

Shielding clinically vulnerable people from COVID-19

Guidance for councils, LRFs and other local delivery partners

Shielding is a measure to protect people identified by the NHS who are medically extremely vulnerable to COVID-19 by minimising all interaction between these people and others until the end of June.

The Government is strongly advising people who have been identified by the NHS as having serious underlying health conditions which put them at very high risk of severe illness from coronavirus (COVID-19), to follow shielding measures in order to keep themselves safe.

We realise that following these measures will be difficult, and that many people who are shielding will find it stressful, frustrating and even frightening. That is why we have put in place the support and assistance outlined below, to try to minimise the stresses and strains upon shielded individuals.

This guidance 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 the coronavirus (COVID-19).

It applies to England only.

This guidance is supplemented by an 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 extremely clinically 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.

The Government is strongly advising these people to follow Shielding measures to keep themselves safe. These measures including staying at home at all times and avoiding any face-to-face contact until at least the end of June. People falling into this clinically vulnerable group have been identified by the NHS and include:

- Solid organ transplant recipients
- 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
- People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
- People on immunosuppression therapies sufficient to significantly increase risk of infection
- Women who are pregnant with significant heart disease, congenital or acquired

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

Government is keen to help local partners identify and respond to the needs of their residents who do not qualify for Shielding support, but who are affected by COVID-19 for a range of reasons.

We are already helping councils through COVID-19 – including providing £3.2 billion of funding for service pressures, strengthening links with supermarkets and enabling local authorities to access and match with NHS volunteers to help wider vulnerable groups in their area.

To find out more, please visit www.gov.uk/find-coronavirus-support

2. Introduction to Shielding

2.1 What is Shielding?

- Shielding is a measure to protect those individuals categorized 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.
- Shielding is designed to protect the most clinically vulnerable from serious illness; it will also take pressure off the NHS workers providing the most acute care.
- Clinically extremely vulnerable individuals have been contacted by the NHS and medical practitioners and strongly advised to stay at home at all times and avoid all face to face contact - except for with essential carers and healthcare workers.
- The full guidance is available online here:
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; 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 Government 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.
- 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 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 vulnerable and should follow the guidance. If people's medical conditions change, they may be advised by their clinician to stop Shielding.

2.3 Contacting the extremely clinically vulnerable

- As above, people who have been advised to follow the Shielding guidance will be (or have already been) notified by a letter from the NHS.
- In order to pick up those people who have not yet responded to the instructions in the letter, we have established an outbound call centre. Call agents are working through the list of those people who have been identified as extremely vulnerable



but have not yet registered via the GOV.UK shielding website or automated telephone line.

- The aim of each call is to replicate the registration process offered through the GOV.UK website and inbound call centre. Call agents will register the individual's support needs - or confirm they do not have a need – by recording the persons responses directly into the GOV.UK website, on behalf of the individual.
- We are prioritising calls to people who live alone, who are blind or visually impaired, are terminally ill or who have high care needs (as determined by the welfare benefits they claim). However, everyone who has yet to register and who is clinically extremely vulnerable will be contacted to establish their support needs.

2.4 Urgent need referrals

- We ask that all councils, if they have not already done so, put in place a phone line 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 08.00 - 20.00, so we ask that these local lines are also open between these hours.
- All councils are asked to ensure this is in place and send details to shielding@communities.gov.uk to enable call centre handlers to refer people to this council line where appropriate, reducing referrals to adult social services departments. Whilst we recognise that a dedicated telephone line for each council will be under considerable pressure, we recommend a single coordinated route into councils for residents.
- Call agents will make a referral to the relevant local authority's COVID-19 phone line, or their urgent adult social services line, if they identify a person with an immediate welfare need where urgent social services support may be required. Please ensure that staff on your COVID-19 lines and social services departments are aware that they may receive calls from our agents.
- In the small number of cases where call operators who have identified an individual is in imminent need, they will call 999. After arranging emergency assistance, the call handler will pass on the individual's details to their local authority so that appropriate ongoing support for that person can be arranged locally.
- The call centre operatives do not triage or screen care needs. A referral to adult social services departments is only made where the clinically vulnerable person gives additional information indicating an urgent care and/or safeguarding support need to the call centre operative.

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. See below for more detail on the nature of the offer for each of these areas (Sections 5, 6 and 7):
 - i. Essential groceries** – 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 needs** – 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, LRFs and other local partners?

- Local authorities have a role in ensuring that the standardised national support offer is accessible to any Shielding residents who have special needs; 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 outlined above is being co-ordinated by councils alongside other local partners.
- It is for councils and other key local partners to establish the best way to co-ordinate local activity – either through a group of councils coming together in a Hub (such as in two tier areas as well as between neighbouring councils) or as an individual authority.
- Local authorities should continue to attend Local Resilience Forums/Strategic Coordination Groups to maintain a sense of the county and regional capacity to help. We will regularly review how the system is operating and there will be the opportunity to make refinements in the light of experience.
- The LGA has produced helpful guidance for councils which spans a range of vulnerable groups 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 Creating strong links between central and local government

- Government is keen to understand how local people and places are helping to deliver the national Shielding policy. We want to work with local partners to continually test, review and refine Shielding policy as the programme evolves.
- To achieve this, we have already established a Stakeholder Engagement Forum (SEF), bringing together regional Chief Executives and representatives from LRFs to discuss the Shielding programme and shape future policymaking.



- The Shielding team has put in place a locally focussed structure and regional teams with named civil servant contacts for each local authority - enabling local partners to quickly ask and receive answers to questions and allowing Government to provide rapid updates or other information about the programme.
- We hope this will be an opportunity build up strong central-local links, providing the central team with an invaluable insight into how the policy is operating locally and a chance to address and learn from any issues which may arise.

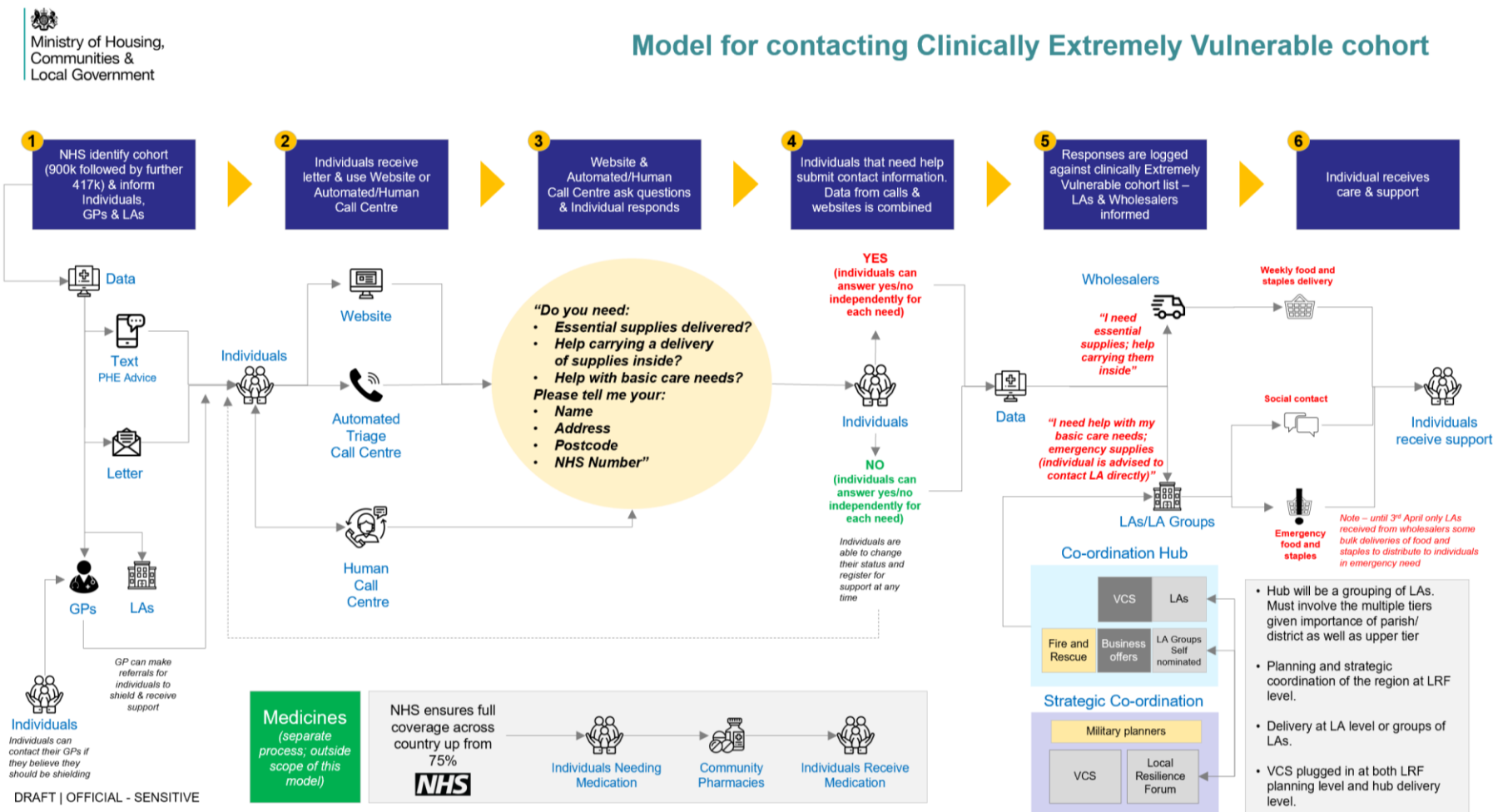
3.4 Local Hubs and other groupings

- We asked councils and LRF areas to organise themselves into an appropriate grouping to efficiently coordinate local activity and receive data for the extremely clinically vulnerable people in their areas; 132 local hubs were formed.
- We are keen to continue to work through hubs but will work with the local structures that you have in place if these are felt to work better.
- We will continue to work with all local authorities – including through our more place-focused structure and meetings such as the SEF (see above) – to test and refine the relationship between the national programme and local places and improve our communications and guidance wherever possible.

3.5 What is the role of Local Resilience Forums in shielding?

- Local Resilience Forums (LRFs) play a critical role in the ongoing response to COVID-19. They provide a forum to discuss, address and escalate local issues to central government.
- While local authorities will act as the key Shielding delivery partner, it is important that LRFs maintain situational awareness of how this cohort is being supported.
- LRFs should also continue to act as a strategic forum for local partners to develop an overall view of supply/demand of support in each area and to identify and address any issues arising from how the system is operating locally. Representatives from several LRFs have been invited to sit on the Shielding Stakeholder Engagement Forum (SEF) to escalate issues.
- Strategic Coordination Groups (SCGs) should stand ready to support local authorities in the delivery of essential goods to extremely vulnerable people who do not have alternative means of accessing these, and to coordinate the deployment of local Voluntary and Community Sector (VCS) organisations and available LRF assets as required.
- LRFs and local authorities have well established structures in place to work with the VCS as well as Category 1 responders and the private sector, and these will be different in each area. To support local engagement of the VCS, MHCLG has shared a list of all the VCS organisations by local authority area with LRFs on the secure Resilience Direct platform. Where possible, we would encourage the use of existing tested structures which allow for the sharing of resources. See Section 8 below for more on linking up with VCS partners.
- To support LRFs in their significant strategic coordination role, Government has deployed military planners to provide additional planning assistance to LRFs – specifically around social care, vulnerable groups and death management.

Figure 1 – a model showing the various stages of the Shielding programme: from receipt of an NHS letter and first contact, to provision of food, medicines and other assistance to the Shielding individual.



4. Data provision and data sharing

4.1 Receiving data from Government

- Councils have organised themselves into ‘Hubs’ or groupings (see above) 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:
 - ‘NHS List’ medically vulnerable person data - the first set was provided to hubs on 2 April. A second batch was sent on 9 April.
 - ‘Incoming’ EVP data - collected from the Extremely Vulnerable Person’s service, via GOV.UK form or phone line (currently provided daily at 4pm) from those individuals in receipt of NHS letters
 - Food deliveries feedback data - from food suppliers (this is being provided on a regular basis by MHCLG; we plan to improve the mechanism for doing so shortly).
- Data from these national lists of Extremely Vulnerable People is tailored to individual local authority area.
- Data leads for councils, or their hubs where they are working collectively, will then 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.

4.2 ‘Incoming EVP’ 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 individuals have medical conditions and whether they can access essential supplies (the individual would select yes or no). It also 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, but we want to ensure that no data is missed.

4.3 ‘NHS List’ medically vulnerable person data

- NHS medically vulnerable person data has been provided to councils via their hubs on two occasions. This highly sensitive data includes names, addresses, contact details and NHS numbers.
- NHS List data from both updates 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 section on data sharing below.

- 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 vulnerable person data extract they have, with ‘incoming’ EVP shielding data they are already receiving from the website and telephone line.
- Sharing of Shielding data locally is down to councils to determine when meeting vulnerable person support needs in their area.
- Shared data should have a clear purpose to support individuals who are Shielding - and it must be proportionate.

4.4 Food deliveries feedback data

- Councils have access to a regular flow of data about who has requested a food package, who needs help carrying their box into the house and any individual dietary requirements
- We are working with the Government Digital Service and food providers (Brakes and Bidfood) to ensure that councils receive data on when deliveries have been or will be made. Until that data flows regularly, councils or their local hub are being informed when grocery parcels are being delivered. Councils will have now received four tranches of data on attempted/completed and planned deliveries.
- The interim process is that the food suppliers send data to MHCLG analysts who split it into files for each council grouping. These files are then published on a secure site. All nominated council or council hub data leads will have received a link to the website, and we have separately emailed each of them a password to access their own file.
- MHCLG will regularly notify councils when new delivery data is available to view on the site, until a permanent data flow solution is implemented.
- Councils can use this data to compare to data on which individuals may need extra support – such as bringing in a parcel, for example.
- This data (on who has or is shortly to receive a box) is being sent via a secure link to the Local Authority Hub’s named data lead – see above.

4.5 Data Sharing

- Government Digital Service, on behalf of the Cabinet Office, sent all councils a Memorandum of Understanding (MoU) agreement to all LAs on 2 April setting out the terms of NHS List data use and sharing by your authority.
- Councils, as independent data controllers are required to comply with relevant and appropriate data privacy and protection regulations, and to ensure that they operate within statutory and regulatory boundaries.
- The Shielding service matches those responding to NHS letters identifying them as extremely vulnerable to COVID-19 – asking if they need care or support – with a to-door food delivery service, and with you (local authorities) as key local providers of support. GDS runs the website and automated helpline for the



Shielding service for the Cabinet Office, who is the 'data controller'. You are receiving data directly from GDS to enable you to deliver care as needed locally.

- In addition to this ongoing data feed, councils will *separately* be receiving, via GDS, extracts of highly sensitive, non-medical NHS patient data of those in your area identified by the NHS as being clinically vulnerable to COVID-19. This is the NHS 'Shielded Patient List'.
- The two data sets – one the 'Incoming Local Authority Dataset', the other 'NHS Shielded Patient List Local Authority Dataset' – must be handled differently regarding sharing with parties outside your authority. Guidance is set out in v1.2 of data sharing updated on 20 April. This guidance (v1.2) updates on data sharing requests from utilities and emergency responders.
- Assurance of local hosting systems that this data is held on is the responsibility of councils as independent Data Controllers, similarly to any local safeguarding, patient or other highly sensitive data that they hold as care and safeguarding providers.

5. Food and grocery deliveries

5.1 Supporting those who need assistance with food and other essentials

- Government has offered a 'direct-to-doorstep' weekly food parcel delivery service for all those who are extremely clinically vulnerable who require support getting essential supplies. This commenced on Saturday 28 March and will continue to increase as required, for as long as it is needed to protect those who are Shielding.
- Each parcel is based on a 7-day supply of essential items for one person. As of now, and subject to supply, an individual parcel contains: hot beverages (coffee, tea bags), biscuits, bread, cereal, tinned vegetables, potatoes, long life milk, tinned protein (fish, cold meat excluding pork), fresh fruit, pasta sauce, pasta, rice, toilet tissue, hand soap and/or shower gel.
- An A4 note is included in each package. It explains that should the recipient have any allergies and/or religious or cultural dietary requirements which mean that the contents of the box do not provide adequate food for one week, they should contact their council. The note also asks people to contact their council if they feel they need more than one package per week.

5.2 Direct-to-doorstep deliveries

- Food parcels are delivered by major food service suppliers and delivered directly to the doorstep by the delivery arms of the food suppliers.
- If there is no answer, the parcel will be left on the doorstep or recorded as 'unable to access' where this would mean leaving the parcel at a communal entrance.
- Delivery drivers will report on the outcome of individual deliveries and this information is included in the delivery information we share with councils.
- If a person refuses the food parcel at the door it will be redelivered to someone else on the list by the food provider so there is no wastage.



- Delivery drivers will observe strict social distancing in delivering food parcels, placing them on the doorstep and stepping back after ringing the doorbell. If you receive reports of such measures not being followed, or have any other concerns regarding the delivery process, please email shielding@communities.gov.uk.
- Councils receive information daily on which individuals have flagged, when registering through the website or the helpline, that they need help carrying their parcel inside.
- This, along with data on delivery outcomes regularly shared with councils, should enable local authorities to provide the necessary support in a timely and appropriate way, following the shielding guidelines. We will continue to keep thinking about management of these issues, taking account of feedback from councils.

5.3 Supermarkets

- The Government Digital Service has provided supermarkets access to registration data to support them in prioritising the Shielded group for click and collect services and/or at home delivery. This does not include data on all people who are Shielding but only the details of people who are Shielding and have requested food parcels.
- Supermarkets are prioritising extremely clinically vulnerable customers for online delivery slots based on data received from the Government Digital Service. This is currently only for customers who are already registered with the supermarket.
- To receive a priority supermarket slot, Shielded individuals must register on the website once they have received their NHS letter, or use the automated telephone line. When signing up, they must request essential food supplies for their data to be passed onto supermarkets.

5.4 One-off emergency bulk food deliveries (undertaken in late March 2020)

- In order to meet short-term emergency need, in Week 1 of the Shielding Programme (late March) we worked with our food industry partners to quickly deliver food to councils across the country.
- This offer consisted of large, bulk consignments of basic foodstuffs delivered to secure locations, for local authorities to distribute to individuals in immediate, urgent need of food – using local knowledge and data.
- These deliveries - equivalent in volume to 10,000 parcels (each parcel equating to a 7-day supply of essential items for one person) - were an emergency stopgap for anyone shielding who needed food urgently, as the direct-to-doorstep delivery system became fully operational.
- The last bulk delivery was completed on Wednesday 8th April; all councils or hubs who requested a bulk delivery have now received one. There are no plans to deliver further bulk deliveries.
- Some councils supplemented the emergency bulk deliveries with locally sourced provisions, which incurred local costs. We are working closely with the LGA and Shielding Stakeholder Engagement Forum to address this issue.

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 - where no other person is able to collect the item from the pharmacy and deliver it to the clinically vulnerable person's door.
- This service began on 8 April, with guidance issued to community pharmacies on 10 April. The service will remain in place until the COVID-19 outbreak has subsided and NHS England and NHS Improvement has announced, with the agreement of the Secretary of State, that community pharmacies and dispensing practices are no longer required to provide home delivery services.
- Where an individual does not identify themselves as requiring this support, but the nature of their prescription leads the pharmacy or dispensing doctor team to consider that the clinically vulnerable person may fulfil the shielding criteria, the pharmacy or dispensing doctor team will enquire of the clinically vulnerable person if they have been asked to self-isolate as per Government guidance, via a letter from the NHS or their general practice.
- NB - the Government is currently advising people to remain Shielded until the end of June and is regularly monitoring this position.

6.2 Volunteers helping to deliver medicines or collect prescriptions

- Where there is no family, friend, neighbour or carer, the pharmacy or dispensing doctor team may arrange for a local volunteer to can collect the clinically 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.

7. Social contact and basic care

7.1 Introduction

- Councils are key to the effective delivery of this component of the offer to clinically vulnerable people who are Shielding, which is focused on meeting the social and basic care needs of those who need it 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 (people to talk to, help to bathe, other domestic chores etc.) to ensure these are met.



- Councils will assess what help is required and how best individuals can be supported, using existing resources or the voluntary and community sector as appropriate. We are considering how to track whether requests for help with basic care have been met for the Shielded cohort.

7.2 Basic needs

- Councils will receive via the daily 'incoming EVP 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 local authority'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 2), we have asked that all councils put in place a phone line that Shielded individuals can use if they have urgent needs, to enable call centre handlers to refer people to this council line where appropriate, reducing referrals to adult social services departments. Please send details of this phone line to shielding@communities.gov.uk so we can pass this on to our call centre team.

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 - Section 7.



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.
- The LGA has published useful guidance for local government on how to support vulnerable groups: www.local.gov.uk/protecting-vulnerable-people-during-covid-19-outbreak
- It is important that volunteers are directed to where they can be most useful and to help sustain strong cohorts of local volunteers. The NHS Volunteer Responders scheme provides a rich seam of additional voluntary support which is there to help the council in your community efforts.
- It is not yet possible for Voluntary & Community Sector partners to deploy the volunteers directly, but this is being worked on and should be possible soon. In the meanwhile, Voluntary & Community Sector partners will need to rely on councils to make the referrals.

8.2 Accessing volunteers

- Working with the Royal Voluntary Service (RVS), NHS-England have expanded their Good Sam app to enable people to sign up as NHS Volunteer Responders to assist vulnerable groups self-isolating during the current epidemic. www.goodsamapp.org/NHSreferral
- NHS Volunteer Responders are not intended to replace local groups helping their vulnerable neighbours but is an additional service provided by the NHS where informal support is not available or easily linked to by health and social care professionals.
- NHS Volunteer Responders have signed up to carry out four types of task. Two are specific to NHS services and involve transporting clinically vulnerable persons to and from hospital and moving medical supplies between locations, it may also involve assisting pharmacies with medication delivery. Two of these tasks may help complement local offers of support to vulnerable people, including those who are Shielding:
 - ‘Community Response’ – which involves collecting shopping, medication or other essential supplies for someone who is self-isolating and delivering these supplies to their home. This could act as a helpful complement to the food and pharmacy deliveries government is already coordinating for up to 1.5m people within the Shielding group, who have been advised to remain at home and avoid all face to face contact.
 - ‘Check-in and Chat’ – where volunteers provide short-term telephone support to individuals who are at risk of loneliness because of self-



isolation. This could help as your local area looks to provide social contact with Shielded individuals.

- MHCLG's Secretary of State wrote to all councils on 3rd April to let them know that the NHS Volunteer Responders resource will be available to complement the support that councils and health bodies, with other local partners, are already giving to people in their local areas.
- This resource is available for both people who are extremely clinically vulnerable and therefore Shielding and people who are not Shielding but are vulnerable and self-isolating for other reasons including frailty, disability or pregnancy.
- To arrange support for those who are Shielding, or otherwise vulnerable, in your area, you can deploy a volunteer via the app. You can do this by creating a 'referral' via www.goodsamapp.org/NHSreferral for individuals in need of help. Guidance on how to refer individuals is here: www.goodsamapp.org/assets/pdf/Guide_for_Referrers.pdf
- Anyone with a local authority or NHS email address can make a referral into the system; alternatively, it is possible to make referrals by calling 0808 196 3382. The guidance above also summarises how the app then works to identify available volunteers in your local area.



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.

The Government is strongly advising this group to rigorously follow Shielding measures to keep themselves safe. These measures including staying at home at all times and avoiding any face-to-face contact. The Government is currently advising people to shield until the end of June and is regularly monitoring this position. 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 - assistance available	
<p>Who is an extremely clinically vulnerable person?</p>	<p>People identified by the NHS as extremely clinically vulnerable to COVID-19 have been advised by the NHS to stay at home until at least the end of June to ‘Shield’ them from contracting COVID-19.</p> <p>They have received letters from the NHS indicating that they have one or more of six clinically medical conditions that places them at highest risk if they get coronavirus.</p> <p>In addition, people estimated not to be on this ‘NHS List’ are currently being identified and referred to the Government’s Shielding programme by their GPs and specialist clinicians.</p>
<p>What support is available to those who are Shielding?</p>	<p>In their NHS letter, individuals who are extremely clinically vulnerable can register via a website or call centre number for support during their recommended stay at home period.</p> <p>The Government’s offer to Shielding individuals who request our support covers the following three areas of assistance:</p> <ul style="list-style-type: none"> • Essential grocery supplies - a free, standardised weekly parcel of food and household essentials, and priority delivery slots with supermarkets; • Medicines - arrangements to have medicines delivered to people’s homes by local community pharmacies; • Social contact and basic needs – for example, people to talk to, help to bathe or domestic duties such as cleaning.
<p>Who provides this support?</p>	<p>Identifying people in the extremely clinically vulnerable group who need support, sharing that information with councils and the provision and delivery of weekly food boxes is managed by Central Government through the Shielding programme. The Shielding Team operates out of MHCLG but works closely with DEFRA, the Department for Health and Social Care and many other partners across Government.</p> <p>The delivery of medicines to those in the extremely clinically vulnerable group that require them are provided by community pharmacies, the NHS have put in place these arrangements. A Home Delivery Service during the COVID-19 outbreak is in place and is delivered by community pharmacies (and separately dispensing doctors). Community pharmacies will deliver medicines to eligible individuals who, due to their medical condition, should not present in the pharmacy and where no other person is able to collect the item from the pharmacy and deliver it to the patient.</p> <p>Other support to meet care needs or social contact, should individuals require it, is co-ordinated by councils working with local statutory, VCS and private partners as appropriate in the council’s area.</p>
<p>How is support delivered to people Shielding organised locally?</p>	<p>Government has issued guidance to councils on the Shielding support model and their critical role in delivering it, but it is for councils to consider the best way for them to co-ordinate activity locally – either through a group of LAs coming together in a Hub (such as in two tier areas as well as between neighbouring councils) or as an individual authority.</p>



	<p>The LGA have produced helpful guidance for councils on supporting a wide range of residents, including those who are Shielding: www.local.gov.uk/sites/default/files/documents/COVID-19_vulnerable%20people%20briefing%20updated.pdf</p>
How do Councils make sure all those individuals advised to shield have received their letters?	<p>Government will do all it can to ensure individuals have received their letters advising them to shield and that they have acted to log their needs where necessary. Data shared with councils will provide an up to date record of those individuals who require assistance. The outbound call centre will also attempt to contact all those individuals who have not yet acted as a result of receiving the letter – escalating to councils where we have received no response.</p>
Where should Councils' direct people who think they may be part of the extremely vulnerable group?	<p>Councils should only direct people towards the Shielding service if that individual has received a letter from the NHS or from their GP or Clinician.</p> <p>Should an individual contact their council under these circumstances, they should be advised to contact their GP who can refer them into the system if they meet the criteria.</p>
Other vulnerable people	
What about those who have not received an NHS letter but are vulnerable and in need of help or support?	<p>The Shielding programme provides support to extremely clinically vulnerable people – including delivering essential groceries and medicines and providing social contact and basic domestic aid or care - who are Shielding due to a serious underlying health condition.</p> <p>Government is keen to help local partners to identify and respond to the needs of their residents who do not qualify for Shielding support, but who are vulnerable or affected by COVID-19 for a range of reasons.</p> <p>We are already helping councils to support non-Shielding vulnerable people – including by providing £1.6 billion additional funding for service pressures, strengthening links with supermarkets and enabling local authorities to access and match NHS volunteers to help wider vulnerable groups in their area. To find out more, please visit www.gov.uk/find-coronavirus-support</p> <p>The Local Government Association has published useful guidance for local government on how to support a range of vulnerable groups: www.local.gov.uk/protecting-vulnerable-people-during-covid-19-outbreak</p>
<p>What about hard-to-reach groups who may be Shielding?</p> <p>What about people who may not have received an NHS Shielding letter, for whatever reason?</p>	<p>Councils will want to make sure that shielding advice reaches potentially hard-to-reach vulnerable groups in their area - including Gypsy, Roma and Traveller communities.</p> <p>Individuals within these groups may be classed as extremely clinically vulnerable but, for whatever reason, may not have received their letter from NHS England to alert them to this fact.</p> <p>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>



Shielding Call Centre - and other calls	
How is Government prioritising who to call?	Our call centre is prioritising calls to people who live alone, who are blind or visually impaired, are terminally ill or who have high care needs (as determined by the welfare benefits they claim). Everyone who has yet to register and who is extremely clinically vulnerable will be contacted to establish whether they have support needs.
What is done with this information once Government has collected it?	<p>The information collected via Shielding website and the automated hotline will be used to arrange food deliveries directly to vulnerable people where they indicate they need help with food and household groceries.</p> <p>Where someone has indicated they have basic care needs this information will be passed to the relevant Council through the daily data update they are receiving on those who have registered through the Shielding website or the inbound automated telephone line.</p>
Does the call centre record peoples' needs in the same way as the website?	Needs are recorded directly on to the website. The call agent will simply fill in the online form on the website on behalf of the patient whilst they are on the phone to them, and the data is recorded and used in exactly the same way.
What about people with urgent needs, or those in immediate danger?	<p>A small number of people receiving an outbound call may respond in such a way that indicates to the call agent that there is an immediate risk to life or other need for emergency support. In these cases, the call agent will place the patient on hold, call the emergency services and supply them with the details of the case, and then transfer the patient through to the emergency services operator.</p> <p>Our call agents will make a referral to the relevant local authority's adult social services department if they identify a person with an urgent 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 are only made where the patient gives additional information indicating an urgent welfare need to the call centre operative.</p>
How are councils to be notified about people with urgent welfare needs?	<p>There are two avenues used to contact councils regarding people with urgent welfare needs:</p> <p>By the individual: if people receiving or due to receive a food parcel require immediate assistance, they are advised to contact their local authority. This might be because they have an immediate need for food in advance of the parcel being delivered, they have dietary requirements that are not met by the food in the parcel and do not have enough food to sustain them, or they have wider care needs.</p> <p>By the outbound call centre: the outbound call centre will contact the relevant local authority adult social care services if they think there is an immediate need which the centralised system cannot support.</p> <p>Government has asked councils to put in place a phone line that the public can use if they have urgent needs as a result of COVID-19. All councils are asked to ensure this is in place and send details to shielding@communities.gov.uk so call centre handlers can refer people to this line where appropriate, reducing referrals to adult social services departments.</p>

<p>What about people who receive an NHS letter but don't register for support via the GOV.UK website or call centre?</p>	<p>It is very important that people who receive an NHS letter advising them to Shield and need assistance register via the GOV.UK website or call centre details listed on the letter. Please encourage anyone who needs assistance to register if they have not already done so. We cannot help them if they do not request help.</p> <p>To attempt to cover off these people, we have also set up an outbound call function, live since 28 March, to make calls to those in the extremely clinically vulnerable group who have received letters from the NHS telling them they need to Shield and stay at home but have not contacted us, to indicate whether they have a support need.</p> <p>These individuals will be called, but they cannot dial in to this service (unlike the call centre listed on the NHS letters). The aim of the call function is to replicate the registration process offered through the GOV.UK Shielding website or call centre. Call agents therefore aim to:</p> <ul style="list-style-type: none"> • Register the patient's support needs, or • Confirm they do not have a need. <p>Government has partnered with Capita to deliver some of these calls.</p>
<p>Data</p>	
<p>What data will local authority Hubs receive, and what should they share?</p>	<p>Local authority 'Hubs' receive the following information to cascade to relevant councils:</p> <ul style="list-style-type: none"> • 'Incoming' data collected from the Extremely Vulnerable Person's service, via GOV.UK form or phone line (being provided daily at 4pm) • 'NHS List' patient data (a set was provided to hubs on 2 April and a second batch was sent on 9 April.) • Food deliveries feedback data from food suppliers (provided on a regular basis by MHCLG). Further information is provided under the 'food deliveries' section of this FAQ. • Data from the above national lists of Extremely Vulnerable People is centrally 'cut' down to individual local authority area. Councils, or their hubs where they are working collectively, will then receive cuts for all the councils within their remit, and in turn securely send on to each authority cut for their area.
<p>Why are councils receiving additional NHS patient data?</p>	<p>A second set of NHS patient data was shared by the Government on 9 April following an update to the national NHS List. This list provides the details of further individuals who have been assessed to be extremely clinically vulnerable. Further updates will be provided in due course</p>
<p>We are not receiving information on those extremely vulnerable individuals in our area who have requested support.</p>	<p>If a local authority has not received their data, they should contact their hub, if they are 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.</p> <p>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.</p>
<p>Can councils have more than one</p>	<p>Yes. Councils should email transfer-coronavirus-data-service@digital.cabinet-office.gov.uk with the following details for any additional person:</p>

<p>person as the data lead / can we change who accesses this data?</p>	<ul style="list-style-type: none"> • First name • Last name • Mobile number • Email address
<p>Who will the NHS patient data be sent to?</p>	<p>The patient data has been sent to the named data controller in each council or local authority hub. In the case of the latter, where there is one lead data controller is responsible for sharing the data across the local hub.</p>
<p>Is the data added cumulatively?</p>	<p>Yes. So, the files will get bigger as data is added daily. This is because we want to make sure no data is missed. (Note this is in reference to the 'incoming' data collected from the Extremely Vulnerable Person's service website or phone line, not the NHS data or the food deliveries data).</p>
<p>Can councils share data with others e.g. voluntary organisations?</p>	<p>NHS patient data can be used to contact those clinically vulnerable patients locally who councils have identified as potentially needing support or care.</p> <p>NHS data is not to be used or shared externally for any other purpose except for councils contacting patients directly.</p> <p>Councils must not confuse the highly sensitive NHS patient data extract they have, with ongoing 'Shielding' data they are already receiving from the website and phone line. Sharing of Shielding data locally is down to councils to determine, in meeting vulnerable person support needs in their area.</p>
<p>We have been sent incorrect data meant for another LA. What should we do?</p>	<p>If you have received records in error, please delete these and let us know immediately by e-mailing shielding@communities.gov.uk</p> <p>Please ensure that you <u>fully and safely delete</u> data sent erroneously.</p>
<p>Food deliveries</p>	
<p>Can I find out when deliveries will be made to individuals in my area?</p>	<p>Government has offered a direct to door weekly food package service for all those who are extremely clinically vulnerable who require support getting essential supplies. This commenced Saturday 28 March and will continue to increase as required.</p> <p>We are working with the Government Digital Service and food providers (Brakes and Bidfood) to ensure that councils will have access to a regular flow of data about who has requested a food package, who needs help carrying their box into the house, and when that delivery has been or will be made.</p> <p>Until that data flows regularly, councils or their local hub are being informed when grocery parcels are being delivered. Councils will have now received three tranches of data on attempted/completed and planned deliveries.</p>
<p>What will the data on food deliveries include and how often can we expect it?</p>	<p>We are working with the Government Digital Service (GDS) and food providers to ensure that councils will have access to a regular flow of data about who has requested a food package, who needs help carrying their box into the house, and when that delivery has been or will be made.</p>



	<p>In the interim, we have put in place a process whereby the food suppliers send data to MHCLG analysts, who split it into files for each council grouping. These files are then published on a secure site. All nominated council or council hub data leads will have received a link to the site and separately emailed each of them a password to access their own file.</p> <p>MHCLG will notify councils every few days when new delivery data is available to view on the site, until a permanent data flow solution is implemented.</p>														
<p>How will we know who can't carry a box into their house, and when they will be getting their delivery?</p>	<p>We are working with the Government Digital Service to ensure that councils will have access to a regular flow of data about who has requested a food package, who needs help carrying their box into the house and when that delivery has been, or will be, made.</p> <p>In advance of that, to identify where individuals have received or are due to receive a parcel and may need support bringing it in, we have made data available to local authorities on completed/attempted deliveries and planned deliveries in your area. This data on who has or is shortly receiving a box is sent via a secure link to the Local Authority hub's named data lead. When data is made available on people who need help carrying the box in, local authorities will be able to match this to data on deliveries.</p>														
<p>What happens if a person has special dietary requirements and how will I get that data?</p>	<p>In the standardised package which is delivered to individuals there is a note which explains to the recipient that if they have any religious or dietary requirements, they should check the contents and ingredients of the pack. All food is packaged so the individual will not have to touch any unsuitable products.</p> <p>We are working with the Government Digital Service and food providers (Brakes and Bidfood) to ensure that councils will have access to a regular flow of data about who has requested a food package and whether they have any allergies or religious/cultural dietary requirements.</p> <p>In the interim, if people receiving or due to receive a package require immediate assistance, such as to supplement their box with more suitable products, they can contact their local authority directly. Local Authorities should then use their wider resources in the local area to help support the individual.</p>														
<p>Can the individual's NHS number be included in the food delivery data?</p>	<p>Delivery data is provided by the food suppliers who, as part of a proportionate approach to data sharing, have access only to the information that is necessary to deliver the food packages. They do not have sight of NHS numbers and we are therefore currently unable to include this in the data you receive about food deliveries.</p>														
<p>What do the delivery codes in the food delivery data mean?</p>	<p>Drivers log delivery outcomes using six codes. They should be read as:</p> <table border="1" data-bbox="478 1713 1444 1989"> <thead> <tr> <th>Code</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Delivered to individual.</td> </tr> <tr> <td>2</td> <td>No answer and left on doorstep</td> </tr> <tr> <td>3</td> <td>Rejected as no longer required</td> </tr> <tr> <td>4</td> <td>Unopened box still there from last week</td> </tr> <tr> <td>5</td> <td>Unable to access issue</td> </tr> <tr> <td>6</td> <td>Unable to deliver. Delivery Box Failure. Vehicle failure, road traffic accident; Drivers Hours, staff problem etc</td> </tr> </tbody> </table>	Code	Status	1	Delivered to individual.	2	No answer and left on doorstep	3	Rejected as no longer required	4	Unopened box still there from last week	5	Unable to access issue	6	Unable to deliver. Delivery Box Failure. Vehicle failure, road traffic accident; Drivers Hours, staff problem etc
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Contents of the food parcels

What's in the packages that are delivered to individuals?	As of now and subject to supply an individual parcel contains; hot beverages (coffee, tea bags), biscuits, bread, cereal, tinned veg, potatoes, long life milk, tinned protein (fish, cold meat excluding pork, corned beef), fresh fruit, pasta sauce, pasta and rice, toilet tissue, hand soap or shower gel.
How many people does the package supply and for how long?	An individual package is based on one person for one week.
Are you supplying more than one box to a single household, where there is only one clinically vulnerable person but there are dependents or other vulnerable people who do not feel able to leave the house?	<p>The Government is providing a weekly food box to each person who registers as needing one and is eligible during the period of Shielding.</p> <p>There is a letter that accompanies the package that asks people to contact their local authority if they feel they need more than one package.</p>
What happens if a box is delivered but rejected by the individual?	If an individual refuses a food package that is delivered to their door, the driver records this delivery outcome. The individual is then removed from the food package distribution list and will not receive a package in future. The food parcel they refuse at the door will be redelivered to someone else on the list by the food provider, so there is no wastage.
What if I think someone who is extremely vulnerable requires food immediately and we haven't got any goods/ food left?	Between the centralised 'direct to doorstep' system and emergency bulk food delivery, this situation should not arise. If it does, councils will need to find a localised solution, drawing on support from Local Resilience Forums if necessary.
What are people being told to contact their Council about?	If people receiving or due to receive a package require immediate assistance, they are advised to contact their local authority. This might be because they have an immediate need for food in advance of the package being delivered, they have dietary requirements that are not met by the food in the package and do not have enough food to sustain them, or they have wider care needs.
How will they know how to contact the Local Authority?	Please put contact details clearly on your website and ensure your contact centre knows where to direct people with urgent questions relating to the Shielding programme.

Individual queries	
<p>What if an individual no longer wishes to receive a food package?</p>	<p>If an individual no longer want or need the food packages, they should reregister at www.gov.uk/coronavirus-extremely-vulnerable and indicate that you do not require a food package by answering 'yes' to the question 'Do you have a way of getting essential supplies delivered at the moment?' You can also re-register via the helpline number on your NHS letter.</p> <p>If you have already done this, it could be that you have received a parcel before the system updated. If you have already filled in the form re-registering then it will be processed and there is no need to complete it again.</p> <p>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 driver will record this outcome on the system and they will be removed from the food parcels distribution list.</p>
<p>What if someone does not want a food package, but wants access to a priority slot with the supermarket?</p>	<p>To receive a priority supermarket slot, Shielding individuals must register on the website at www.gov.uk/coronavirus-extremely-vulnerable once they have received their NHS letter, or use the phone line available. When signing up, they must request essential food supplies in order for their data to be passed onto supermarkets. Once registered for priority access with supermarkets, 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 access with supermarkets does not necessarily guarantee a regular frequency of delivery.</p>
<p>How does someone change their address if the box is being delivered to the wrong address?</p>	<p>For people who are eligible and have registered for support and have changed address, the individuals should re-submit their registration form, noting their new address. They can do this even if their new address no longer matches the address on their NHS letter. The form can be found at www.gov.uk/coronavirus-extremely-vulnerable.</p>
<p>What data do supermarkets have access to on clinically vulnerable people?</p>	<p>The Government Digital Service has provided supermarkets access to some registration data to support them to prioritise the Shielding cohort for click and collect services and/or at home delivery. This does not include data on all people who are Shielding but only the details of people who are Shielding and have requested food parcels.</p>
<p>Who are supermarkets prioritising for food delivery slots?</p>	<p>Supermarkets are prioritising extremely clinically vulnerable customers for online delivery slots based on data received from the Government Digital Service.</p>
<p>What happens if there is no answer when the driver knocks/rings the doorbell?</p>	<p>If there is no answer, the parcel will be left on the doorstep or recorded as 'unable to access' where this would mean leaving the parcel at a communal entrance. Delivery drivers will report on the outcome of individual deliveries and this information will be included in the delivery information we share with local authorities.</p>

Emergency bulk deliveries (no longer in operation)	
What is the difference between 'direct to doorstep' deliveries and emergency bulk deliveries to local authority hubs?	<p>In order to meet short-term emergency need, in Week 1 of the Shielding Programme (late March) we worked with our food industry partners to quickly deliver food to councils across the country.</p> <p>This offer consisted of large, bulk consignments of basic foodstuffs delivered to secure locations, for local authorities to distribute to individuals in immediate, urgent need of food – using local knowledge and data.</p>
What if the bulk delivery didn't contain what we were expecting?	<p>These deliveries - equivalent in volume to 10,000 parcels (each parcel equating to a 7-day supply of essential items for one person) - were an emergency stopgap for anyone shielding who needed food urgently, as the direct-to-doorstep delivery system became fully operational.</p> <p>Some councils chose to supplement the emergency bulk deliveries with locally sourced provisions, which incurred local costs. We are working closely with the LGA and Shielding Stakeholder Engagement Forum to address this issue.</p>
How do we request an emergency bulk delivery?	<p>The last emergency bulk delivery was completed on Wednesday 8th April; all councils or hubs who requested a bulk delivery have now received one. There are no plans to provide further bulk deliveries.</p>
Voluntary and Community Sector (VCS) and using volunteers	
What is the role of the Voluntary and Community Sector?	<p>Local voluntary and community organisations can work with the council to co-ordinate intelligence about need or gaps in support, and match this up with voluntary resources available.</p> <p>The Local Government Association has published useful guidance (3rd April 2020) for local government on how to support vulnerable groups: www.local.gov.uk/protecting-vulnerable-people-during-covid-19-outbreak</p>
What support is available for the Voluntary and Community Sector?	<p>The Chancellor has announced an extra £750 million coronavirus funding for frontline charities across the UK to ensure they can continue their vital work during the coronavirus outbreak. This includes hospices and those supporting domestic abuse victims.</p> <p>The measures already announced by the Government will also support many charities and social enterprises to manage the financial challenges presented by the current emergency, including deferring their VAT bills, paying no business rates for their shops next year, and the Job Retention Scheme.</p>
What is the NHS Volunteer Responders/ Good Sam volunteer scheme?	<p>The NHS is working with the Royal Voluntary Service (RVS) to expand their Good Sam app, to enable people to sign up as NHS Volunteer Responders and assist vulnerable groups self-isolating during the current epidemic - www.goodsamapp.org/NHSreferral</p>



<p>What can these NHS Volunteer Responders do?</p>	<p>NHS Volunteer Responders have signed up to carry out four types of task. Two are specific to NHS services and involve transporting patients to and from hospital and moving medical supplies between locations.</p> <p>Two of these tasks may help complement local offers of support to vulnerable people, including those who are Shielding:</p> <p>‘Community Response’ – which involves collecting shopping, medication or other essential supplies for someone who is self-isolating and delivering these supplies to their home. This could act as a helpful complement to the food and pharmacy deliveries government is already coordinating for up to 1.5m people within the Shielding group, who have been advised to remain at home and avoid all face to face contact.</p> <p>‘Check-in and Chat’ – where volunteers provide short-term telephone support to individuals who are at risk of loneliness because of self-isolation. This could help as your local area looks to provide social contact with the Shielding vulnerable.</p>
<p>How can councils access NHS volunteers through the Good Sam app?</p>	<p>The Secretary of State for Housing, Communities and Local Government wrote to all councils on 3rd April to let them know that the NHS Volunteer Responders resource will be available to complement the support that councils and health bodies, with other local partners, are already giving to people in their local areas.</p> <p>This is both people who are extremely clinically vulnerable and therefore Shielding and people who are not Shielding but are vulnerable and self-isolating for other reasons including frailty, disability or pregnancy.</p> <p>To arrange support for those who are shielding, or otherwise vulnerable, in your area, you can deploy a volunteer via the app. You can do this by creating a 'referral' via www.goodsamapp.org/NHSreferral for individuals in need of help. Guidance on how to refer individuals is here: www.goodsamapp.org/assets/pdf/Guide_for_Referrers.pdf</p> <p>Anyone with a local authority or NHS email address can make a referral into the system; alternatively, it is possible to make referrals by calling 0808 196 3382. The guidance above also summarises how the app then works to identify available volunteers in your local area.</p>
<p>How does the national offer of volunteers align with local volunteer programmes?</p>	<p>It is important that volunteers are directed to where they can be most useful and to help sustain strong cohorts of local volunteers. The NHS Volunteer Responders scheme provides a rich seam of additional voluntary support which is there to help the council in your community efforts.</p> <p>Councils will be plugged into their local VCS networks, potentially through local community and voluntary services such as the relevant Community Foundation and the British Red Cross as local coordinating and funding bodies for the sector.</p>
<p>What governance is in place/checks happen when volunteers sign up?</p>	<p>Royal Voluntary Service, who manage the app, ID checks all volunteers. Enhanced Disclosure and Barring Service vetting/checks are required for those doing patient transport.</p> <p>NHS Volunteer responders only require a DBS check if they are undertaking patient transport. Volunteers for all other current roles are identity checked by Royal</p>



	<p>Voluntary Service , who manage the programme, in line with similar volunteer programmes.</p>
<p>Can VCS partners deploy the NHS volunteers?</p>	<p>It is not yet possible for VCS partners to deploy the volunteers directly, but this is being worked on and should be possible soon. In the meanwhile, VCS partners will need to rely on councils to make the referrals.</p>
<p>Can volunteers handle money, as many residents are having difficulty with shopping/paying for the shopping?</p>	<p>The ‘getting started’ pack for the community response volunteer role covers this in a lot of detail as the payment mechanisms vary depending on where the resident wishes the volunteer to go to do their shopping.</p> <p>In summary volunteers being asked to collect shopping or medicines are encouraged when contacting the individual to discuss their requirements to agree how it is to be paid for and the potential payment options. The guidance sets these out, but they include click and collect, use of vouchers or use cash provided by the individual and so on.</p> <p>If the individual cannot use any of these payment routes, then the volunteer is advised to contact the Royal Voluntary Service Support Team. The guidance is being regularly updated with new payment options: volunteering.royalvoluntaryservice.org.uk/nhs-volunteer-responders-portal/volunteers</p>
<p>What is the process if an NHS volunteer realises someone needs wider support – how do they know who to contact in the council?</p>	<p>If a volunteer comes across any safeguarding issue or feels like someone might need further support, they are advised to contact the Royal Voluntary Service call centre.</p> <p>The Royal Voluntary Service has a dedicated safeguarding team who will pick this up and ensure that any appropriate follow up is conducted, including referral to the Local Resilience Forum or Council if needed or back to the originating referrer.</p>