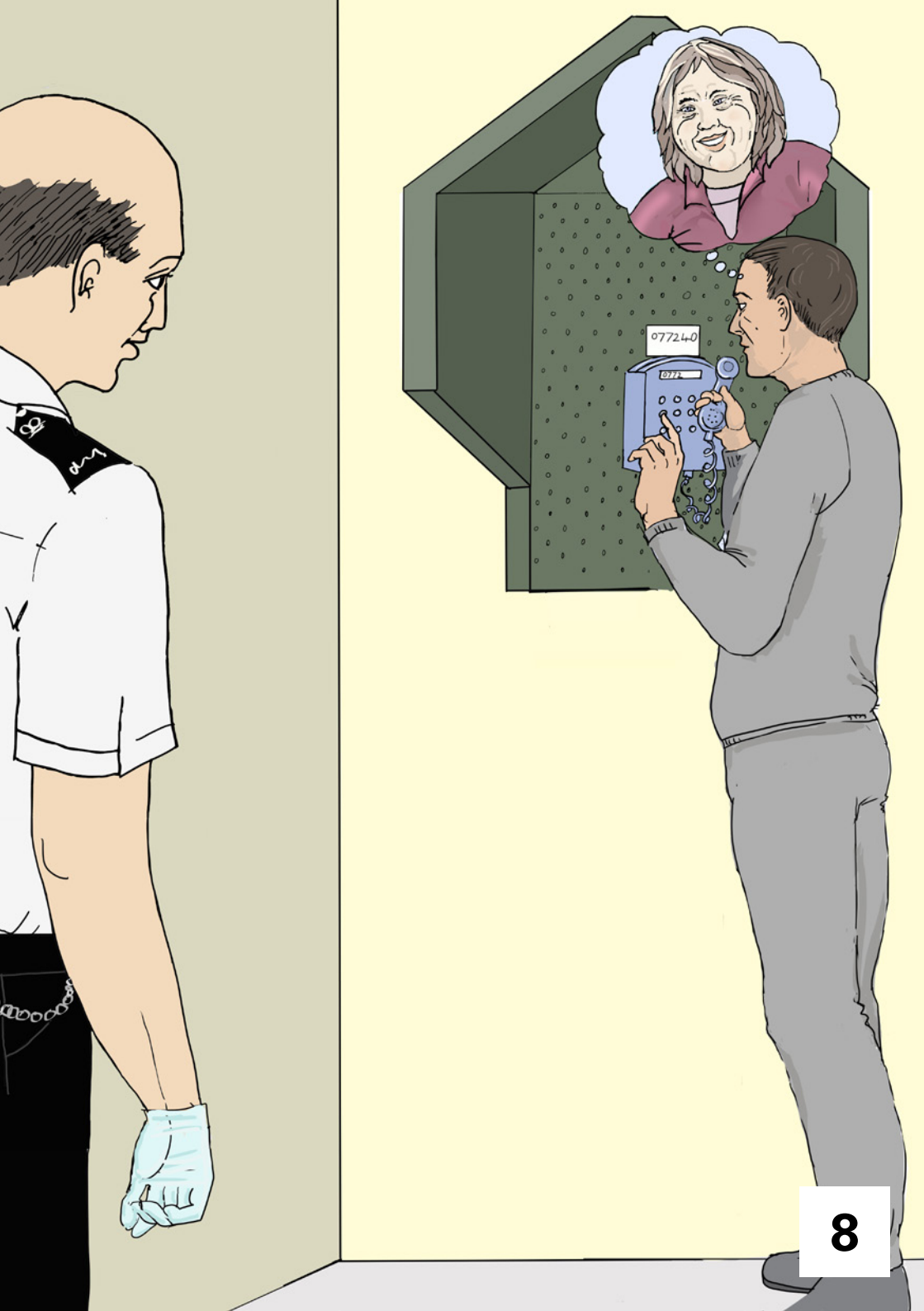




















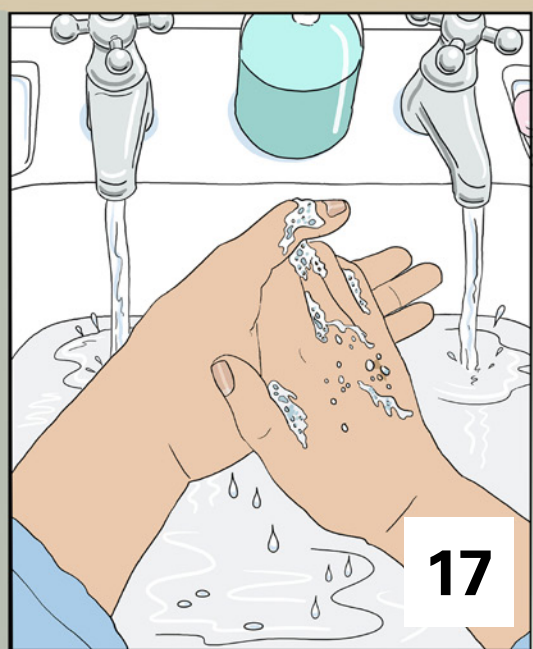


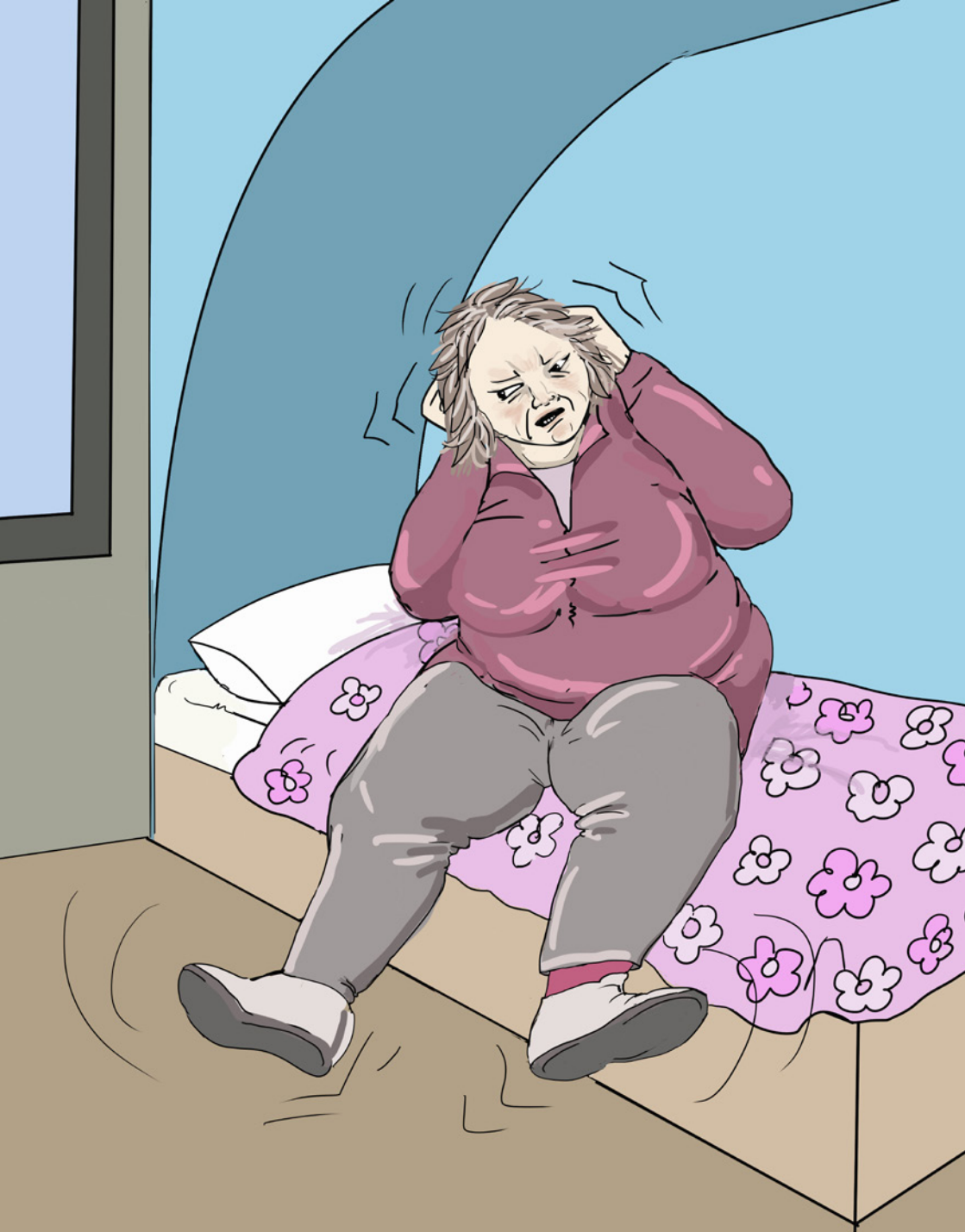
Kate's story









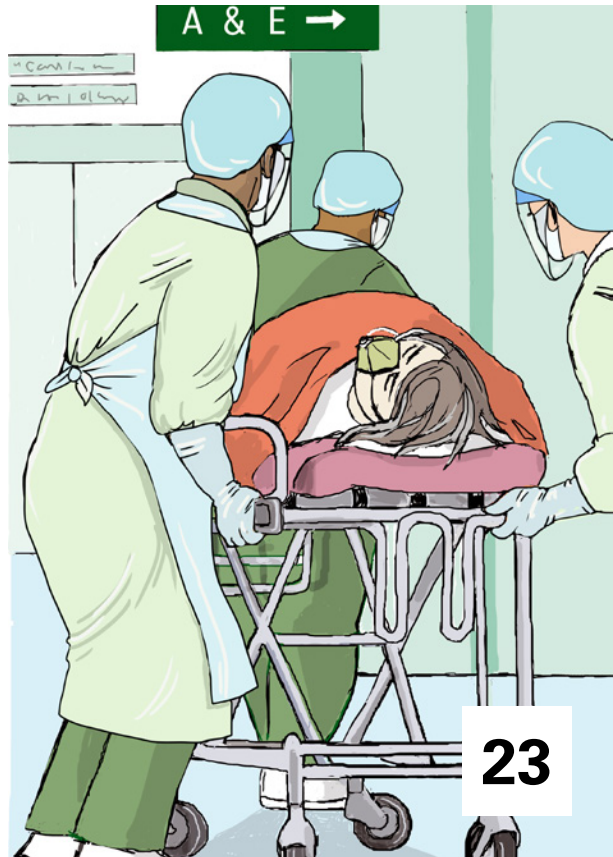




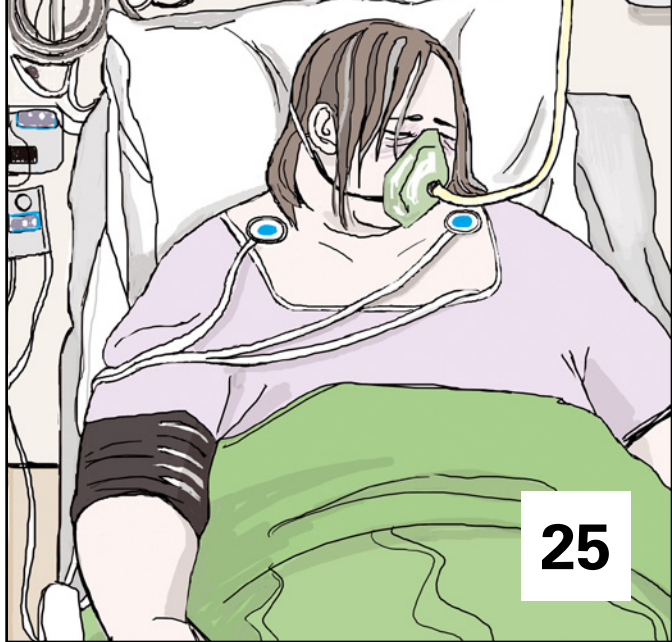
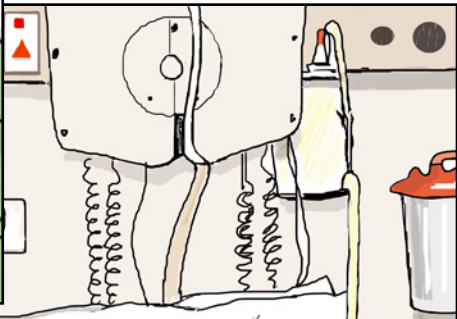






















Coronavirus in secure environments

This supporting text is intended for health care practitioners, prison officers, chaplaincy and education teams, and peer support workers. Wordless stories have been found helpful for people with low literacy and/ or autism to gain a better understanding of their own emotional responses to their life events as well as to understand other people's expectations of and responses towards them. Pictures are also useful tools that can guide conversations and help people ask questions about difficult topics, such as becoming very ill or dying.

There is a quick guide to using this book on page 38. An accompanying Coaching Session brief is also available to help provide a starting point for staff and peer supporters. For those who would like to take things further and become accredited, there is an [e-learning module](#) available. There are also some short YouTube videos showing people reading a similar book, as well as a brief introduction to how the books work:

- **What are Books Beyond Words?**
www.youtube.com/watch?v=zwYCPgoh_Ik&t=19s
- **Reading Together – Sonia's Feeling Sad**
www.youtube.com/watch?v=VOCIkD8LNV4&t=4s
- **Reading Together – When Dad Hurts Mum (domestic abuse)**
www.youtube.com/watch?v=MCPgQpiHT9E

You will notice that the reader decides who and what the story is about, and the supporter offers as few prompts as needed. Many people read wordless books without support, from a screen or in print. There is no right or wrong story.

Sometimes a story will remind people of their own adverse childhood experiences. A readers' response to one story may lead them to request another story about a related topic such as death and dying, being a victim of abuse or going into hospital (see Related resources from Beyond Words, page 40).

In prisons

People are already used to some elements of physical and social distancing in both prisons and secure hospitals. The additional restrictions in place, to keep people safe from coronavirus, can be hard to understand and hard to tolerate.

More than three in five (62%) people entering prison were assessed as having a reading age of 11 or lower and a third (34%) of people reported that they had a learning disability or difficulty. Of those with a learning disability or difficulty, four fifths reported having problems reading prison information and difficulties expressing themselves and understanding certain words (data from the Prison Reform Trust, 2019). Prisons, just like all public bodies, have duties under the Equality Act 2010 (covering England, Scotland and Wales) to make sure that disabled people are treated fairly. This may mean making 'reasonable adjustments' to the way services work, for example ensuring that easy read or wordless, pictorial information (like this resource) is available to explain the rules and expectations of the particular establishment, including any new rules and restrictions in place due to COVID-19.

Normally, in both prisons and secure hospitals, there is a clear structure to the day, with different activities scheduled. These include spending time in education or at work, meeting up with friends during 'association' and going to the gym. In order to reduce the risk of spreading coronavirus, group activities, visits from family and friends and exercise at the gym were stopped as the nation went into lockdown in March 2020. The regime (daily timetable) has been severely restricted since then, which means that people are behind the locked door to their room for many hours each day. This will reactivate traumatic memories for some people who may, for example, have been abandoned, neglected or controlled as a child, and may trigger 'challenging' behaviour, increase

anxiety, confusion and feelings of loneliness. Others may display 'protest' behaviours simply because they are bored, irritable or frustrated at being locked up. It is anticipated that, during the months ahead, restrictions to the regime will vary according to the level of threat of virus transmission in prisons, but that a cautious approach will be required in order to limit the risk of COVID-19 outbreaks occurring.

It is very important to be compassionate and for all communications in prison to be trauma-informed. Careful listening and clear explanations will be needed regarding any new routines and changes to the way that staff are interacting with patients/ residents. Healthcare teams will work differently in different prisons and the way care is delivered may even vary from day to day, depending on the local impact that the virus is having at any given time. Some prison healthcare appointments may be offered by telephone and some hospital appointments may be done by video or telephone rather than taking place at the hospital. The use of technology to provide effective healthcare in prisons is changing rapidly as new IT is introduced. Where access to telephones is more limited, telephone appointments are more likely to be prioritised for people who are at very high risk of severe illness with coronavirus, who are 'shielding' and need to minimise their face to face contact with others. Healthcare staff will bring medicines to the rooms of people who are 'shielding' or who are in isolation due to symptoms of coronavirus.

In secure hospitals

In order to prevent the spread of the virus, new rules and precautions are being put in place in psychiatric hospital settings too.

- Healthcare teams are working differently, for example, by doing initial appointments by telephone and sending medicines to people in their room. The health care staff will

take extra care if the person is at very high risk of coronavirus or if they have some symptoms of the infection.

- Staff may be wearing PPE (gowns and masks) which obscures their faces and reduces communication, all of which some patients may find frightening or unsettling.
- Some staff might go off sick or have to self-isolate for a few weeks, which could lead to problems with too few staff or the absence of familiar staff.
- Patients may be asked to wear masks too and this will change according to current wider recommendations for people in the community.
- If a patient has serious physical vulnerabilities they may be asked to isolate for their own protection – this is called ‘shielding’.
- If a patient has suspected or confirmed COVID-19 they will be asked to isolate to protect others.
- Leave from secure units is likely to be limited at this time, in line with government regulations affecting us all (i.e. not being allowed to leave one’s residence without reasonable excuse).
- Visits are likely to be severely shortened.

In these exceptional times, providers must make every effort to provide meaningful activities, social contact (e.g. via video-call if at all practicable) and to use available resources to support the mental health of the patients in their care. It is likely that ongoing restrictions in secure environments will significantly impact the mental health and well-being of people in these establishments over the coming months, particularly as disparity grows with restrictions in place for people outside, in the community.

How this book can help

COVID-19 is dangerous and hard for everyone. It's even harder being in prison or in a secure psychiatric hospital, away from friends and family, worrying about how they're coping, not getting to see them. And then there's worrying about your own health as well as getting your head round all the changes being made to help keep you safe, and stop the virus from spreading.

This story, told in pictures, explains the changes to day-to-day life in prisons, in secure psychiatric hospitals and in assessment and treatment units during the COVID-19 pandemic. It also explains some of the different things that may happen if you get sick. This book isn't a 'soft option'. Pictures can be powerful. It covers some really hard things - like what could happen if you get ill, the boredom and frustration of being isolated, and the terrible pain of losing a friend to COVID-19. It may help you to think and talk about how you are feeling.

About this story

In this story, Jed goes to prison during the coronavirus pandemic. Jed had a very sad childhood. Both of his parents died when he was very young, and he was placed with a foster family. Jed was sexually abused by an older child but didn't tell anybody. When he became a teenager, he wouldn't go to school and he started stealing so was sent to a youth offender institute. Since then he has been in prison several times.

When Jed goes to prison during the coronavirus pandemic there are lots of new rules to follow. Some of these rules are difficult for Jed, but the staff in the prison help to support him. Jed does get coronavirus, but he has mild symptoms and soon starts to feel better.

When Jed is in prison, his friend Kate has to be admitted to a low secure psychiatric unit. Kate was adopted when she was young and she has some health problems, including diabetes and schizophrenia. Sometimes she hears voices and thinks that other people are going to do bad things to her. When she arrives at the psychiatric unit, she has to go into isolation in case she has coronavirus. But she is also asked to 'shield' because she could get very ill with coronavirus due to her severe diabetes. This means she has to stay in her room.

Kate becomes ill with coronavirus. She is taken to a general hospital, where she is looked after by specialist doctors and nurses. Kate has a special plan with important information on it, including details of people to contact and details of her medicines for schizophrenia and diabetes. It helps the hospital team know her needs. It tells them what makes her upset and how to help her feel calm. Although most people get better from coronavirus, Kate does not get better, even with all the treatment at the hospital. Sadly, Kate dies.

Jed is very upset when he hears that Kate has died. He can't go to the funeral, but he can talk to people about Kate and remember the happy times they had together. This helps him to feel less sad. But it also makes him think about the vaccine again. He and Kate both said no – perhaps the vaccine is a good idea.

A possible storyline

The following words are provided for readers and supporters who want some ideas about one possible story. Most readers use their own words to make their own story from the pictures.

Jed's story

1. Jed goes to prison during the coronavirus pandemic. He feels scared as he knows what is in front of him.
2. Things are different to the last time Jed was in prison. He queues for his food with the other first night men, but has to wait behind a yellow line until it's his turn.
3. A nurse talks to Jed – all new residents are put in isolation for 14 days. This is to check that they haven't got coronavirus. Jed has asthma so he is given a letter. It explains that he could get very poorly if he gets coronavirus.
4. She tells Jed to wash his hands often. A prison officer will bring his food to his room and, if he does get ill, he can take paracetamol. Some people have swabs for coronavirus taken from their nose and throat.
5. There is a vaccine that Jed can have to stop him getting ill from coronavirus. The nurse asks Jed if he wants to have it. Jed decides that he doesn't want to have the vaccine.
6. Jed is aware he is going into someone else's room, so he is quite cautious not to disturb or distress his roommate. He

knows his cell mate may have concerns and threaten him, telling him to get out.

7. Jed has got a good cell mate who likes playing cards. Because of coronavirus they stay in their room most of the time. They can't go to education or the gym but they can go outside for a short time every day, as long as they keep 2 metres – that's three steps or a bed length – apart from other people.
8. A prison officer takes Jed to use the phone. He rings his friend Kate to find out how she is.
9. Jed feels hot and cold. He is coughing all the time.
10. A prison officer takes Jed to a new room just for him.
11. The nurse comes to see Jed. She is wearing a mask, an apron and gloves. She takes his temperature.
12. Jed still doesn't feel very well, and he is bored and lonely. He wishes that he had let the nurse give him the vaccine when he arrived in prison.
13. Jed is feeling much better now. He is one of the lucky ones. Some people may get seriously ill with the virus. He is glad someone explained this to him, even though it made him anxious when he got ill. The prison officer brought him some stuff to do. He still has to stay in isolation for a few days to make sure he isn't infectious.

Kate's story

14. This is Kate – she is thinking about her friend Jed who is in prison
15. Kate is really upset and her foster dad calls the doctor. They are both worried about her.
16. She is taken to hospital where the nurse is expecting her.

17. The nurse explains things to Kate. Kate must wash her hands often. Some people have swabs for coronavirus taken from their nose and throat.
18. Kate has a room on her own. She is feeling very scared.
19. The nurse comes to see her and brings her things to do.
20. Kate really isn't feeling very well. Has she got coronavirus?
21. She takes some paracetamol.
22. Kate has gone back to bed because she is feeling poorly. The nurse takes her temperature – Kate has got a fever.
23. Kate is taken to another hospital because she is very ill.
24. The doctor explains about the treatments Kate can have.
25. Kate's dad is allowed to visit because Kate is very ill now.
26. Sadly, Kate dies from the virus.
27. The nurse rings Kate's dad.
28. Jed hears the news from Kate's dad that she has died.
29. The chaplain invites him to come and talk about Kate. The chaplain writes a note to Kate's dad saying how sad he is.
30. Jed goes to see the chaplain or counsellor to talk about how he feels now Kate has died. Jed tells him that he should have said yes to the vaccine. And he wishes Kate had had the vaccine.

Quick guide to using Beyond Words resources

What is a Beyond Words book?

- It's a book without any words.
- Pictures are used to tell a story.
- The story puts across information.
- The pictures can also be used to help people to explore and understand how they feel.

Why use a Beyond Words book?

- To understand information without reading words.
- To explore feelings and emotions that may be difficult to put into words.
- To explain what is going to happen or guide difficult conversations (e.g. planning treatment if someone has a life-limiting illness).
- To build connections, by sharing a story.

Who can use Books Beyond Words?

- People who find words hard to read e.g. language barrier or learning difficulty/ low literacy.
- Anyone wanting to explore how they feel about a topic.

How can a Beyond Words book be used?

A book can be read alone or together with a helper (peer mentor, member of healthcare team, prison officer, chaplaincy).

Alone

- Pictures put across information without having to read words.

With a helper

- The reader sets the pace, chooses how much to look at and what the pictures mean to them. There is no 'right' or 'wrong' story.
- A storyline is written out at the end of the book. Each number matches a picture. This is just a prompt for the helper.
- The helper can guide the reader by asking 'What, how, why, who' questions about the pictures, to allow the reader to talk about the story e.g. 'What is the picture showing?' 'How do you think Jed feels?' 'Why do you think Jed looks angry?' 'Who else will be feeling sad about Kate?'

Useful resources in the UK

NHS coronavirus guidance: mental health, learning disabilities and autism

www.england.nhs.uk/coronavirus/publication/letter-responding-to-covid-19-mental-health-learning-disabilities-and-autism/

NHS COVID-19 Grab and Go guide

Once completed, this form should be read in conjunction with a person's hospital passport

www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0381-nhs-covid-19-grab-and-go-lda-form.pdf

Prison transfers and remissions to and from mental health inpatient hospitals in relation to COVID-19

www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0338-MH-transfers-remissions-protocol-and-guidance-final.pdf

Easy read resources in use in the criminal justice system

Examples from police, courts, liaison and diversion, prison and parole, healthcare, probation and criminal justice organisations.

<https://www.keyring.org/cjs/easy-read-examples>

RCGP COVID-19 guidance for healthcare in secure environments

https://elearning.rcgp.org.uk/pluginfile.php/149460/mod_page/content/35/COVID-19_GUIDANCE_HEALTHCARE-SECURE_ENVIRONMENTS_UPDATE_20042020.pdf

RCGP Resources for Secure Environments

<https://www.rcgp.org.uk/clinical-and-research/resources/a-to-z-clinical-resources/prison-health/resources-for-secure-environments.aspx>

RCGP Learning and Intellectual disabilities in secure settings

<https://www.rcgp.org.uk/clinical-and-research/resources/a-to-z-clinical-resources/prison-health/learning-and-intellectual-disabilities-in-secure-environments.aspx>

Related resources from Beyond Words

The pictures in this resource have been adapted by Beth Webb from [You're in Prison](#) and other stories.

Free downloadable resources on coronavirus

- Beating the Virus
- When someone dies of coronavirus: a guide for carers and family
- Jack plans ahead for coronavirus: a guide for carers and family
- When it's not safe to stay at home: guide to supporting people at risk of abuse at home during coronavirus

All available to read online and download for free.

www.booksbeyondwords.co.uk/coping-with-coronavirus

[You're in Prison](#) (2013) by Sheila Hollins, Alison Giraud-Saunders and Madeleine Ryan, illustrated by Beth Webb and Tom Ralls. Dave has been sent to prison. The book tells his story about going to prison and how he copes with the experience.

[Going into Hospital](#) (2015, 2nd edition) by Sheila Hollins, Angie Avis and Samantha Cheverton, with Jim Blair, illustrated by Denise Redmond. This book helps to prepare and support people being admitted to hospital, by explaining what happens, covering planned admission and accident and emergency.

[Am I Going to Die?](#) (2009) by Sheila Hollins and Irene Tuffrey-Wijne, illustrated by Lisa Kopper. This story deals honestly and movingly with the physical and emotional aspects of dying.

[When Somebody Dies](#) (2014, 2nd edition) by Sheila Hollins, Sandra Dowling and Noëlle Blackman, illustrated by Catherine Brighton. Mary and John are both upset when someone they love dies. They learn to feel less sad by attending regular bereavement counselling sessions and from the comfort and companionship of friends.

[When Mum Died](#) and [When Dad Died](#) (both 2014, 4th edition) by Sheila Hollins and Lester Sireling, illustrated by Beth Webb. Both books take an honest and straightforward approach to death and grief in the family.

[Bob Tells All](#) (2015, 2nd edition) by Sheila Hollins and Roger Banks, illustrated by Beth Webb. Bob feels unsettled when he moves into a new home in the community. His carer helps him to unravel his painful past as a victim of sexual abuse.

[When Dad Hurts Mum](#) (2014) by Sheila Hollins, Patricia Scotland and Noëlle Blackman, illustrated by Anne-Marie Perks. After her dad is violent towards her mum, Katie's teacher supports the family to get the help of an Independent Domestic Violence Advocate and the police.

[Feeling Cross and Sorting It Out](#) (2014) by Sheila Hollins and Nick Barratt, illustrated by Beth Webb. Ben doesn't like being rushed and when Paul won't make time for a chat, Ben gets cross and upset. When Paul understands what is important for Ben and what has been worrying him, they can choose a new activity to do together.

[Ginger is a Hero](#) (2015) by Beth Webb. Mary and her neighbour Mrs Hill don't get on. Mrs Hill gets really cross when her cat, Ginger, makes friends with Mary. But when Mrs Hill collapses at home, it's down to Mary and Ginger to save her life. *Black and white pictures from this story can be printed for children to colour and post to parents in prisons and psychiatric units:* www.booksbeyondwords.co.uk/s/Ginger-is-a-Hero-black-and-white-outlines-t1wk.pdf

The Books Beyond Words series

A wide range of other titles is available in the Books Beyond Words series, including books about physical and mental health, criminal justice and abuse and trauma, as well as lighter topics that can be enjoyed for pleasure.

See www.booksbeyondwords.co.uk

For smartphones and tablets

The **BW Story App** breaks down all of our picture stories into short, searchable snippets between 2-9 pictures long. Available on both Apple and Android, the app makes it quick and easy to find pictures that will help you to support the person or people you care about. Download the app with limited taster content for free from the App Store and Google Play Store.

www.booksbeyondwords.co.uk/bw-story-app

Beyond Words elearning

This foundation module offers an overview of Beyond Words and will develop learners' confidence in how to get the most out of our series of wordless picture stories. It is for anyone wanting to learn more about wordless books. The education unit in a prison could offer this course to prisoners interested in learning how to support people with low literacy.

www.booksbeyondwords.co.uk/elearning/foundation-module

Acknowledgments

Our thanks go to all of the individuals who advised us on this resource and gave us their comments on the pictures, including Nigel Hollins, Christian Brown, Gill Bell and Rani Gosal and to the Royal College of General Practitioners.

Two pictures, featured on pages 4 and 16 in this story, are taken from [Beating the Virus](#), illustrated by artist Lucy Bergonzi.

Authors and artist

Baroness Hollins is a cross bench life peer in the House of Lords, Emeritus Professor of Psychiatry at St George's, University of London. She was initially a GP then a Consultant Psychiatrist, teacher, researcher and policy maker in intellectual disability. She is the founder and chair of the charity, Beyond Words, formed to use wordless stories to inform and empower people with intellectual disabilities and their carers about life and health. She has been President of the Royal College of Psychiatrists, President and Chair of the Board of Science of the British Medical Association. She is currently President of the Royal College of Occupational Therapists.

Dr Caroline Watson, Royal College of General Practitioners (RCGP) Clinical Champion for Healthcare in Secure Environments, has recently written the RCGP COVID-19 Guidance for Healthcare in Secure Environments and has published a question and answer resource for patients, to help them understand the changes, challenges and risks associated with coronavirus in secure environments. She is also the co-author of *Safer Prescribing in Prisons* (2nd edition, Jan 2019) and creator and editor of a number of resources for clinicians working in secure environments (published by the RCGP).

Michael Emmett is a former prisoner and author of *Sins of Fathers: A Spectacular Break from a Criminal, Dark Past* (due for publication early 2021, Harper Inspire). Michael is committed to helping prisoners and ex-offenders to find their own paths to peace after turning his own life around thanks to the strength his faith has given him.

Beth Webb is the artist who helped to develop the concept of Books Beyond Words in its early days. She is also the author of 14 novels for children and young people and is a professional storyteller.