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<b>Event</b>	<b>COVID-19: Exemption from contact isolation for fully vaccinated health and social care staff in exceptional circumstances</b>
<b>Notified by</b>	<b>PHE Incident Director</b>
<b>Authorised by</b>	<b>Susan Hopkins, SRD (COVID-19) Aliko Ahmed, Regional Director William Welfare, Places and Regions</b>
<b>Contact</b>	<b>Incident Director</b>
<b>PHE NIERP Level</b>	<b>COVID-19 incident</b>
<b>Incident Lead</b>	<b>Incident Director</b>

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### For Sharing with Directors of Public Health

#### Key Message

From 19 July 2021, and only in exceptional circumstances where there is a risk to health or safety resulting from staff absence through the provision of a reduced level of care, health and social care staff who have been identified as a contact of a case of COVID-19 and who are fully vaccinated (more than 14 days after the second dose) may be able to continue in their role.

#### Background and Interpretation:

Individuals who are identified as a close contact of a confirmed case of COVID-19 by NHS Test and Trace currently have a legal duty to self-isolate for 10 full days from the date of last contact, in order to reduce the risk of onward transmission. There is strong evidence that contacts of cases, including those who are vaccinated, have higher SARS-CoV-2 positivity rates than the general population. Vaccination reduces, but does not eliminate, the risk of acquiring and transmitting infection.

The current high prevalence of COVID19 has resulted in large numbers of close contacts being required to self-isolate which is placing pressure on some health and social care services due to staff shortages. As case numbers increase, there may be certain circumstances where staffing levels could fall so low that the safety of individuals needing care is compromised. **In these exceptional circumstances**, fully vaccinated frontline NHS and social care staff, if identified as a close contact of a positive case, may be allowed to leave self-isolation in order to attend (including travelling to and from) work. This should only be considered in exceptional circumstances where there is a risk to health or safety, or the safety of providing continuing clinical or care services resulting from staff absence. The decision to allow staff to attend work should be made on a case by case basis, and only after a risk assessment by an individual(s) nominated by the organisation's management, and authorisation by the organisation's local Director of Infection Prevention and Control and/or the lead professional for health protection and/or Director of Public Health relevant to the organisation. The [gov.uk website](https://www.gov.uk) will be updated to reflect this.



Careful consideration should be given to the risk of onward transmission compared to the risk to delivery of critical services. This arrangement should be implemented at service level on a case-by-case basis and not applied uniformly across the whole sector.

In these very limited circumstances, staff will remain under a legal duty to self-isolate as a close contact. However, they will be considered as having a 'reasonable excuse' not to self-isolate for a period where it is necessary for them to undertake specific patient or client-facing tasks. They will continue to receive isolation reminders.

In order to mitigate the increased risk associated with this exemption, the following mitigations must be implemented:

- The staff member should be fully vaccinated, defined as having received both doses of an MHRA approved vaccination, with 14 days having elapsed since the final dose at the time of last contact with the positive case.
- The staff member should undertake a PCR test and should isolate until they receive the result. They should only attend work if this result is negative.
- They should undertake daily LFD tests for at least 7 days (and to a maximum of 10 days/ completion of the identified isolation period) prior to starting work each day. Test results should be reported to NHS Test and Trace via the web portal and to their duty manager. Any staff member who has a positive LFD test during this period should not attend work and should arrange a PCR test as soon as possible.
- If the staff member develops any [COVID symptoms](#) during the 10 days from their last exposure to the case, they should stay at home and immediately arrange a PCR test.
- Staff working during this 10-day period should comply with all relevant infection control precautions and PPE should be properly worn throughout the day. Any breaches should be reported immediately to their line manager.
- The staff member should not work with clinically extremely vulnerable patients, as determined by the organisation.
- It is recommended that the staff member should not take breaks or eat meals with other staff.
- They can only leave their place of self-isolation to undertake work activities, including travel to and from work. They can travel to work by their normal route but should wear a face covering for their journey if within an enclosed space with other individuals.
- Outside of work activities, the individual must follow current advice for self-isolation.

Employers should continue to manage the health and safety of their staff under the relevant legislation.

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### Implications for PHE Regions

Contact Tracing and Outbreak Management Demand: This change may result in transmission in health and care settings - the above control measures aim to mitigate this risk.

Queries may be received from health and care settings.  
Formal communication to the NHS will be led by NHSE.



**Implications for PHE sites and services**

N/A

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**Recommendations to PHE Regions**

HPTs and Regional teams should cascade this Briefing Note to NHS Directors of Infection, Prevention and Control (DIPCs), Infection Prevention and Control teams, and local authority Directors of Public Health. Directors of Public Health should be asked to cascade to their Adult Social Care teams and care homes.

Queries from Health Protection Teams should be directed to [COVIDOps@phe.gov.uk](mailto:COVIDOps@phe.gov.uk)

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**Recommendations to PHE sites and services**

N/A

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**Implications and recommendations for local authorities**

Contact Tracing and Outbreak Management Demand: This change may result in transmission in health and care settings - the above control measures aim to mitigate this risk.

Please cascade to Adult Social Care teams and care homes.

Queries from local authorities should be directed to relevant Health Protection Team

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**References/ Sources of information**

<https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings>

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