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**Coronavirus (COVID-19):  
what you need to do**

### Stay at home

- Only go outside for food, health reasons or work (but only if you cannot work from home)
- If you go out, stay 2 metres (6ft) away from other people at all times
- Wash your hands as soon as you get home

Do not meet others, even friends or family.

You can spread the virus even if you don't have symptoms.

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Department  
of Health &  
Social Care

Guidance

# Coronavirus (COVID-19): Q&A for people receiving a personal budget or personal health budget

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## Who this Q&A is for

This Q&A is aimed at people who receive support via personal budgets or personal health budgets – and take this via a direct payment. It is also relevant to individuals employed via the direct payment, family members, local authorities, clinical commissioning groups (CCGs) and providers.

It sets out key messages to support planning and responding to the international pandemic, help slow the transmission of the coronavirus (COVID-19) and reduce the possibility of hospital admission as the outbreak progresses across the country.

It takes into account the [latest advice issued by government](#) and the [COVID-19: ethical framework for adult social care](#).

This Q&A has been developed by the Department of Health and Social Care (DHSC) based on questions and concerns raised by members of the public. It has been contributed to by multiple departments, organisations and charities, including Think Local Act Personal, In-Control, Skills for Care, and NHS England and NHS Improvement, including the Personalised Care Strategic Coproduction Group.

This Q&A will be a working document and will be regularly updated to take into account any new guidance published, and also to respond to any new issues or concerns raised by members of the public. For any concerns or questions that are not reflected within this guidance (or other published guidance), please submit these to [pa.framework@skillsforcare.org.uk](mailto:pa.framework@skillsforcare.org.uk). These will be considered for future iterations.

It should be read alongside the national [guidance for individuals receiving care and support through direct payments](#)

## Flexible use of direct payments during the pandemic

### What are the expectations around the flexible use of direct payments?

During the pandemic, we expect local authorities, CCGs and direct payment holders to adopt a more flexible approach to the use of direct payments. COVID-19 is an exceptional circumstance, and it is vital that we make sure individuals who take their budget as a direct payment, continue to receive the support they require that can keep them healthy, well, and out of hospital.

As far as possible, direct payments should continue to be used as agreed to within the care and support plan. However, there may be circumstances during the pandemic where this is not possible, for example, through staff absence.

In these circumstances, individuals should raise and discuss this with their health or social care team, including their local authority or CCG. However, we are aware that given the current pressures on the system, it may take longer for the relevant organisation or person to respond to a request to change the use of the direct payment. Therefore, in circumstances where there is clear rationale that enables the individual to keep safe and prevent admission to hospital, local authorities and CCGs should be willing to give the individual more flexibility in how they use their direct payment, with the guiding principle being ensuring that they safely receive the care and support they require.

Where necessary, this flexibility should include suspension or reduced restrictions on spend of the existing payment allocation. All flexibility should follow the relevant guidance, for example the [COVID-19: ethical framework for adult social care](#).

When taking any decisions on using the direct payment differently during the pandemic, individuals must retain any receipts or evidence of use as they would do for purchases normally made, and a log of how their direct payment was used that they can then discuss with their local authority or CCG following the pandemic.

### Can people use unspent direct payment allocation (sometimes known as contingency funds) or access emergency funding from their local authority or CCG?

Yes. In exceptional circumstances, unspent allocation can be used to ensure that the appropriate care and support is provided. Use of this funding should be recorded within a log, with the relevant receipts or evidence also kept in order to justify the spend to the local authority or CCG once the pandemic is over.

As is normal protocol, emergency funds must be made by requests through the CCG or local authority. Any request for additional emergency funding necessary as a result of COVID-19, should be prioritised.

## Continuation of direct payments

## **Given the pandemic, will my personal budget or personal health budget direct payment be stopped?**

No. Except in extreme circumstance, your existing personal budget or personal health budget should continue.

If your direct payment is stopped due to an extreme circumstance, the local authority or CCG should explain that to you, and discuss alternative arrangements with you in order to ensure you receive the care and support you require.

## **What might be different about how personal health budgets or personal budgets are delivered, in the current context?**

In some cases, the care and support in place may need amending given current guidance and rules around isolation. Needs may have to be met in a different way, for example accessing exercise classes through technology, rather than in community settings.

Local authorities and CCGs have also been encouraged to consider providing longer-term payments (for example, quarterly, rather than monthly) that can reduce administrative burden and provide the individual with greater flexibility. Therefore, the amount you may receive in your direct payment, may be different to normal.

## **If I am admitted to hospital, will my direct payment continue?**

In line with normal practice, this will be dependent on your condition and circumstances, length of stay, and any extenuating circumstances that mean your needs have changed and are no longer as set out in the care and support plan.

However, a temporary stay in hospital should not necessarily mean that the direct payment should cease – and direct payments are often conducive to helping people to return home safely, as soon as possible.

## **Can my carer or PA support me in hospital, if I am admitted?**

We understand that you may prefer some personal care tasks to be undertaken by your carer or personal assistant (PA) rather than hospital staff, which the direct payment can usually allow.

While people's preferences will be taken into account, the measures taken to combat the current pandemic means that access to hospitals for anybody who is not a patient or member of staff, is limited. It therefore may not be possible for your carer or PA to support you in hospital, during this period. Rules and guidance issued by the hospital will provide further information on what is possible.

If your carer or PA is able to support you in hospital, they will be subject to infection control measures as is normal practice. In no circumstance should the personal care interfere with the medical treatment. Carers, PAs or anybody supporting you must adhere to the guidance set by government and the hospital around supporting people when in acute care.

Carers and PAs will have a vital role to play upon discharge. Separate guidance has been published on the [discharge process](#) in place during the pandemic.

## **Should I develop a contingency plan?**

While not a formal requirement, we strongly recommend that everybody with a direct payment develops a contingency plan, or updates their existing plan, to ensure their needs can continue to be met. If you already engage with a direct payment support organisation as part of your care and support, it may be possible for them to support you in developing this plan.

This plan should be discussed and agreed with your local authority or CCG where possible, and then exercised when necessary. Elements to consider within this plan include:

- staffing – identify options for alternative arrangements where those who are employed via a direct payment cannot work in their usual way. Longer shift patterns and less frequent handovers could also be considered, taking into account any additional pressures being placed on the individual
- alternative provision – when elements of the care and support are unable to be delivered (such as accessing exercise classes in the community), use of other avenues should be explored (for example, the use of indoor exercise classes and the use of technology)
- alternative networks of support – the identification and contact with extended family and/or friends and/or volunteers may need to be considered as part of any emergency contingency plan to keep safe and avoid acute admission, so that people can stay at home. Be mindful that information, advice and training may be needed
- upskilling of existing staff – identify what possible additional training or support there is for existing staff members. This does not necessarily have to be through face-to-face training – it could be through peer learning or e-learning

A template contingency plan can be found in [Annex A](#).

Local authorities and CCGs should consider how direct payments and personalised care and support plans can be made more flexible during the pandemic, including consideration of emergency or one-off payments, and greater flexibility about the use of unspent direct payment allocation where necessary. Local authorities and CCGs should also consider having a single point of contact for direct payment holders to contact, in order to agree contingency plans and discuss any necessary additional emergency payments.

Following the pandemic, local authorities and CCGs should follow up with direct payment holders to discuss the use of the direct payment during this period. Individuals must be able to reasonably justify the use of their direct payment during this period, providing receipts and evidence of use, and keep a log of how their payment was used.

## Personal protective equipment (PPE)

### Is my PA eligible to receive PPE?

Yes. If you or any member of your household is symptomatic or has a confirmed case of COVID-19, and you PA will be providing direct care, PPE is required, and the PA, as an essential worker, will be eligible to receive that. Furthermore, if your PA normally receives PPE to support you, this should continue.

More detail on who should provide this PPE is set out below.

### Can I use my direct payment to buy PPE for PAs I employ?

If your existing direct payment contains funding to purchase PPE for your PA, you should continue to use that funding to purchase PPE.

If you, or your PA, cannot obtain PPE in this way, or your direct payment is not set up to fund PPE, you should ask for assistance from the local authority or CCG that provides your direct payment who should help you to get the PPE you require.

### What PPE should my PA be using?

The following answers presume that care is taking place in a household setting. If you are receiving PA support in another setting please find the relevant guidance at [COVID-19: infection prevention and control \(IPC\)](#).

PAs should use the guidance from Public Health England (PHE) when determining what PPE is appropriate to wear. See the [guidance for home care](#).

In short, the guidance sets out that:

- if neither yourself nor any members of your household are symptomatic, or are confirmed cases of COVID-19, you PA is not required to use any further PPE than they would normally
- if you or any members of your household are symptomatic or are a confirmed case of COVID-19, but you PA will not be within close proximity providing direct care (for example dropping off shopping), PPE is not required. However proper handwashing is essential
- if you or any members of your household are symptomatic or are a confirmed case of COVID-19, and you PA will be within close proximity providing direct care (for example washing and bathing), the PA requires gloves, a fluid-resistant (Type IIR) surgical mask and an apron for each episode of direct care. Where there is a risk of secretions (for example splashing or exposure to respiratory droplets) workers also require eye protection
- if you or any members of your household are in the 'extremely vulnerable' category undergoing shielding, any visit or care from a PA requires, as a minimum, single-use disposable plastic aprons, surgical mask and gloves. See the [guidance on shielding](#) for more details on who this category includes
- new PPE must be used for each episode of care. It is essential that PPE is stored securely within disposable rubbish bags. These bags should be placed into another bag, tied securely and kept separate from other waste within the room. This should be put aside for at least 72 hours before being put in the usual household waste bin

### What are the safety procedures when using PPE?

PPE is only effective if it is used correctly. PHE has produced a number of resources that explain how PPE can be safely used to minimise the spread of infection. See the [guidance on how to use PPE effectively](#).

### What about family members, will they receive PPE if they are providing care and support?

First, we would encourage all unpaid carers and family members looking after loved ones to continue to follow the general hygiene guidance provided by the government, including washing their hands and cleaning frequently used surfaces.

Where people are taking on care work in a voluntary capacity, and the person being cared for or anyone in their household is symptomatic or has confirmed COVID-19 (or indeed has any other condition that is potentially infectious), or is in the 'shielded' category, then they should also be able to access, and use, PPE.

[Guidance on what PPE is appropriate to use.](#)

## Employment of individuals

### What do I do if my PA(s) becomes sick or is unable to work? How do we both keep safe?

If your PA becomes sick or needs to self-isolate and cannot support you as contracted, you or somebody on your behalf should try to organise alternative arrangements. For example, it may be that another PA you employ is able to take on further work and there is sufficient insurance in place for them to do so, or there may be another PA that is familiar with your care and support plan, that can support you.

If other arrangements cannot be put in place, it will be necessary to put your contingency plan into action. This may mean family members stepping in and supporting you to receive the care and support you need. Local authorities and CCGs should adopt a flexible approach to how the care and support plan is delivered during this period, to ensure that appropriate care and support is possible.

In cases where arrangements cannot be put in place to enable you to receive the necessary care and support, you should contact your local authority or CCG immediately. They will support in developing a temporary plan to ensure your needs are met in the interim, while your PA is recovering. You may wish to also speak to your insurance company, who can offer advice for this scenario.

If your PA is concerned that they may have COVID-19 they should use the [NHS 111 coronavirus service](#). If they need to self-isolate at home, they should not visit and care for you or provide support until it is safe to do so.

They should also follow the [guidance on home care provision](#).

### Can family carers or close friends be paid out of the agreed direct payment if PAs are not available?

We recognise that during this pandemic, short-term emergency changes may be necessary. Families and close friends may need to be called on for support beyond any unpaid care and support they may already be providing. They may be able to provide this support on a voluntary basis for a short period of time, where there is a gap in care and support provision – for example, through staff sickness.

We also recognise that this may not be viable or sustainable in the longer term, if the situation is ongoing. In these circumstances therefore, consideration could be given to paying the family member or close friend from the direct payment.

If you feel it's necessary for family members to become your care and support workers, this should be raised and agreed with the local authority or CCG who make these decisions on a case-by-case basis. Local authorities and CCGs should acknowledge the vulnerable nature of people's needs and should have systems and processes in place to be able to respond as quickly as possible and support you to make arrangements to continue to manage your care. Only in cases of emergency, and where time-critical, you should be able to decide to put a suitable package of care and support in place for a short period, for example 4 weeks, as long as you can justify and evidence this retrospectively.

If you think this may be necessary during the pandemic, you should include this when developing your contingency plan. This should be discussed with your local authority or CCG in advance of use. In deciding whether funding from your existing direct payment should be used for family members and close friends who may need to be called on for support beyond any unpaid care and support they may already be providing, it is important to consider the following:

- routine employment and payroll processes will need to be followed, including adherence to agreed hours and pay rates in the personalised care and support plan
- consider whether there is any additional training and assessment of competence required
- any employment law issues related to the rights of existing paid care workers or PAs
- any additional costs involved if existing employees are entitled to ongoing pay
- if family members take on paid care and support work this could impact on any benefits they receive
- family members are often already providing significant levels of care and support
- consideration should be taken of the impact on family members' health and wellbeing and whether any unreasonable strain is being put on them

- if the family member is also the direct payment recipient and the employer there can be a conflict of interest. In these instances, employment of the family member through an agency or third party may be a solution
- any impact it may have on relationships if the family member is also an employee

## **What is the government's expectation on furloughing of PAs?**

In general, the government expects that the Coronavirus Job Retention Scheme will not be used by many public sector organisations, or individuals who employ people through funding provided to them as a direct payment. This is because the majority of public sector employees are continuing to provide essential public services or contribute to the response to the coronavirus outbreak. The government considers PAs to be an essential worker, and as such, furloughing of this cohort should be minimal.

Where employers receive public funding for staff costs, and that funding is continuing, we therefore expect employers to use that money to continue to pay staff in the usual fashion – and correspondingly not furlough them. This also applies to non-public sector employers who receive public funding for staff costs.

In a small number of cases, for example where it is not possible for your PA to deliver the care and support you require, and where they cannot be redeployed to assist with the coronavirus response, the Coronavirus Job Retention Scheme may be appropriate. You will need to explain why this is the case when processing your claim for furlough.

## **If I think the scheme might be appropriate for me, with my circumstances, what do I do?**

As above, it's generally advisable for individuals to continue their current care arrangements wherever possible, putting in additional precautions in relation to hygiene and infection control.

There are some points that could be considered to help make a decision about what's best for you and your care arrangements. For example:

- if you decide to stop PAs from coming into your home, depending on their employment contract they may be entitled to full pay. They are not automatically entitled to be furloughed under the government's Coronavirus Job Retention Scheme, as the work may still be available. Where family or friends are willing to provide care on a voluntary basis there will be no added costs to the budget during this time. This could be considered for a short period, for example 4 weeks, and then reviewed with your local authority or CCG
- if family or friends are unable to provide care on a voluntary basis and require payment for this, this is an added cost pressure to the budget and would need to be agreed with the individual's local authority or CCG, with the necessary budget adjustments made. This could be considered for a short period, for example 4 weeks, and then reviewed with your local authority or CCG
- in either of the situations above, PAs could be considered for re-deployment to provide voluntary support to other people, for example assisting with personal care, activities of daily living, shopping, getting medications and prescriptions

In all circumstances it's advisable where possible that people speak with their local authority or CCG before making any formal changes.

General support on business questions can also be found in [government FAQs](#) or over the phone, Monday to Friday, from 9am to 6pm on 0300 456 3565.

## **Can my direct payment be used to cover additional expenses incurred by my PA during the pandemic, for example, car park charges if they are unable to travel by public transport?**

In some circumstances, this will be appropriate, and necessary in order for you to receive the care and support you require during the pandemic (if your PA could not reach your home without using their own car, as public transport is reduced). It's vital that you continue to receive the care and support you need to remain at home, avoiding admission to hospital – and we recognise that much of the support is delivered by essential workers like PAs.

You will need to judge the appropriateness and cost-effectiveness of incurring reasonable additional expenses. If in doubt, you should discuss this with your local authority or CCG. As throughout this Q&A, if there's clear rationale that the decision taken will enable you to keep safe and prevent admission to hospital, the decision is time-critical, and you cannot get in touch with your local authority or CCG within the time you have to make that decision, you should feel able to make this decision and provide receipts, evidence and justification retrospectively.

## **Can I re-employ previous PAs who already have the training to support me, in these emergency situations**

Yes, if required (for example through PA illness) then you could contact a previous PA, who may be able to provide



temporary cover, and will be familiar with your needs. This should make up part of your emergency contingency plan. You should consider whether there's any additional training and assessment of competence or upskilling necessary (such as peer learning or e-learning) to get them up to speed as quickly as possible.

### **Given the social distancing measures, will all PAs have official documentation to show they're doing essential work?**

No. Government guidance is clear that anybody is permitted to travel to and from work if it is not possible to work from home. There is not special status for key workers in this respect. This is reiterated in guidance to police officers issued by the National Police Chief's Council and the College of Policing. No documentation is required to prove travel to and from work is necessary.

Where the definition of key workers is relevant is regarding access to other provisions, such as care for children at local schools if they cannot safely be cared for at home. As key workers, PAs are eligible for this support.

If a PA does not feel confident moving around without documentation (even though it is not required) they should ask their employer or direct payment provider for a letter explaining the role they play and how this links to the guidance published on who falls into a key worker category. This letter could also include a phone number of the PAs employer, who can confirm their role if necessary. An example template can be found in [Annex B](#).

### **What financial or employment support will I have?**

If you receive your budget as a direct payment, you should continue to receive the amount as was or has been agreed to by your local authority or CCG. There are a range of steps local authorities and CCGs should take in relation to this. These can be found within the direct payment guidance.

The government have also implemented a range of measures designed to support individuals who have direct payments. These include implementing statutory sick pay (SSP) from day one (including for those employed via a direct payment), bringing forward legislation to allow small and medium-sized businesses to reclaim SSP paid for sickness absence due to COVID-19, and deploying volunteers to support people at home.

See [more information about this package of measures](#)

## **Statutory sick pay (SSP) for PAs**

### **If my PA must self-isolate, will they get paid SSP?**

Yes, if they're eligible (earn over £118 per week). They will be paid from day one rather than the fourth day of their illness. See [more information on the eligibility criteria](#)

### **If my PA says they're self-isolating, do I need them to provide me with a fit note from the doctor or NHS 111?**

If your PA says they're self-isolating, they will not be able to go to their doctor and are being asked not to call NHS 111 unless they really need to. You do not need evidence from your PA to be able to claim SSP for them. If they are self-isolating and then become sick, they should let you know (by telephone not in person).

### **If my PA is self-isolating and I need to pay SSP, will I get it refunded?**

Yes. SSP will be paid out through payroll and claimed back via HMRC. Your payroll provider will deal with this for you. This refund will be for up to 2 weeks per employee.

## **Monitoring requirements**

### **Will my budget continue to be reviewed?**

Yes, although during the pandemic, reviewing may not occur as frequently as it has previously. Local authorities and CCGs will take a proportionate approach to reviewing how direct payments have been spent. Records should be kept as normal for when the next review takes place.

If you're concerned that the amount allocated to you within your direct payment is not enough, or is too much, you should get in touch directly with your local authority or CCG, who have duties to ensure the funding allocated is appropriate to meet your assessed need.

## Am I expected to continue to evidence my spend?

Yes. As is normal practice, you should keep hold of any receipts or evidence that show how the direct payment has been used. These will be necessary within the next discussion with your CCG or local authority.

## Self-funders

### What support do I have if I pay for my own care?

If you are using your own money to employ aPA you should follow the general guidance given here and in the [direct payment guidance](#) around contingency planning, and health and safety.

Should you find yourself in a position where these arrangements are unable to support you due to the wider impact of COVID-19 and you have no alternative arrangements available to you, you should contact your local authority to discuss alternative care and support arrangements.

## Keeping safe

### What should employers do if their PA refuses to isolate, when they have suspected coronavirus? Where can employers go to for advice?

If your PA is showing symptoms of COVID-19, they should immediately self-isolate as per the guidance issued by government. Under no circumstances should anybody showing symptoms continue to provide face-to-face care.

If they (or anybody else you meet) refuse to isolate, you should immediately speak to your local authority or CCG, who should support you to enforce this.

### What are the procedures for infection control in the house?

If those employed through a budget undertake cleaning duties, then they should use the usual household products, such as detergents and bleach. These products are very effective at getting rid of viruses on surfaces. Frequently touched surfaces should be cleaned regularly.

Personal waste (for example used tissues, continence pads and other items soiled with bodily fluids) and disposable cleaning cloths should be stored securely within disposable rubbish bags. These bags should then be placed into another bag, tied securely and kept separate from other waste within the room. This should be put aside for at least 72 hours before being put in the usual household waste bin for disposal as normal.

Dirty laundry should not be shaken before washing. This minimises the possibility of dispersing the virus through the air. Items should then be washed as appropriate, in accordance with the manufacturer's instructions. All dirty laundry can be washed in the same load. If you do not have a washing machine, wait a further 72 hours after the 7-day isolation period (for individual isolation) or a 14-day isolation period (for households) has ended. The laundry can then be taken to a public launderette. Items heavily soiled with body fluids, for example vomit or diarrhoea, or items that cannot be washed, should be disposed of, with your consent.

See [further guidance on laundry and waste disposal](#).

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