

# **Guidance for Councils on practical support for self-isolation**

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Issued by MHCLG, DHSC and NHS Test and Trace

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## Part 1: Overview and purpose

- 1.1. Self-isolation of people who have coronavirus, or are at high risk of having the virus, is an integral part of the COVID-19 response and will remain so throughout the medium term, alongside ongoing roll-out of vaccination, particularly in light of the threat posed by new variants. To achieve this goal, it is essential both to ensure high levels of compliance with self-isolation for people who test positive for coronavirus and their close contacts. We also need to ensure high uptake of testing, both for people with symptoms and for high-risk people in asymptomatic groups.
- 1.2. Individuals are expected to self-isolate if they or another household member have symptoms of COVID-19 and are legally obliged to do so if they test positive for COVID-19 or if they are a close contact of someone who has tested positive. Daily contact testing is being piloted as a possible future alternative to self-isolation, but the current legal requirements (based on expert public health advice) are for all confirmed contacts, other than those participating in daily contact testing pilots, to self-isolate for the full required period.
- 1.3. The main reported barriers to successful self-isolation include:
  - A lack of understanding about self-isolation requirements and the importance of self-isolation.
  - Concerns about financial consequences and employment risks.
  - The practical, social, and emotional consequences of self-isolation, including:
    - access to food and other essential supplies
    - not being able to carry out caring responsibilities
    - practical tasks such as dog walking
    - impact on mental health and wellbeing, including loneliness and boredom
- 1.4. An effective approach to ensuring high levels of adherence to self-isolation involves the following elements:
  - **Communications** to improve awareness of when people need to self-isolate, how long for, what this involves, its importance in stopping the spread of the virus, the support available and the consequences of breaking the rules.
  - **Practical, social, and emotional support** for those who need it, organised by councils and community groups.
  - **Financial support** for people on low incomes who are unable to work from home and will lose income through self-isolating.
  - **Targeted enforcement** of breaches of the legal requirement to self-isolate, as well as council enforcement against employers who pressure their employees to break self-isolation when they are required to do so.
- 1.5. This Framework focuses on the first and second of these issues. In parallel, the Government is working with councils to make changes to the Test and Trace Support Payment scheme to improve financial support for people on low incomes who have

to self-isolate and with employer representatives to help address concerns around employment risks.

- 1.6. This advisory Framework sets out the essential elements of practical non-financial support which should be in place in all local areas. It is designed to support councils in providing a triaging process and support package for individuals who are required to self-isolate and need practical, social, or emotional support to do so.
- 1.7. Annex B sets out examples of good practice, to which we will add further examples over time. We will aim to bring together this Framework and other guidance to provide a 'whole system' document for councils that consolidates both practical and financial support for people who test positive and for their close contacts. We will also use insight from targeted local pilots to strengthen the Framework.

## Timeline

- 1.8. While this Framework builds on existing work in councils, we want to provide councils with sufficient time to consider the document and to plan for delivery of practical support.
- 1.9. We will ask councils to complete a readiness survey around a week after issue of the framework in mid-March. This will provide a means to achieve an assessment of how ready councils are to deliver against the expectations in the Framework by the end of March and to work closely with any councils that report low levels of confidence.
- 1.10. We will also invite councils to attend open sessions to ask any questions they may have on the practical support framework and the wider support package.

## Variants of concern

- 1.11. There may be occasions when councils need to give additional support to residents over and above the minimum expectations set out in this Framework, for example where there are localised incidents of Covid-19 variants identified. Our expectation is that responses to such incidents should, wherever possible, build on a council's existing delivery model, though the scale and intensity of the response may need to flex. We will reflect any specific asks of councils regarding practical support in future iterations of the Framework.

## Funding

- 1.12. The Government's roadmap for easing COVID restrictions, as set out in its wider COVID-19 Response ([Spring 2021](#)), states that the Government will expand support for those self-isolating. The Roadmap makes it clear there will be more funding to help councils ensure people self-isolating have access to practical support.
- 1.13. The government is providing £12.9 million funding per month until the end of June 2021, with a review point in May, to help councils meet the costs involved in

assessing people's practical support needs and helping them access support. We are currently developing the funding formula which will determine distribution levels and allocations to councils. We will provide further details shortly, to ensure that councils have the certainty they need.

- 1.14. As now, councils may wish to use funding from the Contain Outbreak Management Fund to help meet the costs of any direct support that they provide to people self-isolating or other sources to help meet the costs of support.
- 1.15. The Test and Trace Support Payment Scheme will continue into the summer, and will be expanded to cover parents who are unable to work because they are caring for a child who is self-isolating, and the funding made available for local authorities as part of this to make discretionary support payments will be increased to £20 million per month.
- 1.16. In addition, the Medicines Delivery Service that has been established to help clinically extremely vulnerable people will be extended to provide essential deliveries for self-isolators without access to alternatives.

## Part 2: Communications

### Summary:

- **Councils and their partners have a vital role to play in engaging with local communities to explain the importance of self-isolation and signposting to sources of support.**
- **Government will work with councils and voluntary organisations to help ensure that local and national communications and engagement are mutually reinforcing and to help spread good practice and innovation.**
- **Communications and engagement should encourage people to have advance plans for self-isolating and consider how they can support family, friends and neighbours who need to self-isolate, while also ensuring people understand that their council can help them get specific support if they need it and they have no other means of support.**
- **The availability of practical support from councils will be publicised at the start of the customer journey to get a test and to all close contact and positive cases.**
- **Councils should offer widely publicised channel/s for people to declare a support need, including digital portals and customer contact lines.**

2.1. Councils have emphasised the importance of strong and consistent messaging that makes clear:

- Testing and tracing alone will not stop spreading COVID-19. Self-isolation is key.
- Self-isolation is different to lockdown: none of the reasons why you can leave your house over lockdown apply to self-isolation.
- Self-isolation prevents you from passing on the virus to your loved ones, the people you work with, your neighbours and your community.
- Anybody in your household could need to self-isolate with little warning so have a plan in place in case, so you feel confident you could cope.
- Help is available to support you to self-isolate if you need it. Your local council can help you get practical support from local voluntary and community organisations.
- If you are worried about your finances whilst self-isolating you may be eligible for financial assistance from your local council.

2.2. Over the coming weeks, Government will work with councils to implement a new self-isolation communications strategy to:

- Raise awareness of the vital role self-isolation plays in halting the spread of COVID-19
- Improve the understanding of self-isolation requirements
- Improve adherence to self-isolation among people who have symptoms of coronavirus and their households – and among people who have tested positive for coronavirus and their close contacts
- Encourage more people to come forward for testing.

2.3. Councils and voluntary groups will be key partners in communicating and engaging with the general public, community leaders and influencers and employers. Councils and their local partners play a critical role in engaging with communities where there are greater barriers to participation in testing and self-isolation, whilst recognising that not everyone will have the same barriers to self-isolation and people have different needs. We will involve councils in the shaping of messages and core communications products and will revise this Framework accordingly as the strategy evolves. Learning from local campaigns, information from pilots and customer insight will help us collectively shape the messaging and improve its effectiveness. Examples of best practice will be shared in Annex B.

## Part 3: Practical support

### Contact and triage

#### Summary:

- **NHS Test and Trace will, as now, signpost people who are required to self-isolate (positive cases and their contacts) to sources of help and further information including to contact their council direct if they require specific support and have no other means to access it.**
- **Where initial contact from NHS Test and Trace suggests a person may have specific support needs that cannot be met in other ways, they refer these cases to councils through daily data feeds.**
- **Councils will make proactive contact through appropriate means to people flagged by NHS Test and Trace as having specific support needs to offer help in accessing support.**
- **Anyone required to self-isolate who seeks help directly from their local council should be able to receive the same help in accessing support as someone referred via NHS Test and Trace.**

#### First contact and triage

- 3.1. There are two main routes for people who need to self-isolate to seek help in meeting support needs. Through the enhanced communications highlighted in the previous section, we aim to ensure people understand at various points in the customer journey that they can seek help from their council, including with food access, essential tasks, caring responsibilities, and emotional support, if they have no other means of support.
- 3.2. People may choose to contact their council with a support need at various points on their self-isolation journey, for example, as soon as they experience coronavirus symptoms, when booking a test, or upon receiving their test results. We want to ensure that, no matter when someone declares a support need, their needs are properly assessed, and the right support is provided where required.
- 3.3. NHS Test and Trace is already making referrals to councils for individuals who have declared a support requirement. If someone tests positive for coronavirus, NHS Test and Trace will send them a text or email alert or call them with instructions of how to share details of people with whom they have had close, recent contact and places they have visited. People are invited to do so online via a secure website, alternatively they will be called by a contract tracer. Where someone is identified as

a close contact, NHS Test and Trace follows a similar process to get in touch and alert them to the need to self-isolate, with some contacts using the secure online service and others speaking to contact tracers by telephone.

- 3.4. In both cases (people who have tested positive and their close contacts), both the secure website and contact tracer call script ask whether the individual needs support while self-isolating. If the individual indicates a need for support, they will be directed to websites giving further information about where they can find help in their local area.
- 3.5. If NHS Test and Trace is unable to resolve the support need through signposting, they will select a flag on the case record indicating 'I think I will need support' so that the case is referred to the relevant council for follow-up action.
- 3.6. NHS Test and Trace will inform the individual to contact their local council directly to discuss any specific support that is needed. They will also advise individuals who indicate specific support needs in this way that they can expect to be contacted by their local council by text, email, letter or phone call. Any individual who has self-identified as Clinically Extremely Vulnerable or extremely vulnerable will be recorded.
- 3.7. NHS Test and Trace provides councils with data on those people in their area who have flagged a support need through the Power BI platform, using established systems for assuring privacy and security of data. Councils should contact people by text, email, letter or outbound call to provide further information about how to access local support, including providing a contact centre number for people to call if they want more specific help.
- 3.8. Through an inbound or outbound call, or an online tool if available, councils should assess support needs and decide what, if any, package of support is required, based on local policies and capacity.
- 3.9. While the information provided by NHS Test and Trace via the Power BI platform is the primary source of information on people required to self-isolate who need support, it may not capture all cases. Councils should continue to supplement this information with reports and data from schools, workplaces and their own local contact centres.
- 3.10. See Annex C for more information on data-sharing.

**Follow up contact**

- 3.11. Contact tracers make follow up calls to people who have tested positive on days 4, 7 and 10 and to contacts on days 4 and 7. Positive cases and contacts should also receive a SMS and email on days 2, 5 and 8. Before making follow up calls contact tracers are asked to review the case / contact details and have access to the information the person provided on their support needs.

- 3.12. Follow up calls provide an opportunity to establish whether any new or additional support needs have arisen during the self-isolation period and to signpost to sources of support, including councils if necessary.
- 3.13. While mindful of the need to co-ordinate contact from contact tracers and councils and avoid overwhelming people who are self-isolating, we encourage councils to make at least one follow up contact at an appropriate interval to people who have made initial contact with the council (either direct or via NHS Test and Trace) to discuss a support need. This should include people who initially indicated a support need but were found not to require help in accessing that support, to establish whether this is still the case or whether a support need has arisen.

**The clinically vulnerable or extremely vulnerable**

- 3.14. NHS Test and Trace also asks people required to self-isolate to indicate if they are clinically vulnerable or extremely vulnerable. Councils should endeavour to make proactive contact, using appropriate means which could include phone calls, texts, emails or letters as appropriate, with these vulnerable cases regardless of whether they have also declared a support need. As with Shielding, councils may wish to prioritise contact based on any individual risk profiles, local data on support needs and any other relevant local data sources.

## The support offer

- 3.15. Councils' convening role makes them best placed to bring together the local support available from councils and their partners, including the voluntary, community and faith sector, NHS volunteers, employers and informal networks.
- 3.16. Councils will also want to consider how best to join up access points to practical, social and emotional support and the NHS Test and Trace Support Payment scheme, including discretionary payments, in order to offer an integrated support offer with a single point of access wherever possible. The process of identifying financial support needs may uncover a practical, social or emotional support need and vice-versa.
- 3.17. We recognise support requirements may evolve over time and may depend in part on local prevalence of the COVID 19 virus and broader guidance and restrictions.

## Food access

### Summary:

- **People who are self-isolating should be supported to access food where they are unable to rely on family, friends or other support networks.**
  - **Wherever possible access to food should be provided quickly to minimise the risk of a household breaching self-isolation requirements.**
  - **Support should be provided in the most cost-effective way, including making full use of commercial or other options as far as possible.**
  - **Direct provision of food should be on an exception only basis.**
- 3.18. Councils can use local discretion to decide how best to facilitate access to food for those in need. Any model should be designed to avoid unnecessary dependence and focussed on helping individuals to access commercially available food offers where possible, as well as drawing on support from volunteers to help with shopping as needed.
- 3.19. Where individuals can access commercial offers independently, they should be expected to do so. We expect, therefore, that councils would operate a form of triage system as part of their contact strategy, to ensure that additional support is targeted on those who need it.

### Councils will need to consider:

- a. How quickly they can ensure individuals are supported to access food, to prevent the need to break self-isolation to get food supplies, taking into account cultural and dietary needs.
- b. Proactively working with individuals who need support to overcome barriers to access supermarket delivery slots.

- c. Leveraging NHS and local volunteer networks as effectively as possible.
- d. Making links to local support schemes, e.g. food banks, voluntary sector referrals, vouchers, or cash grants.
- e. Where these options are not suitable, as a last resort, directly supplying suitable food to individuals.

**Where food is supplied directly to individuals, councils could:**

- Consider how to take account of the dietary and cultural needs of individuals as far as possible.
- Leverage local commercial food offers as appropriate, including pooling buying power where appropriate (i.e. with neighbouring councils).
- Consider how best to ensure this is short term support and doesn't create any ongoing dependency of accessing food where possible.

## **Essential tasks and social & emotional support:**

**Summary:**

- **Councils should help people who do not have alternative support networks to access support in carrying out essential tasks and social or emotional support.**
  - **Support should be provided in the most cost-effective way, including use of local volunteer networks where appropriate.**
- 3.20. Councils are best placed to work with individuals to identify whether they: can support themselves; seek assistance from family and friends; or require additional help or advice through the council or other organisations.
- 3.21. Councils should use their expertise in assessing any requirements for practical, social or emotional support (broadly understood as additional support needs arising from following self-isolation requirements that go beyond any pre-existing met or unmet social care needs) and help people access tailored support where needed, whilst ensuring that short term support does not create a need for ongoing dependency.
- 3.22. Councils should be ready to signpost assistance relating to mental health, loneliness and digital exclusion as well as practical support needs. This support could include:
- Wellbeing: social contact, providing reassurance, check-ins, welfare calls.
  - Social and digital inclusion: supporting people to access services online, for example supermarket deliveries.
  - Mental health support.
  - Practical support, e.g. dog walking.
  - Helping with caring responsibilities.

- 3.23. As with food access support, councils will wish to make full use of NHS responders and local networks of volunteer support, where possible and appropriate, to ensure basic support needs are met in the most cost-effective way.
- 3.24. These requirements may range from informal basic support (e.g. picking up shopping for a neighbour) to formal social care (either paid or unpaid). Councils should consider appropriate support where someone normally provides formal or informal care to someone else but is unable to do so because they must self-isolate. Councils should identify the essential support needs for these individuals during the period of their care provider's self-isolation.

## Part 4: Gathering information on outcomes

- 4.1. We appreciate that councils are already returning outcomes data relating to both Shielding and the Contain Outbreak Management Fund, so we will coordinate any data relating to self-isolation with these existing asks.
- 4.2. As with the Shielding Framework, collecting information about support provided by councils will support central government in working with councils to improve outcomes and provide transparency. We expect councils will want to collect similar data for their own management purposes. We will always seek to ensure proportionate and stable reporting arrangements. This information is indicative and will be refined.
- 4.3. We will seek information on the following high-level areas:

### **Numbers seeking support or have declared they are vulnerable**

- a. Number of people seeking support, including:
  - i. Those who have declared a support need during contact with NHS Test and Trace.
  - ii. Those who declared they were clinically extremely vulnerable or vulnerable.
  - iii. Those who have declared a support need to the council direct.

### **Numbers supported**

- b. Number of people requiring support whose needs were assessed.
- c. Number of those self-isolating who did not need support following triage.

### **Spend on support for those self-isolating**

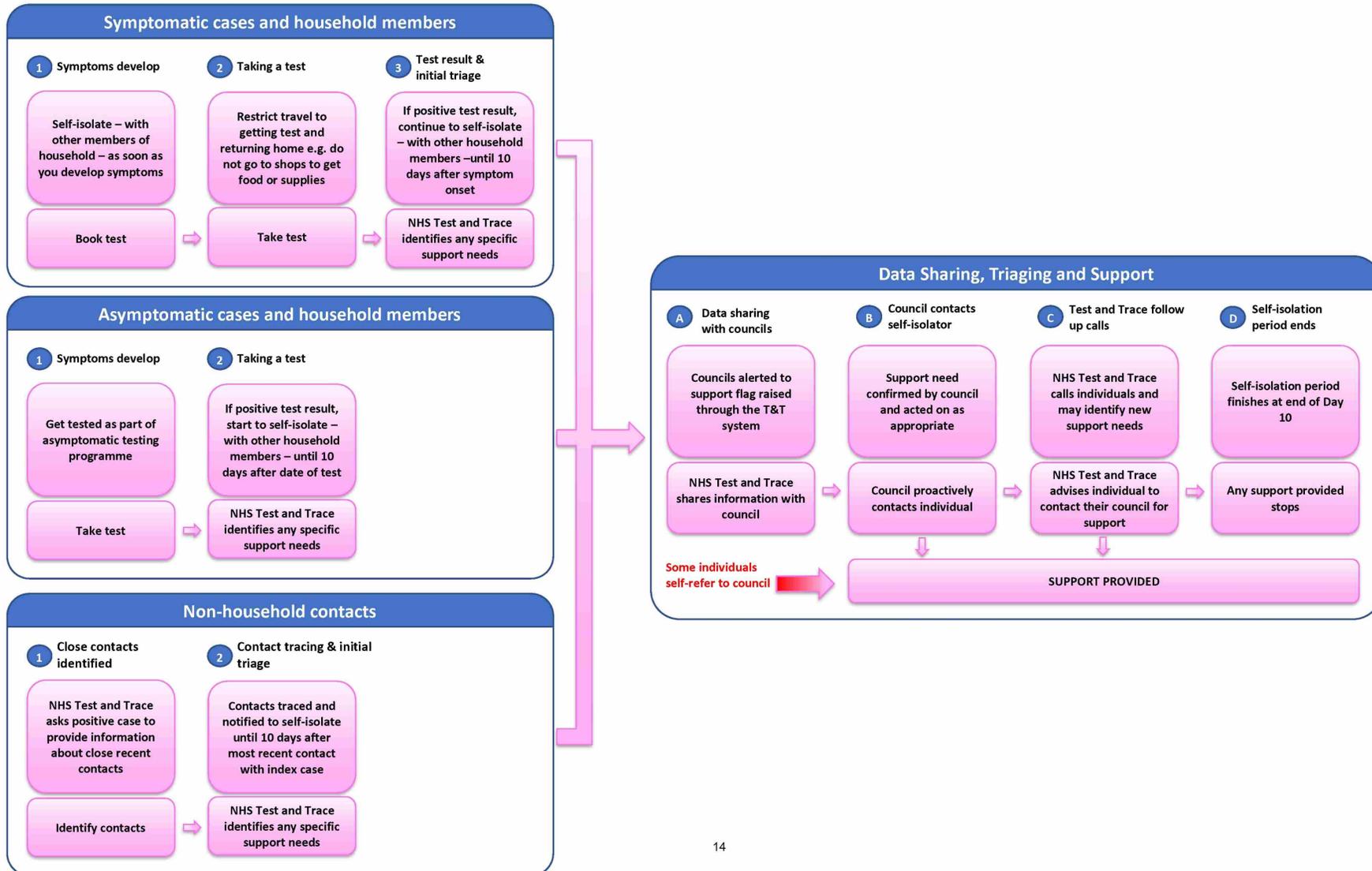
- d. Overall estimate of spend on support, including associated staff time and system overhead costs.

### **Ongoing confidence level**

- e. As with shielding, we may also ask councils to self-assess delivery of support to those self-isolating by asking: How confident are you that the Council can help arrange appropriate support for those self-isolating, where specific support is requested, over the next reporting period? (1 (Not confident at all) - 4 (Very confident)). This question is seeking views on confidence in delivery for supporting those self-isolating, as per the expectations in the Framework.

## Annex A - Process map

The maps below set out the proposed 'end-to-end' process described in the Framework for both positive cases and contacts.



## Annex B - Resources

We are aware that some councils have already put in place additional measures to support residents with self-isolation and have included below links to web pages for councils to consider:

<https://www.local.gov.uk/our-support/coronavirus-information-councils/covid-19-good-council-practice/covid-19-local-contact>

## Annex C - NHS Test and Trace Data sharing and guidance

### NHS Test and Trace support data sharing process

Directors of Public Health in local authorities have access to a Power BI system which gives details of the individuals in their area who have been told to self-isolate. In some of these cases, the individuals are marked as having 'support required'. This is flagged when an individual raises a support need over the phone which cannot be resolved by the contact tracer with signposting, or when they tick that they have a support need online. If the contact tracer is unable to resolve the support need through signposting, the case will be marked 'support required' and this will show as a flag on the list of individuals that local authorities have access to. An individual may also tick this box if they complete the journey online. The image below shows an example of what the power BI system sends through to Directors of Public Health.

Where a support need has been flagged for the council to follow-up with, the highlighted column will show 'True'.

The screenshot shows a Power BI dashboard titled 'Covid-19 Situational Awareness Explorer'. On the left is a navigation menu with categories like 'Data Handling', 'Data Guide', 'Data Fields', 'Contact Tracing Cases Charts', and 'Contact Tracing Cases Data'. The main area displays a table with the following columns: 'Call Centre Outcome', 'LA Support Required', 'LA Support Received', 'LA Support Letter Received', and 'LA Support Filter'. The table contains three rows of data, with the second row highlighted in grey. A red box highlights the 'LA Support Required' column. The values in this column are 'False', 'False', and 'True' for the three rows respectively. The 'LA Support Filter' column has 'False', 'False', and 'True' values. The text 'OFFICIAL SE' is visible in the top right corner.

Call Centre Outcome	LA Support Required	LA Support Received	LA Support Letter Received	LA Support Filter
difficult case - escalation	False	False	False	False
	False	False	False	False
difficult case - escalation	False	False	True	True

For guidance on permitted usage and sharing of the Test and Trace data provided through Power BI, please ensure you have read the Test and Trace data sharing guidance, which can be found [here](#).