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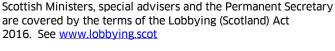
23 September 2020

## Dear Colleagues,

Further to our <u>letter</u> dated 3<sup>rd</sup> August 2020, we want to provide an update on guidance to support the remobilisation of stand-alone residential respite/short break facilities for both children and adults.

You will already be aware that the <u>guidance to support the safe re-opening and delivery of building-based day services for adults</u> was published on 31 August.

We are now writing to confirm that stand-alone residential respite services for children that provide respite/short breaks only should now follow the Health Protection Scotland guidance, COVID-19: Information and Guidance for Social, Community and Residential Care Settings. This includes stand-alone residential respite services for children which are registered with the Care Inspectorate as a care home. The guidance will be updated shortly to reflect this. Updated operational guidance for stand-alone residential respite/short break services for children and young people in the Scottish Government Coronavirus (Covid 19) Residential Childcare guidance will also be published shortly.









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Stand-alone residential respite for adults which is registered as a care home will continue to operate under care homes guidance. All the existing arrangements for local partnership working, infection prevention and control measures, staff testing etc. will continue to apply. However, the admissions arrangements will be adjusted in the relevant guidance to remove the blanket requirement for respite guests to remain in their rooms and enable a more proportionate approach to breaks in these lower risk settings. The key changes will be:

- a similar requirement for testing before admission but with the need for a negative result prior to arrival;
- physical distancing between residents should be maintained (except residents from the same household);
- a similar requirement for risk assessment to be undertaken prior to admission, with this to determine whether the individual's care needs mean they should be isolated for the duration of their stay (or for 14 days from admission); and whether any specific enhanced infection prevention and control measures are needed.

These stand-alone residential respite services can remobilise in line with the approach outlined above, while the aforementioned guidance is being updated.

We remain acutely aware of the value of these residential respite/short break facilities to individuals with support needs and their unpaid carers, and the frustration many people have felt while many building-based services have remained closed.

Thank you again for everything you are doing to support individuals and their unpaid carers at this time.

JEANE FREEMAN

MAREE TODD







