

Shielding clinically extremely vulnerable people from COVID-19

Updated guidance (15 July 2020) for councils, LRFs and other local delivery partners

This guidance is for local authorities (LAs), local authority hubs (where these have been established) and Local Resilience Forums (LRFs) / Strategic Coordination Groups, who are working closely with Government and other key partners, to support those who are shielding from coronavirus (COVID-19).

Shielding is a measure to protect people who are clinically extremely vulnerable to COVID-19. These are people with serious underlying health conditions which put them at very high risk of severe illness from COVID-19.

At the end of March, the Government strongly advised those people to follow shielding measures to keep themselves safe. This included: staying at home at all times and avoiding any face-to-face contact until at least the end of June, subject to review. The [clinically extremely vulnerable group](#) of 2.2m people has been identified by the NHS, GPs and Clinicians.

To help people to shield, the National Shielding Support Programme was set up to provide essential support with food, medicines and basic care.

We have been clear that each step towards relaxing the shielding guidance would be taken carefully and based on clinical advice. People in this group are still at risk of severe illness if they catch coronavirus and should continue to take precautions.

The mid-June epidemiological data from the ONS COVID-19 Infection Survey shows that the chance of encountering coronavirus in the community has continued to decline. In addition, a test and trace system is now in place, including within schools, and there are robust measures in place to manage potential areas of higher risk.

On 22 June the Government announced it is relaxing advice to those shielding in two stages. Further information is provided below and guidance for those who are clinically extremely vulnerable is available at <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/> . This pack updates the previous guidance of 24 April to councils and local partners, and highlights arrangements in place until end of July to support individuals who are advised to follow shielding measures.

The guidance applies to England only.

It is supplemented by an updated FAQ document, which is included below in Annex A. We encourage you to share this guidance and the FAQs widely across your councils, LRFs and other structures – especially to those working directly with the clinically extremely vulnerable.

We welcome feedback on this note and how it could be improved via email to - shielding@communities.gov.uk

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1. Overview

Shielding is a measure to protect people who are **clinically extremely vulnerable** to coronavirus (COVID-19). These are people with serious underlying health conditions which put them at very high risk of severe illness from COVID-19.

People falling into this clinically extremely vulnerable group have been identified by the NHS and placed on the NHS Central Shielded Patient List. It includes those with the following medical conditions:

1. Solid organ transplant recipients.
2. People with specific cancers:
 - people with cancer who are undergoing active chemotherapy
 - people with lung cancer who are undergoing radical radiotherapy
 - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - people having immunotherapy or other continuing antibody treatments for cancer
 - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD).
4. People with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.

7. Other people have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions.

More information about who has been classed as clinically extremely vulnerable is available on: <https://digital.nhs.uk/coronavirus/shielded-patient-list>

Please note: the support system outlined below is only for clinically extremely vulnerable people who are shielding due to a serious underlying health condition.

1.1. Latest advice

The Government is currently advising people to shield until end of July and is regularly monitoring this position. We are relaxing advice to those shielding in two stages - as long as the incidence rate in the community remains low:

- **From 6 July** those shielding can spend time outdoors in a group of up to 6 people (including those outside of their household). Extra care should be taken to minimise contact with others by maintaining social distancing. This can be in a public outdoor space, or in a private garden or uncovered yard or terrace.
- Those shielding no longer need to observe social distancing with other members of their household.
- Also from 6 July those who are shielding will be able to create a 'support bubble' with one other household, as long as one of the households in the bubble is a single adult household (either an adult living alone or with dependent children under 18). All those in a support bubble can spend time together inside each others' homes, including overnight, without needing to maintain social distancing. This follows the same rules that apply to the wider population now.
- **From 1 August** advice for clinically extremely vulnerable people will move in line with advice to those who are clinically vulnerable. In practice, this means staying at home as much as possible, and if people do go out, taking particular care to minimise contact with others outside their household (unless you are in a support bubble) and robustly practising good, frequent hand washing.
- The relaxation of the shielding guidance will mean people who are clinically extremely vulnerable will be advised they can go to work or to the shops, as long as they are able to maintain social distancing as much as possible. This means that if they are unable to work from home but can work on site, they should do so, provided the business is COVID-safe.
- Support for those shielding will be extended to the end of July so that people can plan for these changes.

As from 1 August, Shielding will be paused, not stopped. In line with the clinical advice, shielding support will pause. This means that registration for support will stop on **17 July** and shielding support on **31 July**. The NHS will continue to maintain the Shielded Patient List (SPL) allowing us to continue to target advice and support to this cohort and to change advice and support if incidence rises. We will continue to share the NHS SPL with LAs.

Please note that in areas where there is a local outbreak, on clinical advice, tighter measures may be put in place for defined geographical areas in consultation with the local authority and Public Health England.

Updated advice will continue to be reflected in the guidance for clinically extremely vulnerable people.

2. Introduction to Shielding

2.1 What is Shielding?

Shielding is a measure to protect those individuals categorised as clinically extremely vulnerable - individuals with specific medical conditions which put them at higher risk of severe illness should they contract the COVID-19 virus.

The full guidance is available online here:

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

2.2 Who is eligible for shielding support from Government?

- To receive support, people must be in receipt of a letter from the NHS or their medical practitioner, advising them to follow Government Shielding guidance due to their medical condition.
- Many of these people will have a support network of people around them, who can help with shopping or collection of prescriptions, to be left at the front door.
- But there will be some who have no friends, family, neighbours or other nearby networks to do these things for them; the Government's Shielding programme has been created to provide assistance and support to this specific group.
- If people do not register for Government support, we cannot provide them with the assistance they require. If you are aware of someone who has received the NHS letter, and requires support but has not registered, it is imperative that you encourage them to access the GOV.UK website or call the number on the letter – without registration, we cannot offer assistance. (Individuals must also have their NHS number to hand as they will now be unable to register without this).
- There will be others who do not qualify for Shielding support, but who are affected by COVID-19 for a range of reasons. Government is keen to help local partners identify and respond to the needs of these groups – find out more here <https://www.gov.uk/find-coronavirus-support>
- The number of people who are Shielding will change over time. GPs and clinical specialists continue to identify and alert individuals that they are clinically extremely vulnerable and should follow the guidance. If people's medical conditions change, they may be advised by their clinician to stop Shielding.

3. Details of the Shielding Programme

3.1 Assistance available to shielding individuals

The Government's offer to shielding individuals who request our support covers the following three areas of assistance. This will continue to be available to the end of July. See below for more detail on the nature of the offer for each of these areas (Sections 5, 6 and 7):

- i. **Essential supplies** – a free, standardised weekly parcel of food and household essentials, and priority delivery slots with supermarkets;
- ii. **Medicines** – arrangements to have medicines delivered to people's homes by local community pharmacies or their dispensing doctor;
- iii. **Social contact and basic care** – for example, emotional or social support such as people to talk to on the phone or via a computer.

3.2 What is the role of councils, Local Resilience Forums and other local partners?

- Councils have played a vital role in assisting those shielding and they will continue to do so until the end of July by supporting basic care needs, providing food for people with additional dietary requirements, and helping people who cannot lift food box deliveries in from their doorstep.
- Further detail is provided in the sections below on food, medicine and social contact/ basic care.
- Additional support which goes beyond the three core Shielding Programme areas of assistance (food, medicine and social contact/ basic care) is being co-ordinated by councils alongside other local partners.
- All councils should now have in place phone number(s) that Shielding individuals can use if they have urgent needs (e.g. not having enough food for the next 7 days) as a result of COVID-19. The Government's call centre is operational between 09.00 -18.00, Monday to Saturday, so we ask that these local lines are also open between these hours. The call centre will continue making calls until and including 17 July and we ask that LAs keep their phone lines open until then (see the FAQs below for further details).
- Councils should continue to attend Local Resilience Forums/Strategic Coordination Groups to maintain a sense of the county and regional capacity to help. This is an opportunity to understand how the system is operating until the end of July.
- The Local Government Association (LGA) has produced helpful guidance for councils which spans a range of vulnerable groups: <https://www.local.gov.uk/protecting-vulnerable-people-during-covid-19-outbreak>
- The LGA has also produced series of frequently asked questions: www.local.gov.uk/our-support/coronavirus-information-councils/covid-19-faqs

3.3 Additional Government support

- The Minister for Local Government on 2 July announced an additional £500m to cover immediate funding pressures, taking the total support provided by government to £3.7bn of un-ringfenced grant. Across the full £3.7bn provided, it will support the pressures councils have reported and the crucial role they play in helping the country tackle this crisis, including shielding the clinically extremely vulnerable. The additional funding is un-ringfenced, recognising local authorities are best placed to decide how to meet the major Covid-19 service pressures in their local area.
- The Government is injecting an additional £63m of funding to be distributed to local authorities in England to ensure that no one has to go without food and other basic necessities.

4. Data provision and data sharing

4.1 Receiving data from Government

- As explained in earlier versions of this guidance, councils have organised themselves into 'Hubs' or groupings to receive data, via the named local authority data lead for each hub or local area.
- The data lead has a specific and important role: cascading national data to the other councils within their local grouping. The following is shared with them.
 - a) 'NHS Shielded Patient List' (SPL) medically vulnerable person data – provided on a daily basis.
 - b) Data on those on the SPL who have registered their support needs with the Government via the gov.uk website form or the automated phone line (provided daily at 4pm).
 - c) Food deliveries data including on planned deliveries and on deliveries made / attempted (provided daily at 4pm).

These data flows will continue until 31 July. Thereafter, only the SPL will be shared with LAs. Further guidance will be issued shortly to councils on how long these different data flows will be provided. For now, please note the following:

- Data from these national lists of clinically extremely vulnerable people is tailored to individual local authority area.
- Data leads for councils, or their hubs where they are working collectively, will receive cuts for all the councils within their remit, and in turn securely send on to each authority cut for their area.
- If you have received records in error, please inform us immediately by e-mailing shielding@communities.gov.uk. You should ensure you have fully deleted them and confirm to us in writing that you have done so.
- If a LA has not received its data, it should contact its hub, if it is working in collaboration with other authorities to manage Shielding support. If a hub has

not received their data, please contact: transfer-coronavirus-data-service@digital.cabinet-office.gov.uk

- Where there is a technical issue or a particular query on the data, councils are advised to log it with the Government Digital Service (the central data controller) via: transfer-coronavirus-data-service@digital.cabinet-office.gov.uk

4.2 'NHS List' clinically extremely vulnerable person data

- NHS clinically extremely vulnerable person data is highly sensitive and includes names, addresses, contact details and NHS numbers. The data is revised daily to reflect additions and deductions from hospital trusts. Additions and removals made by GPs are incorporated weekly. NHS Shielded Patient List data can be used to contact those clinically extremely vulnerable persons locally who councils have identified as potentially needing support or care. Use and sharing of this is **strictly controlled** – see data sharing guidance v1.2 enclosed separately.
- NHS data is not to be used or shared externally **for any reason** except where the council is contacting clinically vulnerable people directly.
- Councils must not confuse the highly sensitive NHS clinically extremely vulnerable person data extract they have, with 'incoming' shielding registration (consented) data they are already receiving from the website and telephone line.
- Councils can determine when to share Shielding registration data locally in order to meet the support needs of clinically extremely vulnerable people in their area.
- Shared data should have a clear purpose to support individuals who are Shielding - and it must be proportionate, and specific to COVID 19.

4.3 Incoming clinically extremely vulnerable person data

- This data is collected directly from the GOV.UK website or automated telephone line (and where necessary from the outbound call centre) from those individuals in receipt of NHS letters.
- The data includes a range of personal information, including names, addresses, telephone numbers, email addresses and NHS number. The data also includes information on whether they can access essential supplies (the individual would select yes or no). Moreover, it includes information on basic care needs, dietary requirements and requirement for help with boxes.
- Updates are available each day at 4pm. The data is added cumulatively, and the files will get bigger as time goes on as we want to ensure that no data is missed.

4.4 Data collection by local authorities

- In light of the relaxation to the shielding guidance, we have taken the decision to suspend our ask of you to feedback data on local shielding outcomes. Accordingly, we will not be issuing guidance on the submission of shielding data from councils to central Government as we had planned to do.

4.5. Data sharing

- Existing guidance on data sharing (v1.2) stands until 1 August. This guidance is enclosed separately.

5. Food and grocery deliveries

- The standardised free food parcels that the Government is providing to clinically extremely vulnerable individuals who register and request support with essential supplies, will continue to be delivered by Brakes & Bidfood to doorsteps until 31 July whilst individuals are advised to shield.
- Final registrations for food support will close on the 17 July, to allow for support to reach individuals ahead of the end date of 31 July.
- We have agreed with the participating 7 supermarkets (Asda, Sainsburys, Tesco, Morrisons, Iceland, Waitrose, Ocado) that priority access for supermarket delivery will continue beyond 31 July for individuals who have registered for food support (even if they have subsequently de-registered) by 17 July.
- We will continue to work closely with the Local Government Association and local authorities on options for providing food support for clinically extremely vulnerable individuals on any resumption of shielding in the future
- The Food Delivery section of the Frequently Asked Questions in Annex A provides further details on the implications of the shielding 'pause' announcements, and what local authorities should do when they encounter problems with the food delivery process.

6. Medicine deliveries

6.1 Community pharmacies

- The NHS has put in place arrangements for individuals to have medicines delivered by local community pharmacies and dispensing doctors during the COVID-19 outbreak.
- Medicines are being delivered by community pharmacies (and separately dispensing doctors) to eligible individuals - who, due to their medical condition, should not present in the pharmacy/dispensary - where no other person is able to collect the item from the pharmacy/dispensary and deliver it to the clinically extremely vulnerable person's door.
- This service was originally put in place between 9 April -1 July with the agreement of the Secretary of State for Health. With the announcement that the Shielding Policy in England will be gradually relaxed from 6 July and paused completely from 1 August a decision has now been made to commission the service for a second time between 2 – 31 July. The Pandemic Medicines Delivery Service will therefore cease to be in operation in England after 23:59 on 31 July.
- The conditions of the Pandemic Medicines Delivery Service between 2 - 31 July remain the same as they were for the first period of commissioning (as set out in paragraph 6.2).

- Those supported by the Medicines Delivery Service who continue to need help will receive this support until 31 July.
- After this date, the NHS Volunteer Responders will continue to offer medicines deliveries. If someone is vulnerable or at risk and needs help with shopping, medication or other essential supplies, they should call 0808 196 3646 (8am to 8pm).

6.2 Volunteers helping to deliver medicines or collect prescriptions

- Whilst the Pandemic Medicines Delivery Service remains in place and where there is no family, friend, neighbour or carer, the pharmacy or dispensing doctor team may arrange for a local volunteer to collect the clinically extremely vulnerable person's prescription and deliver it to them.
- Where there is no volunteer available who can deliver the medicine(s) to the patient in the timescale that they are required, the pharmacy contractor or the dispensing doctor must ensure that eligible patients get their prescription delivered.
- Following 31 July, if the clinically extremely vulnerable person is still unable to collect medicines from their pharmacy in person while maintaining social distancing, and if friends and family cannot collect for them, then they can continue to use the NHS Volunteer Responders to deliver their prescription.

7. Social contact and basic care

7.1 Introduction

- Councils are key in meeting the social and basic care needs of clinically extremely vulnerable people who are Shielding and have requested assistance.
- Councils should contact those who have indicated - either via the GOV.UK website, call centre or through direct contact with the council/other local partner - that they require help to meet their basic needs to ensure these are met.
- Councils should assess what help is required and how best individuals can be supported, using existing resources or by working with trusted local partners like the voluntary and community sector.
- We recognise that there are many varied aspects of basic support that is delivered locally; and that councils will be doing a range of things (e.g. from telephone calls, to walking the dog, to domiciliary care) in different ways.
- Councils should continue to provide this support whilst shielding is advised – until 31 July (unless it needs to be extended because of a local lockdown).

7.2 Basic care needs

- Councils receive via the daily 'incoming CEV person data' information (Section 4, Data - above) pertaining to whether an individual has indicated they need support in meeting their basic care needs. Those individuals should be contacted by their council to discuss those needs and, if and as appropriate, they should refer to the Adult Social Care (ASC) services in the usual way.
- In cases where the Shielding call centre is involved, call agents will make a referral to the relevant LA's adult social services department if they identify a

person with an **immediate** welfare need where urgent social services support may be required.

- The call centre operatives do not triage or screen care needs. A referral to adult social services departments will only be made where the clinically vulnerable person gives additional information indicating an urgent welfare/other need to the call centre operative. It is then for the council to screen and respond to the urgent need.
- As above (Section 3), all councils should now have in place phone number(s) that Shielding individuals can use if they have urgent needs (e.g. not having enough food for the next 7 days) as a result of COVID-19. Government's call centre is operational between 09.00 -18.00, Monday to Saturday, so we ask that these local lines are also open between these hours until 17 July when the call centre will conclude calls.

7.3 Social Contact

- This period of Shielding is likely to be a difficult and lonely experience – especially for those who have no nearby network of friends, family or neighbours to support them.
- Data shared with councils will therefore also indicate whether an individual has requested social contact during the period they are required to remain Shielded.
- It is for councils to determine the best way to coordinate this offer locally: where possible all persons who have requested social contact should be offered a 'check-in and chat' for an appropriate amount of time. It would be welcome if these were offered for at least one hour per week, but councils should take appropriate advice from public health and wellbeing experts to determine needs.
- You will be aware of local Voluntary and Community sector partners you can draw on to help your community efforts. For example, NHS Volunteer Responders have signed up to carry out four types of task. Further guidance on this and other ways to work with the voluntary and community sector (VCS) partners to support those who are Shielding can be found below in Section 8.

7.4 Mental health and wellbeing

- For some people the period of shielding may have caused their mental health and wellbeing to worsen. This will include people who have a recognised mental illness as well as others with none.
- Loneliness is a natural reaction to the current coronavirus pandemic, at this or any other time. For information and further support visit letstalkloneliness.co.uk. The website signposts organisations offering tailored

- support, alongside advice to reach out to family and friends, join clubs and groups online and help someone else feel connected through volunteering.
- People who **develop symptoms of mental ill-health if shielding** can also access NHS resources and services:
 1. [Every Mind Matters](#) is a Public Health England platform with tips to look after your mental health and wellbeing;
 2. Self-referral or referral through their GP to access psychological therapies (IAPT) for conditions like anxiety and depression, which are currently being offered digitally and remotely;
 3. Referral through their GP for secondary mental health services for people with more severe needs, which are also being delivered remotely where necessary; and
 4. 24/7 NHS urgent mental health phone lines everywhere in England for people of any age experiencing a mental health crisis via the [NHS.UK website](#).
 5. NHS England and NHS Improvement wrote out to NHS services, including GPs, [on 4 June](#) asking them to undertake a series of actions to support people who have been asked to shield. This includes ensuring every shielding individual has a named care coordinator to help coordinate different aspects of their healthcare or changing/ emerging health needs. Care coordinators will also be able to help shielding patients access appropriate mental health care, including from NHS mental health services via their GP or other routes.
 - There is also an enhanced **‘wellbeing’ support offer from the NHS Volunteer Responders** through regular telephone support over several weeks providing peer support and companionship to people who are shielding or have been shielding (see below).
 - Other useful resources include:
 1. Hub of Hope (non-NHS mental health support services): <https://hubofhope.co.uk>
 2. NHS urgent mental health helpline directory: <https://www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline>
 3. Loneliness, social isolation and COVID-19 Practical advice from the Local Government Association (LGA): <https://www.local.gov.uk/loneliness-social-isolation-and-covid-19-practical-advice>
 4. Public Mental Health and Wellbeing and COVID-19 from the LGA and the Association of Directors of Public Health (ADPH): <https://local.gov.uk/public-mental-health-and-wellbeing-and-covid-19>

8. Voluntary and Community Sector

8.1 Engaging with and securing VCS support

- Local areas will have different approaches to engaging VCS support to councils and other bodies during emergencies, and we want to leave flexibility

for areas to use their existing structures and processes wherever possible to address local need.

- Local voluntary and community organisations can work with councils to co-ordinate intelligence about need or gaps in support, and match this up with voluntary resources available.
- Government has announced a range of measures to help charities and social enterprises manage the financial challenges presented by the current emergency, including deferring their VAT bills, paying no business rates for their shops next year, the Job Retention Scheme, and the Coronavirus Community Support Fund. Guidance for the voluntary and community sector on support available can be found [here](#).
- The LGA has published useful guidance for local government on how to support vulnerable groups alongside partners such as the VCS: www.local.gov.uk/protecting-vulnerable-people-during-covid-19-outbreak

8.2 NHS Volunteer Responders

- The NHS Volunteer Responders programme has been created to complement local level volunteering activity during the Pandemic.
- It was developed by NHS England in partnership with the Royal Voluntary Service and facilitated by the Good Sam app. It went fully live to match volunteers to tasks on 7 April.
- Over 750,000 people signed up to the NHS Volunteers Responders programme in England. Of those, almost 600,000 passed the identity verification requirements and can receive tasks.
- Volunteers carry out simple, one-off non-medical tasks to support people in England who need help with accessing essentials or who would benefit from a friendly chat to help prevent loneliness.
- The programme is also providing support to NHS and local authorities with transport tasks such as delivering blood pressure monitors to patients, transporting small quantities of PPE to care homes etc.
- There are four tasks that NHS Volunteer Responders (NHSVR) can currently undertake:
 - ‘Community Response’ – collecting shopping, including food medication or other essential supplies for someone close to their home;
 - Community Responder Plus - providing this support to individuals with cognitive impairment, such as dementia or a learning disability.;
 - ‘Check-in and Chat’ – telephone support to individuals during self-isolation because talking to someone has been shown to help people stay healthy.

- ‘Check in and Chat Plus’ – regular telephone support over several weeks providing peer support and companionship to, and by, people who are shielding or have been shielding.
 - ‘Patient Transport Support’ – providing transport to take patients home from hospital who are medically fit for discharge;
 - ‘NHS and social care Transport Support’ - providing transport for equipment, supplies and medication between NHS/ social care services and sites; assisting pharmacies with medication delivery.
- All NHS Volunteer Responders have had their identification verified. For the community responder plus, ‘check in and chat plus’ and the patient transport support roles, volunteers have had a recent DBS certificate verified.

8.2.1 Who can make a referral?

- Referrals can be made into the NHS Volunteer Responders programme on behalf of vulnerable individuals through a number of routes including:
 - Health and social care professionals (e.g. GPs, social workers, social care providers);
 - Local Authorities;
 - Members of Parliament;
 - Public bodies such as the Fire and Police services;
 - Anyone with caring responsibilities can make a referral on someone’s behalf or for themselves, if this support helps them to continue in their caring role;
- Charities and other Voluntary and Community Sector (VCS) organisations can also become approved referrers so that they can make referrals on behalf of their clients/members. If a VCS organisation wishes to become an approved referrer, they need to contact england.covid-communities@nhs.net.
- All referrals, except self-referrals, can be made through an online portal at <https://www.goodsamapp.org/NHSreferral> or by calling 0808 196 3382.
- People who are self-isolating for any reason can also refer themselves directly for support through the programme by calling 0808 196 3646.
- Frontline health and social care staff can now also refer themselves directly for support through the programme by calling 0808 196 3646.
- Further information on referrals can be found at this link: <https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/referral>
- Further information on how to self-refer can be found at this link: <https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/isolating>

ANNEX A - Shielding Programme: Frequently Asked Questions

Shielding is a measure to protect people who are extremely clinically vulnerable to coronavirus (COVID-19). These are people with serious underlying health conditions which put them at very high risk of severe illness from COVID-19.

This FAQs set is for local authorities, local authority hubs (where these have been established) and Local Resilience Forums/Strategic Co-ordination Groups, who are working closely with Government and other key partners, to support those who are shielding from COVID-19.

Further information on Shielding is available online:

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

These FAQs should be read in conjunction with the official Shielding guidance produced by MHCLG. They apply to England only.

Please contact shielding@communities.gov.uk if you require any further information.

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Shielding: latest advice

<p>What guidance should those who are shielding be following from 6 July?</p>	<p>Those who have received a shielding patient letter remain in the clinically extremely vulnerable category and should continue to follow the updated guidance for the clinically extremely vulnerable. If incidence does not rise this guidance will be updated on 1 August.</p>
<p>Why have you changed the advice for those classed as clinically extremely vulnerable? What is the evidence base for this decision?</p>	<ul style="list-style-type: none"> • We have been clear that each step towards relaxing the shielding guidance should be taken carefully and based on clinical advice. People in this group are still at risk of severe illness if they catch coronavirus and should continue to take precautions, but as the risk of catching coronavirus is now sufficiently low, we believe that the time is now right to further relax our advice. • The latest (June) epidemiological data from the ONS COVID-19 Infection Survey shows that the chance of encountering coronavirus in the community has continued to decline. In addition, a test and trace system is now in place, including within schools, and there are robust measures in place to manage potential areas of higher risk.
<p>Is there another decision point before 1 August?</p>	<p>The latest scientific evidence shows that the chance of encountering coronavirus in the community has continued to decline. If this trend continues as we expect it to, the risk levels to those shielding will be low enough for the guidance to be further relaxed from 1 August. The Government regularly monitors this position and if the rates of infection in the community rise, then it may be necessary to advise that more restrictive measures should be taken for people at highest risk from COVID-19 to keep themselves safe.</p>
<p>Are you planning on telling people to ‘shield’ again in the future?</p>	<ul style="list-style-type: none"> • The latest scientific evidence (June) shows that the chance of encountering coronavirus in the community has continued to decline. The Government regularly monitors this position and if the rates of infection in the community rise, then it may be necessary to advise that more restrictive measures should be taken. Similarly, where there is a local outbreak, shielding advice may be re-introduced for a defined geographical area. • The guidance for the clinically extremely vulnerable is advisory.
<p>Is it possible that some regions may have to return to shielding in the future?</p> <p>If different regions have substantially different incidence/R rates, why is there only national advice for the CEV?</p>	<ul style="list-style-type: none"> • The NHS currently manages the national Shielded Patient List in England. The variation in R across the country has been quite limited to date, so a national approach continues to be appropriate. The Government regularly monitors this position and will continue to be led by the scientific evidence. • MHCLG has been working with the Joint Biosecurity Centre (JBC) and DHSC to develop the framework for the local management of further outbreaks.

<p>Will there be specific regional advice on shielding?</p>	<ul style="list-style-type: none"> • All Upper Tier local authorities have been asked to develop local outbreak control plans based on the existing statutory responsibilities of their Directors of Public Health. The plans will cover several themes, including ensuring readiness to support vulnerable people and ensure services meet the needs of diverse communities. • MHCLG, alongside other relevant Departments, is considering whether further powers are required for local authorities to manage future outbreaks in line with these plans.
<p>Has insight from clinicians/charities/patient groups informed this decision?</p>	<p>We have engaged extensively with partners and the healthcare system throughout this process and will continue to do so.</p>
<p>How will individuals know when they should start shielding again?</p>	<p>Those who have received a shielding patient letter remain in the clinically extremely vulnerable category and should continue to follow the guidance on 'shielding and protecting people who are clinically extremely vulnerable'. This guidance will continue to be updated to reflect the most recent advice from the Government. If there is a significant change to the advice, we will write to all patients who are clinically extremely vulnerable setting out any changes to advice before they are made.</p>
<p>How does this announcement affect the support that people can access?</p>	<ul style="list-style-type: none"> • The Government has always been committed to supporting those shielding for as long as they need to do so. • We recognise that for some people shielding, adapting to a more normal way of life will take some time, which is why we have announced that the shielding advice will be relaxed in two stages: first from 6 July, and then again from 1 August, at which point people will no longer be advised to shield and the Government's core support offer will end. • Current support which will continue to 31 July, covering the following three areas of assistance: <ul style="list-style-type: none"> ○ Essential supplies – a free, standardised weekly parcel of food and household essentials; ○ Medicines – arrangements to have medicines delivered to people's homes by local community pharmacies or their dispensing doctor; ○ Social contact and basic needs – for example, emotional or social support such as people to talk to on the phone or via a computer.
<p>Why is there such a gap between the 22 June announcement and the updated health guidance coming into effect?</p>	<ul style="list-style-type: none"> • The next steps for relaxing the shielding guidance will take effect from 6 July, which is 3 weeks after the relaxation of wider lockdown measures, such as opening non-essential shops. We know that it takes around 3 weeks to see the impact on both the R rate and the levels of coronavirus. If the trend continues as we expect it to then we will no longer advise people to shield from 1 August. • If the R rate or level of coronavirus in the community starts to rise as a result of the relaxation of wider lockdown measures or other factors, then it may be necessary to advise that more restrictive measures should be taken

	<p>again in order for people at highest risk from COVID-19 to keep themselves safe.</p> <ul style="list-style-type: none"> We recognise that for some people shielding, adapting to a more normal way of life will take some time, which is why we have announced that the shielding advice will change from 6 July, and then again from 1 August, at which point people will no longer be advised to shield and the Government's core support offer will end.
When is the last chance to register for support to help individuals over the next few weeks?	Final registrations for food support will close on the 17 July, to allow for support to reach individuals ahead of the scheme end date of 31 July.
Where can individuals go for help once the shielding support offer finishes?	<ul style="list-style-type: none"> Government is committed to supporting councils and voluntary sector organisations to respond to those who have specific support needs and requirements during the COVID-19 pandemic. Details of the support and advice available can be found here: https://www.gov.uk/find-coronavirus-support The NHS Volunteer Responders Programme will continue providing support with food, prescriptions and essential items to those who are self-isolating for any reason. This also includes anyone that is clinically extremely vulnerable, or anyone who is vulnerable for another reason. If you or a family member meet the criteria, you can call 0808 196 3646 (8am to 8pm) and ask for help. More information is available here: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/isolating If you need urgent help and have no other means of support, contact your local authority to find out what support services are available in your area. You can use this search tool: https://www.gov.uk/coronavirus-local-help
Do we need to call everyone we are providing support to?	<ul style="list-style-type: none"> There is no requirement, but we encourage local authorities to contact individuals they have been supporting with care/support, in accordance with need. The Government wrote to all patients on the Shielded Patient List on 22 June; letters should have been received from 24 June onwards. We have also written to everyone who has been removed from the Shielding Patient list. Our outbound call centre will also call everyone who is receiving food boxes to confirm they understand that food box deliveries will end at the end of July. We are including updated letters in food boxes post announcement and in the final food boxes received.
How is Government supporting local authorities?	<ul style="list-style-type: none"> The Minister for Local Government on 2 July announced an additional £500m to cover immediate funding pressures, taking the total support provided by government to £3.7bn of unringfenced grant. Across the full £3.7bn provided, it will support the pressures councils have reported and the crucial role they play in helping the country tackle this crisis, including shielding the clinically extremely vulnerable.

	<ul style="list-style-type: none"> • The additional funding is un-ringfenced, recognising local authorities are best placed to decide how to meet the major Covid-19 service pressures in their local area. • As per the Health Secretary's announcement of 22nd June the Shielding programme will be paused from the end of July. • We have shared data with councils on those in their area who are shielding and have asked for help, so councils can provide appropriate support. An additional £63million of funding to be distributed to local authorities in England to help all those who are struggling to afford food and other essentials.
What will the £63m funding for emergency food assistance be spent on?	<ul style="list-style-type: none"> • The Government is injecting an additional £63 million of funding to be distributed to local authorities in England to ensure that no one has to go without food and other basic necessities. • Many councils have existing mechanisms which provide support in a way which suits the needs of their local community. This may include provision of cash payments, food vouchers, or alternative support. • Funding will be distributed to councils in England to boost their support to those who need it most. Councils are already working hard to support those who are vulnerable and this additional funding will contribute to that work.
What is the role of local authorities now?	<ul style="list-style-type: none"> • Councils have played a vital role in the support to those shielding. • Councils will continue to support those shielding until the 31 July by supporting basic care needs, providing food for people with additional dietary requirements, and helping people who cannot lift food box deliveries in from their doorstep.
Do local authorities retain responsibility for emergency food and special dietary requirements?	Yes, until 31 July. After that, in line with the relaxations when people will no longer be advised to shield, people can shop for food themselves, as long as they comply with social distancing.
Does local authority responsibility for basic care for those shielding continue?	Yes, until the end of July.
What is the role of local authorities, Local Resilience Forums and other local partners until the end of July?	Councils should continue to attend Local Resilience Forums/Strategic Coordination Groups to maintain a sense of the county and regional capacity to help. This is an opportunity to understand how the system is operating until the end of July.
What is an Account Based system? How will it work?	<ul style="list-style-type: none"> • We have begun early work on a redesigned digital platform to replace the current patient interface and data transfer system. The existing system has served the needs of users and the demands of the programme well but was built at great pace. • We are aiming to build a new, improved system with better functionality for users of the service, delivery bodies, and councils. We want to be able to build up a better picture of

	<p>a shielding person's needs and to be able to track those needs as they change. This new platform will also enable us to better target communications to users.</p> <ul style="list-style-type: none"> • The new platform will incorporate lessons from wave one and will need to be scalable and flexible to meet future demand and decisions. Critically, it will be informed by user engagement and evidence. We will be inviting councils to participate in its design and will provide more details of how we plan to engage you soon.
<p>A resident has only just been told to shield, why are you now telling them to stop?</p>	<ul style="list-style-type: none"> • The Shielded Patient List remains dynamic and people will continue to be added to the list as they are newly identified as being clinically extremely vulnerable. • People in this group are still at risk of severe illness if they catch coronavirus and should continue to take precautions. However, as the latest epidemiological data from the ONS COVID-19 Infection Survey shows, the chance of encountering coronavirus in the community has continued to decline. Those who have received a shielding patient letter remain in the clinically extremely vulnerable category and should continue to follow the guidance on 'shielding and protecting people who are clinically extremely vulnerable'. The NHS will continue to maintain the Shielded Patient List allowing us to maintain targeted advice and support to those who are most vulnerable and to change advice and support if incidence were to rise significantly.
<p>Will GPs/clinicians have been informed about this change/given any guidance?</p>	<ul style="list-style-type: none"> • Yes, the Government has written to the NHS with further information about the changes. We know how important GPs and other clinicians are in supporting patients through this difficult time, particularly when there are changes to advice and guidance. • The Government will continue to engage extensively with partners and the healthcare system throughout this process to help ensure we are meeting the needs of those who are clinically extremely vulnerable.
<p>Will medicines for individuals continue to be delivered? Will individuals still get access to free medicine delivery?</p>	<ul style="list-style-type: none"> • Those supported by the Medicines Delivery Service who continue to need help will receive this support until 31 July. • After this date, if it is not possible for someone to maintain social distancing whilst attending their pharmacy, and friends and family are not able to collect medicine for them, then the NHS Volunteer Responders will continue to offer medicines deliveries. If someone is vulnerable or at risk and needs help with shopping, medication or other essential supplies, they should call 0808 196 3646 (8am to 8pm).
<p>How quickly will Government be able to scale up the support offer again if clinical advice requires the clinically extremely vulnerable to shield again? Will you introduce food boxes again in future?</p>	<ul style="list-style-type: none"> • Local authorities have been providing important support to the shielding cohort, enabling people to safely stay in their homes including phone calls to reduce loneliness, meeting special dietary requirements and providing care support to those who may need it. • Working with you we have learned a great deal over the last few months and are proud of the speed with which we have together delivered the package of support.

	While we continue to work on improvements, we are confident we have the right infrastructure and processes in place to respond to any future changes in the guidance.
Are you planning on sharing a long-term strategy/plan for shielding?	<ul style="list-style-type: none"> Throughout the epidemic, we have been clear on the need to balance the risk to those who are shielding with the benefits of slowly returning to normal life. As the latest scientific evidence shows that the chances of catching coronavirus have continued to decline, we will relax the advice to those who are shielding in two stages, to take effect from 6 July and 1 August. We continue to monitor the situation and base our assessment on clinical advice from our medical experts, and the best data available about the prevalence of COVID-19 in the community. Those who have received a shielding patient letter remain in the clinically extremely vulnerable category and should continue to follow the guidance on 'shielding and protecting people who are clinically extremely vulnerable'. The NHS will continue to maintain the Shielded Patient List allowing us to maintain targeted advice and support to those who are most vulnerable and to change advice and support if incidence was to rise significantly.

Other Vulnerable people

What about clinically vulnerable people (not shielding) worried about catching coronavirus, will there be any guidance for this group?	Public safety throughout this period is the Government's top priority – this includes keeping society's most vulnerable safe. We advise those who are clinically vulnerable to follow the Staying Alert and Safe social distancing guidance available on the gov.uk website. The advice is to stay at home as much as possible and, if you do go out, take particular care to minimise contact with others outside your household or support bubble. By this we mean always observing social distancing guidelines with others outside your household or support bubble, avoiding crowds, and keeping your hands and face as clean as possible.
Evidence suggests the elderly are most at risk, why are you telling them to stop shielding?	<ul style="list-style-type: none"> While the shielding population still have a higher risk of serious illness if they catch Coronavirus, the chance of encountering the virus in the community is now low enough that we are relaxing the guidance. Government guidance for all people aged 70 and over, who have not been advised to shield, remains unchanged. The advice is to stay at home as much as possible and, if you do go out, take particular care to minimise contact with others. By this we mean always observing social distancing guidelines with others outside your household or support bubble, avoiding crowds, and keeping your hands and face as clean as possible.
What are you doing to address the concerning data highlighted in the Public Health England (PHE) Covid	<ul style="list-style-type: none"> We have all been struck by the conclusions of PHE's report and will continue to help protect those most vulnerable to COVID-19 based on the best possible scientific analysis. We fully appreciate the urgency of the situation and work is already underway to look at the findings from the recent PHE

<p>Disparities report in relation to BAME communities or diabetes or other risk factors?</p>	<p>report and take action where needed, led by the Minister for Equalities with PHE and others.</p> <ul style="list-style-type: none"> We are determined to get to the bottom of the report's findings in a proper and scientific way and will do so alongside the essential work this Government is already undertaking to level up opportunities and health outcomes across the country and tackle health inequalities. We are determined to use this opportunity to make a real difference to people's lives and protect our communities from the impact of the coronavirus.
<p>What about hard-to-reach groups who may be Shielding? What about people who may not have received an NHS Shielding letter, for whatever reason?</p>	<ul style="list-style-type: none"> Councils will want to make sure that shielding advice reaches potentially hard-to-reach vulnerable groups in their area - including the homeless and Gypsy, Roma and Traveller communities. Individuals within these groups may be classed as clinically extremely vulnerable but, for whatever reason, may not have received their letter from NHS England to alert them to this fact. Local authorities may wish to engage with relevant voluntary and community sector organisations in their areas to assist them with promoting shielding advice to groups like these.
<p>What support is available to the non-shielded vulnerable?</p>	<ul style="list-style-type: none"> The Government is committed to supporting councils and voluntary sector organisations to respond to those who have specific support needs and requirements during the COVID-19 pandemic. Details of the support and advice available can be found here: https://www.gov.uk/find-coronavirus-support The NHS Volunteer Responders Programme will continue providing support with food, prescriptions and essential items to those who are self-isolating for any reason. This also includes anyone that is clinically extremely vulnerable, or anyone that is vulnerable for another reason. If you or a family member meet the criteria, you can call 0808 196 3646 (8am to 8pm) and ask for help. More information is available here: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/isolating If you need urgent help and have no other means of support, contact your local authority to find out what support services are available in your area. You can use this search tool: https://www.gov.uk/coronavirus-local-help

Shielding Call Centre - and other calls

<p>Why has the call centre handed over so many names to local authorities that they have not been able to contact?</p>	<p>There are a substantial number of people within the shielded group who the Helpline has attempted to call but the centre has not been able to contact. In such cases the Helpline has used all known numbers and has called at least 4 times and a maximum of 10 times over 3 days before determining that they are unable to contact them.</p> <p>There may be a range of reasons why we have not been able to contact these people, such as invalid numbers provided through the NHS shielded patient list and we anticipate, but cannot be certain,</p>
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	that in some cases people may have gone to stay with friends or relatives or are reluctant to answer calls from 'unknown' numbers.
What is happening with the DWP call centres?	<ul style="list-style-type: none"> • Launched on 28 March, the National Shielding Helpline has made daily calls to help identify the support needs of people identified by the NHS as clinically extremely vulnerable. The initial Helpline contract was for 12 weeks in line with advice on shielding for clinically extremely vulnerable individuals. • We are now in a position where, based on advice from the CMO and given the low incidence rate of COVID-19 in the community, we are able to relax the guidance for those who are clinically extremely vulnerable. From 26 June the DWP call centre will begin calls to all existing food box recipients to explain to shielded citizens alternative options to food box deliveries (where appropriate) and to ensure that citizens currently receiving food boxes understand: <ul style="list-style-type: none"> ○ That food box deliveries will not be available after 31 July ○ The alternatives available including priority supermarket slots and help from NHS volunteering services • The call centre will conclude all the calls to people who are shielding on 17 July. • Following the relaxation of shielding guidance coming into place on 31 July, Government will continue to work with DWP and our suppliers to ensure we have sufficient ongoing call centre capacity where it is needed.
What will happen with those uncontactables? Are local authorities still expected to carry on attempting to contact 'uncontactables'?	<ul style="list-style-type: none"> • From 26 June the call centre has been contacting those Clinically Extremely Vulnerable people (CEV) who have already signed up for a food box, in order to ensure they are aware that Shielding is pausing. As the message has been widely communicated in the press and all CEVs have been written a letter to inform them of the change, we will not require any further action should we be able to contact them this time around. All CEV registration calls ceased on 22nd June. All remaining uncontactables data was passed over to the relevant local authorities. There will be no more uncontactables data passed over to local authorities. • LAs should continue to attempt to contact any remaining 'uncontactables' from previous data batches.
What are the expectations for local authorities on their helplines? What function do you expect of them and how long should we keep them open?	<ul style="list-style-type: none"> • The national call centre will continue to make calls to patients who have been receiving food boxes, to ensure they are aware of the food boxes stopping from 31 July. As part of this, they may identify patients who require food urgently (e.g. if they had missed a food box delivery). As such, LAs need to keep their contact lines open so that call agents can contact them if required. • The expectation is for LAs to accept these calls and triage them locally. Some calls are more urgent than others, but agents will only refer those patients over who have less than one week's food in the house and no other way of getting food. • These calls will continue until and including 17 July and we ask that LAs keep their phone lines open until then.

Will the national call centre let councils know when they identify people who are in food poverty and have been reliant on the Government food parcels in the last 12 weeks?	From the latest round of calls beginning on 26 June, the only outcome data we shared with LAs is on food box de-registrations, which will flow through in the usual way. We will not share any other data or information from these calls.
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Data

Will you continue to add/remove people from the shielded patient list (SPL)?	Yes. The NHS will continue to maintain the SPL allowing us to continue to provide the best advice to those identified as clinically extremely vulnerable and to enable us to continue to change advice and support provided if the level of the disease in the community was to rise significantly in the future. GPs and clinicians will continue to review their patient lists and make a clinical judgement on whether shielding would be beneficial on a case-by-case basis.
Is an individual's name being kept on a shielding list? Why? And how is data being kept safe?	<ul style="list-style-type: none"> • The NHS will continue to maintain the Shielded Patient List allowing us to maintain targeted advice and support to those who are most vulnerable and to change advice and support if incidence was to rise significantly. • Those who have received a shielding patient letter remain in the clinically extremely vulnerable category and should continue to follow the guidance on 'shielding and protecting people who are clinically extremely vulnerable'. This guidance note will continue to be updated to reflect the most recent advice from the Government. • Further information about what data is stored and how it's being kept safe can be found in the NHS Digital transparency notice: https://digital.nhs.uk/coronavirus/shielded-patient-list/shielded-patient-list-transparency-notice
Will the Shielded Patient List still be maintained after the end of July?	<ul style="list-style-type: none"> • The NHS will continue to maintain the SPL allowing us to target advice and support to those who are clinically extremely vulnerable and to change advice and support if incidence was to rise significantly. The list will continue to be shared with LAs.
Will local authorities still get daily data flows?	<ul style="list-style-type: none"> • Local authorities will continue to receive daily data flows via their local hubs until 31 July. The SPL will continue to be shared during the pause period and up to the end of September. Further guidance will be issued shortly setting out how long this data will continue to be provided.
Will local authorities still have to report on data outcomes?	<ul style="list-style-type: none"> • No - we are proposing that we pause the collection of local outcomes data.
How are local authority Hubs receiving their data?	<p>Local authority hubs currently receive 3 main files, which they must cascade to LAs in their hub:</p> <p>1) Daily incoming data collected from the CEV Person's service, via GOV.UK form or phone line</p>

	<p>You get a new file every day at 4pm. File names are a timestamp with no prefix.</p> <p>2) NHS shielded patient data File names begin 'nhs-'. Provided daily at 4pm.</p> <p>3) Outcomes data: food You get a new file every day at 4pm, with name beginning 'outcomes-'. This file contains: - Wholesaler made and attempted delivery outcomes data - Planned wholesaler deliveries</p>
What are the protocols covering the sharing of shielding data?	Please see our data sharing guidance (v1.2) for further information). Remember the SPL has data sharing restrictions and you should not share this under any circumstances.
What should councils do if they have concerns regarding data quality and cleansing?	Government Digital Service (GDS) is working to cleanse any data that gets sent out to local authorities, however if the local authority has any issues in the data they need to raise this with GDS directly via transfer-coronavirus-data-service@digital.cabinet-office.gov.uk

Food deliveries

Does local authority responsibility for emergency food and special dietary requirements continue?	<ul style="list-style-type: none"> • Yes, until the 31 July. After that, in line with the relaxations when people will no longer be advised to shield, people can shop for food themselves, as long as they comply with social distancing.
When will a shielded person's food delivery stop?	<ul style="list-style-type: none"> • Those in receipt of centrally provided food boxes, who continue to need help, will receive this support while they are advised to shield, which is until 31 July. • Final registrations for food support will close on the 17 July, to allow for support to reach individuals ahead of this end date of 31 July. • However, there are alternative food delivery options available, and we will continue to work with councils and industry to make sure support is there for those who need it. • We have been working closely with supermarkets who have agreed that access to priority supermarket delivery slots will continue beyond July for those clinically extremely vulnerable who have already signed up for support, as an alternative once free food boxes are no longer provided. • Some supermarkets and other retailers also offer telephone ordering and food boxes to make it easier for vulnerable people to shop for themselves. • Beyond July, people can still call NHS Volunteer Responders on 0808 196 3646 (8am to 8pm) to access help with collecting food shopping.

<p>What advice is there for people concerned about their food boxes being taken away? And/ or for those who can't afford supermarket deliveries or feel too scared to go to the shops?</p>	<ul style="list-style-type: none"> • The food boxes were designed to provide emergency supplies to those most at risk of severe illness from COVID-19 and who had no other support options available, at a time when there was a high incidence rate of COVID-19 in the community. • We are now in a position where, based on advice from the Chief Medical Officer and given the low incidence rate of COVID-19 in the community, we are able to relax the guidance for those who are clinically extremely vulnerable. • We recognise that for some people shielding, adapting to a more normal way of life will take some time, which is why we announced on 22 June that the shielding advice will change from 6 July, and then again from 1 August, at which point people will no longer be advised to shield and the Government's core support offer will end. For those in receipt of them, food boxes will continue to be delivered up to 31 July. • We are advising those who are clinically extremely vulnerable that there are food support options still available beyond 31 July. We have been working closely with supermarkets, who have agreed that access to priority supermarket delivery slots will continue beyond 31 July for those clinically extremely vulnerable who have already signed up for support. The NHS Volunteer Responders Programme will continue providing support with shopping, prescriptions and essential items to those that need to self-isolate for any reason. This includes anyone that is clinically extremely vulnerable, or anyone that is vulnerable for another reason. • There are also other commercially available options including telephone ordering, food box delivery, prepared meal delivery and other non-supermarket food delivery providers. • We have advised that anyone in urgent need of support should contact their local council, most of which have dedicated COVID-19 helplines.
<p>Can an individual still get access to priority delivery slots?</p>	<ul style="list-style-type: none"> • We have agreed with the supermarkets that any clinically extremely vulnerable individual who has registered as needing support with essential supplies by 17 July will still be able to access priority delivery slots, after shielding is paused from 1 August, though they will need to have or set up an online account with their preferred supermarket in order to do so. • The data which flows to supermarkets is solely of individuals who have registered as needing support with essential supplies, so those on the Shielded Patient List who have not done so by 17 July or are added to the Shielded Patient List thereafter, will not be able to access priority for deliveries, since the registration process will be turned off.

	<ul style="list-style-type: none"> Defra also have a separate scheme to provide access to supermarket delivery slots for the wider population of non-shielded vulnerable. This provides an alternative route of support for those who can afford food and can shop online. Councils and selected charities who join the scheme are provided with access to a defined number of delivery slots for their area and have the ability to refer those most in need to enable them to book supermarket deliveries. If your local authority has not yet signed up, then you may want to email Covid19 referrals to retailers@defra.gov.uk to find out more / request an Expression of Interest (EOI) form.
What about those who will not be able to access priority delivery slots from supermarkets?	<ul style="list-style-type: none"> The Government continues to support the use of priority delivery slots to help the most clinically vulnerable where possible. Priority delivery slots are at the discretion of supermarkets, but to date the seven participating supermarkets have confirmed that access to priority supermarket delivery slots will continue beyond July for the those classed as clinically extremely vulnerable who have signed up for support. If someone cannot access delivery slots, and friends and family are not able to help, then the NHS Volunteer Responders will continue to offer support with getting access to food. If someone is vulnerable or at risk and needs help with shopping, medication or other essential supplies, they can call 0808 196 3646 (8 am to 8pm).
Is access to supermarket slots dependent on being able to go online?	Some supermarkets and other retailers also offer telephone ordering and food boxes to make it easier for vulnerable people to shop for themselves. Defra will continue to look at barriers to individuals taking up the option of online deliveries and how those might best be overcome.
Will supermarkets have enough capacity to cope with people transitioning from food parcels to priority slots?	Supermarkets have substantially increased the number of deliveries they are making since the start of the pandemic and we are confident that there is sufficient capacity to manage demand for priority delivery slots from clinically extremely vulnerable individuals.
Will food parcels resume in the event of a second wave of shielding? Will councils lead the food supply arrangements in the future?	We are considering a range of options on how best to provide food support on any resumption of shielding. We will involve local authorities closely in that process.
What happens if people can't return to work, have reduced income and so cannot afford food?	<ul style="list-style-type: none"> Government is injecting an additional £63 million to boost council welfare assistance to ensure that no one has to go without food and other basic necessities. Councils have existing legal powers to provide welfare assistance which may include provision of cash payments, food vouchers, or alternative support. Councils should consider how best to support this group

	alongside assistance already being provided to other vulnerable groups.
For residents who are anxious, if there are requests for food parcels after 1 August, is there an expectation that councils will continue to provide these?	No. It will be for councils to determine whether additional funds provided by Government should be used for this purpose.
Individual food queries	
What if an individual no longer wishes to receive a food parcel?	<ul style="list-style-type: none"> • If an individual no longer wants or needs the food parcels, they should re-register at https://www.gov.uk/coronavirus-extremely-vulnerable and indicate that they do not require a food parcel by answering 'yes' to the question 'Do you have a way of getting essential supplies delivered at the moment?' They can also re-register via the helpline number on their NHS letter. • Individuals can also de-register by simply refusing the next food parcel that is delivered to their door (they can tell the driver they no longer wish to receive parcels). The delivery driver will record this outcome on the system and they should be removed from the food parcels distribution list. • We are aware that there have been delays in requests to cancel food parcels taking effect in the system. This should now have been resolved, but there may be instances where food parcels still arrive after they have been cancelled. Where individuals express concern that this has happened, please advise them that the cancellation is being processed and they do not need to de-register again. • Our call centre has been calling all those clinically extremely vulnerable people who are still in receipt of food parcels to check their food and local support requirements and update our records where these are incorrect or have changed. The call centre handler will action any de-registration requests, where agreed by the individual.
What if someone does not want a food package, but wants access to priority for deliveries with the supermarket?	To receive priority for supermarket deliveries as someone who is clinically extremely vulnerable, individuals must register on the website at www.gov.uk/coronavirus-extremely-vulnerable or via the helpline on 0800 028 8327 once they have received their NHS or GP letter. When signing up, they must request essential food supplies in order for their data to be passed onto supermarkets. Once their data has been passed across, individuals will not be removed from supermarket lists if they subsequently de-register for food boxes. However, each supermarket manages their own home delivery system and priority with supermarkets does not necessarily guarantee a regular frequency of delivery.

<p>What does supermarket priority actually mean?</p>	<p>Participating supermarkets (Asda, Sainsburys, Tesco, Morrisons, Iceland, Waitrose, Ocado) receive data from the Government Digital Service on clinically extremely vulnerable individuals who have requested essential food supplies so that they can prioritise them for online delivery slots. It is for supermarkets to decide how they do this and offering priority does not mean that a delivery slot will be immediately available or a regular delivery slot. Individuals must also have an online account with the supermarket from which they are seeking a priority delivery.</p>
<p>What should we do if one of our CEV individuals isn't getting a food parcel they have requested?</p>	<ul style="list-style-type: none"> • If eligible individuals have moved or for some other reason the current delivery address is wrong then you should advise them to amend their address details at www.gov.uk/coronavirus-extremely-vulnerable They can do this even if their new address no longer matches the address on their NHS letter or GP letter. • We are aware that there have been delays in requests to change an address taking effect in the system. This should now have been resolved, but there may be instances where a food parcel is still delivered to the old address. Where individuals express concern that this has happened, please advise them that the address change is being processed and they do not need to re-register again. • Our call centre has been calling all those clinically extremely vulnerable people who are still in receipt of food parcels to check their food and local support requirements and update our records where these are incorrect or have changed. That includes the address to which the food parcel should be delivered. • Where parcels are still being delivered to the wrong address you should contact your MHCLG local systems regional team in the first instance so they can escalate the issue on your behalf.
<p>How can we stop food parcels arriving for deceased individuals?</p>	<ul style="list-style-type: none"> • The shielded patient list will be updated to remove the deceased individual and food parcels will stop but that may take a little time. • If you email shielding@communities.gov.uk with the name and address of the deceased we will notify the food wholesalers to ensure that future parcel deliveries are stopped more quickly. • Alternatively a family member or friend of the deceased can re-register on their behalf at www.gov.uk/coronavirus-extremely-vulnerable, to indicate that assistance is no longer required. The database will be updated and food parcel deliveries will stop. To do this, they need to answer 'yes' to the question 'do you have a way of getting essential supplies delivered at the moment?' • If a food parcel is delivered to someone who has died, it can be refused at the door, and no further delivery should be attempted.
<p>How can we ensure that food packages are</p>	<ul style="list-style-type: none"> • Delivery drivers are instructed to leave parcels on the doorsteps of individuals' homes not at communal doors,

<p>delivered to doorsteps (including individuals in flats) to avoid packages being left in communal areas?</p>	<p>or in communal areas. Where delivery drivers are unable to access individual properties, they should take the parcel away and mark it as 'unable to access'. That information is provided daily to local authorities as part of the data on deliveries and attempted deliveries to individuals in your area.</p> <ul style="list-style-type: none"> • Where you ascertain that revised delivery instructions are required to ensure food parcels are successfully delivered, you should contact your MHCLG local systems regional team so they can escalate the issue on your behalf.
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Voluntary and Community Sector (VCS) and using volunteers

<p>Where can individuals go for help once the shielding support offer finishes?</p>	<ul style="list-style-type: none"> • Government is committed to supporting councils and voluntary sector organisations to respond to those who have specific support needs and requirements during the COVID-19 pandemic. Details of the support and advice available can be found here: https://www.gov.uk/find-coronavirus-support • The NHS Volunteer Responders Programme will continue until at least the end of the year, providing support with food, prescriptions and essential items to those who are self-isolating for any reason. This also includes anyone that is clinically extremely vulnerable, or anyone that is vulnerable for another reason. • If you or a family member meet the criteria, you can call 0808 196 3646 and ask for help. More information is available here: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/isolating • If you need urgent help and have no other means of support, contact your local authority to find out what support services are available in your area. You can use this search tool: https://www.gov.uk/coronavirus-local-help
<p>What is the NHS Volunteer Responders/ Good Sam volunteer scheme?</p>	<p>The NHS Volunteer Responders programme has been developed by NHS England in partnership with the Royal Voluntary Service (RVS) and facilitated by the Good Sam app. The programme has been developed to complement local level volunteering activity during the COVID-19 Pandemic. It enables volunteers to carry out simple, one-off non-medical tasks to support people who are self-isolating for any reason in England, including those who are shielding, are vulnerable for other reasons or are self-isolating due to potential exposure to COVID-19. It is also available to support people who have caring responsibilities and frontline health and care staff. Further information can be found at: www.nhsvolunteerresponders.org.uk</p>
<p>What can these NHS Volunteer Responders do?</p>	<p>The NHS Volunteer Responders can undertake the following tasks:</p> <ul style="list-style-type: none"> • 'Community Response' – collecting shopping, including food medication or other essential supplies for someone close to their home;

	<ul style="list-style-type: none"> ○ Community Responder Plus - providing this support to individuals with cognitive impairment, such as dementia or a learning disability.; ● 'Check-in and Chat' – telephone support to individuals during self-isolation because talking to someone has been shown to help people stay healthy. <ul style="list-style-type: none"> ○ 'Check in and Chat Plus' – regular telephone support over several weeks providing peer support and companionship for , and by, people who are shielding or have been shielding. ● 'Patient Transport Support' – providing transport to take patients home from hospital who are medically fit for discharge; ● 'NHS and social care Transport Support' - providing transport for equipment, supplies and medication between NHS/ social care services and sites; assisting pharmacies with medication delivery.
How can councils access NHS volunteers through the NHS Volunteer Responders programme?	<p>Online referrals can be made by local authorities, social care providers, health agencies, and selected charities at www.goodsamapp.org/NHSreferral. Self-referrals can also be made directly by self-isolating individuals, carers and frontline health and care staff by calling 0808 196 3646. Information on how to make a referral, including bulk referrals, can be found at this link: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal</p>
How does the national offer of volunteers align with local volunteer programmes?	<ul style="list-style-type: none"> ● The programme has been designed to complement, not replace, local level activity. The Secretary of State for Housing, Communities and Local Government wrote to all local authorities on 3 April to let them know that the NHS Volunteer Responders resource would be available to them, working alongside other important local groups, to help complement the support that they are already giving to people in local areas. ● We are aware that the NHS Volunteer Responders are not the only source of volunteers available and that there is also a strong supply of volunteers available at local level through local authorities and VCS organisations. ● Local areas will have different approaches to engaging and coordinating volunteers and local authorities have the flexibility to use their existing structures and processes to address local need, alongside national platforms.
Who can make a referral?	<p>Referrals can be made into the NHS Volunteer Responders programme on behalf of vulnerable individuals through a number of routes including:</p> <ul style="list-style-type: none"> ● Health and social care professionals (e.g. GPs, social workers, social care providers); ● Local Authorities; ● Members of Parliament; ● Public bodies such as the Fire and Police services;

	<ul style="list-style-type: none"> • Anyone with caring responsibilities can make a referral on someone's behalf or for themselves, if this support helps them to continue in their caring role. <p>Referrals can be made through an online portal at https://www.goodsamapp.org/NHSreferral or by calling 0808 196 3382. The exception to this is self-referral which must be done by phone.</p>
Can VCS partners deploy the NHS volunteer responders?	Charities and other Voluntary and Community Sector (VCS) organisations can also become approved referrers so that they can make referrals on behalf of their clients/members. If a VCS organisation wishes to become an approved referrer, they need to contact england.covid-communities@nhs.net .
And is it right that people may self-refer?	Yes. People who are self-isolating for any reason can also refer themselves directly for support through the programme by calling 0808 196 3646.
What safeguarding processes are in place for the programme?	<ul style="list-style-type: none"> • The programme follows Home Office guidance in checking the identity of all NHS Volunteer Responders and all service users are given safety information and guidance about reporting safeguarding concerns and ensuring appropriate steps are taken to ensure no risks are taken. • A safeguarding team is in place at Royal Voluntary Service to pick up any concerns regarding patients or volunteers. All concerns will also be passed onto the referrer or if no referrer present, the patient's GP ensuring they are aware of the identified concerns. • The RVS website has a statement on the safeguards in place for the scheme: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/safeguarding
What support do volunteers receive to stay safe?	All NHS Volunteer Responders have received a 'Getting You Started' pack appropriate to the roles they signed up to, so they will have specific, clear and detailed guidance which will enable them to provide support safely (including on social distancing). Volunteers should not pay for food shopping on behalf of a vulnerable person. There are a range of payments options that could be used, the Royal Volunteering Service has guidance on this here .
Should volunteers pay for food shopping?	No. Volunteers should not pay for food shopping on behalf of a service user. There are a range of payments options that could be used, the Royal Volunteering Service has guidance on this here: https://volunteering.royalvoluntaryservice.org.uk/documents/vr-portal/2-rvs-getting-started-as-a-community-response-volunteer-v1-18-1037.pdf
Where can I find more information?	Further information on referrals can be found at this link: https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/referral Further information on how to self-refer can be found at this link:

	https://volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/isolating
How is data protected in the programme?	RVS have put measures in place to ensure the safety and security of personal data. Volunteers are also given guidelines on data protection and confidentiality. For more information, see the Privacy Notices for individuals supported under the scheme, referrers, and volunteers.