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From managed to supported quarantine: the current system in the UK & key questions for the future

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Summary

The UK introduced a mandatory hotel quarantine system for most groups returning from 'red list' countries in February 2021, with Scotland applying this to travellers from outside the Common Travel area.

Costs are borne by the traveller but are substantial. A fee waiver should be introduced for those on low incomes returning for essential purposes, including family reasons.

Appropriate standards of accommodation are not in place across the system. There are questions about training and support for those working in quarantine hotels, about cleanliness and food hygiene and about infection risks including from poor ventilation. It is unclear whether or how the system is being evaluated.

Little thought has been given to the wellbeing of incoming travellers required to quarantine in these facilities. If the system continues to be needed, as is likely, efforts should be made to move from a focus on management and enforcement, to engagement and support.

Introduction

Unlike many other countries, the UK has been slow to recognise the role of international travel in seeding and exacerbating the Covid-19 crisis. While some other nations took quick action in 2020 to limit travel to all but returning nationals and introduce quarantine in supervised facilities such as hotels, the first significant attempts to do so here were in February 2021. There is evidence from genomics studies that international travel during the summer of 2020 played a role in rising infections in the autumn. Research in Scotland found that circulating lineages of SARS-Cov-2 had been reduced to low levels by June 2020[1]. Some UK lineages of the virus persisted but most lineages responsible for the second wave of infections were imported into Scotland from July to September, mostly from Europe and other parts of the UK. Similar findings emerged from an analysis of genomic data in Wales, where the researchers concluded that travel into the UK from overseas during the summer played a role in establishing the second wave[2].

Although the introduction of new restrictions in the autumn and winter of 2020/21 meant international travel was not permitted except for essential purposes, the list of essential purposes was extensive. A voluntary quarantine system was introduced for certain countries, and travellers returning from these locations were advised to self-isolate at home. The countries this applied to have changed over time, and even then there were key groups (elite athletes, journalists, 'high value' business travellers) who were exempt[3] from quarantining at home.

Only with rising concern about new SARS-Cov-2 variants overseas was a different approach to quarantine introduced by the UK government from 15th February 2021 for arrivals from 'red list' countries, initially in Africa and Latin America[4]. Referred to by the UK government as 'managed quarantine', this involves incoming travellers from these countries being required to isolate in hotels rather than at home. Scotland introduced a more comprehensive system at the same time, applying to incoming travellers from almost all countries outside of the UK[5].

Managed quarantine places a substantial social and economic burden on individuals. It is also unclear how long such a system will need to be in place. This raises some key questions. How is the

system organised at the moment? Who bears the cost and what happens to those who can't afford to pay? Are standards sufficient? What is the longer term strategy?

Current managed quarantine system

The current managed quarantine system applies to travellers returning to England, Wales or Northern Ireland from one of 43 countries (as of 20 May 2021) currently on the red list. This includes those travelling directly from those countries or passing through a red list country in the past ten days. A quarantine package must be pre-booked and paid for in advance by the passenger. Returning travellers are also expected to take two Covid-19 tests on the second and eighth day after arrival. Children under 12 are not required to take these tests. If either of these tests are positive, there is a requirement to stay in the hotel until at least 10 days after the positive test result. There are exemptions from the system relating to occupation and specific roles[6].

Costs of managed quarantine and testing

The cost of managed quarantine is intended to cover accommodation, meals, security and also transport from the airport. Since the scheme was introduced the cost is £1,750 for one adult, £650 for an additional adult or teenager and £325 per child aged 5-12. There are no additional costs for children under the age of 5.

There is an alternative payment scheme but this simply defers payment rather than reduces it. Only those on income-related benefits are eligible for deferred payment. They can apply to pay the cost back in instalments over the period of a year. When Scotland introduced their system in February (which initially required hotel quarantine for all incoming travellers outside of the Common Travel Area) it was stated that a managed isolation welfare fund would be provided for people who could not afford the cost, defined as those on qualifying benefits, those not on benefits but unable to pay, and those on family reunion visas arriving to join someone with refugee status. However, this does not appear to have been set up to date and in response to a question in the Scottish parliament the transport minister indicated that changes needed to be made to the UK booking system in order for a fee waiver to be possible[7].

When the system was introduced in Scotland concerns were raised about children travelling to visit a parent (for example when one parent lives in Scotland and the other overseas) who had to quarantine, even if they were travelling unaccompanied. Following concern from the children's commissioner for Scotland an exemption was added in March so that these children can now isolate at home with their families.In contrast, children arriving in England from a red list country unaccompanied are still expected to stay in managed quarantine but the parent or guardian resident in the UK is expected to stay with their child in managed quarantine (and bear the cost) on arrival.

Some employers will cover managed quarantine costs and Universities are also examining this issue in order to support students returning from overseas. In Scotland, the Coronavirus Discretionary Fund provided by the Scottish government to Universities can be used to cover the cost of quarantine for international or returning domestic students if they would experience financial hardship via having to cover the cost[8].

A further concern is with the cost of testing for any travellers required to provide proof of a negative test once they return to the UK. These need to be booked and paid for through government approved testing supplier of PCR tests. For those required to quarantine at home for 10 days (those returning from amber list countries) a negative test is required on or before day two after return to the UK and on or after day eight to confirm the end of quarantine. The cost can be over £300 for two

tests. The system is unreliable, with incidents of tests not being delivered or results not being returned[9].

Inequalities and fee waivers

Requiring travellers to cover the cost of managed quarantine can be justified. It serves as a deterrent to travel and a stronger disincentive than having to quarantine at home on return from overseas. It also means that public funds are not used, funding needed for other initiatives and services, particularly at the current time. These arguments explain why countries that initially covered the cost of managed quarantine earlier in the pandemic now expect travellers to pay[10].

However, a blanket requirement for payment will affect particular groups who cannot afford it. While key occupations are exempt, there are others who will have legitimate reasons to travel but will bear a heavy financial burden for doing so. Affected groups include those on lower incomes who travelled before the country they were travelling from was put on the 'red list'. Waivers should be considered for these groups, as was the case in Australia and New Zealand who set up waiver systems for those who planned or booked to return to either country shortly after their scheme was established. Others on lower incomes who are now affected include separated families and those travelling to attend a funeral or visit a family member who is seriously ill. New Zealand operates a waiver system for people in these categories[11]. Looking ahead, a waiver system should be considered. This would meet the needs of those unduly disadvantaged by the scheme, particularly the longer it remains in place.

A further inequality concerns medical exemption from managed hotel quarantine. Cases are beginning to be reported of the Department of Health denying exemptions to people with complex psychological needs for whom managed hotel quarantine is severely damaging to their mental health. While it is understandable that the bar for exemption should be high, it is well established that quarantine can damage mental health[12]. It is, therefore, important that those with clear medical exemption should be allowed to quarantine at home. Some have appealed to the High Court, but this option is not likely to be accessible to all who are denied medical exemptions.

Standards of managed quarantine

In addition to costs, questions have been raised about appropriate standards for managed quarantine in the UK. There were teething problems in the first few days after introduction reported in the press, with arriving passengers not always aware that they would need to stay in a hotel for 10 days or pay for the programme, and problems with arrival procedures and transport to hotels [13]. Even once the system was established there have been concerns raised about whether standards are adequate. Travellers have reported problems with the cleanliness of rooms and sanitation, and with the quality of food, with incidents of limited or out of date meals being provided and meals being left in corridors for long periods[14,15]. Some hotels have poor air quality systems and it is not always possible for windows in hotel rooms to be opened[16]. These types of problems in themselves pose an infection risk, either from food or for airborne SARS-CoV-2 transmission, with the latter implicated in cases linked to quarantine hotels in Australia[17].

The Institute for Government has published a policy paper with key questions for government regarding the standards of hotel quarantine and other aspects of the system[18]. It asks whether an appropriately skilled workforce is available to run hotel quarantine, whether contracts with security providers and hotels are being appropriately managed and involve advice from experts in infection

prevention and control, whether the government has a longer term plan for citizens and residents stuck overseas and what the strategy is to manage any outbreaks associated with quarantine. These questions need to be addressed and transparent information made available to relevant agencies and the public. It is also worth asking what plans are in place to review and evaluate the managed quarantine system and whether lessons are being learned from international experience.

Engagement with travellers and support for isolation

In addition to the financial costs of managed quarantine and the current absence of a waiver scheme, questions also need to be asked about whether the welfare and needs of incoming travellers are being adequately considered. There is limited evidence of adequate engagement with or support for individuals in the UK government's response. While basic information about sources of support (for those who smoke or use drugs or alcohol, for example) is available in managed quarantine guidance, this is limited to signposting to relevant websites and helplines[19]. This fails to recognise not only the challenges people will face during ten days isolation but also the likely circumstances of these individuals who are likely to be returning to the UK for family reasons that could be distressing or challenging such as separated families, to attend a funeral, to care for a loved one or to visit someone who is in hospital and/or near the end of life.

A recent qualitative study examined the experiences of twenty six people who returned to the UK from Wuhan in January and February 2020 and were required to isolate in either a hospital or conference centre[20]. This was a different system to managed quarantine in that the costs were covered and the intention was to support those returning to the UK. But the findings are relevant and, as the authors point out, could inform efforts to improve and strengthen the current system. These include the importance of:

- Communication prior to isolation about why it is necessary, that it will protect others and what the process will involve
- Regular open and honest communication during isolation and advice on protective behaviours (regular calls from trained advisers could achieve this)
- Avoiding punitive messages around enforcement with isolation which could reduce adherence
- Encourage and facilitate development of a shared identity among those in isolation (group calls or access to virtual communication with others in a quarantine facility, for example)
- Make sure that essential supplies are available and of sufficient standard/quality and communication with others outside (via adequate internet etc) is facilitated
- Provide good information about processes for leaving quarantine to help people prepare

Conclusion

Some form of managed (or ideally 'supported') quarantine system is likely to continue to be needed in the UK to protect against the importation of Covid-19 cases from overseas. The current selective approach, only requiring it for 'red list' countries, is insufficient. But in developing a more comprehensive approach and maintaining it as long as necessary, issues to with the organisation, cost and standards of the system need to be considered. The needs of those who access managed quarantine should be at the heart of how it is delivered if it is to achieve its aims as part of the public health response to the pandemic.

References

1. Lycett, S, Hughes, J, McHugh, M et al (2021) Epidemic waves of Covid-19 in Scotland: a genomic perspective on the impact of the introduction and relaxation of lockdown on SARS-Cov-2, *MedRxiv* preprint, doi:10.1101/2021.01.08.20248677

2. Connor, T, Attwood, S, Bull, M et al (2020) Welsh SARS-Cov-2 Genomic insights, October 2020. https://gov.wales/genomic-analysis-covid-19-lineages-wales

3. Murphy, S (2020) High value business travellers to be exempt from quarantine in England, *The Guardian*, https://www.theguardian.com/world/2020/dec/03/high-value-business-travellers-to-be-exempt-from-quarantine-in-england

4. Rimmer, A (2021) Covid-19: Travellers to UK from 'red list' countries will pay £1750 for 10 day quarantine. *British Medical Journal*; 373 doi: 10.1136/bmj.n412

5. Scottish Government (2021) Coronavirus (Covid-19) international travel and managed isolation (quarantine) https://www.gov.scot/publications/coronavirus-covid-19-international-travel-quarantine/

6. UK Government (2021) Coronavirus (Covid-19): jobs that quality for travel exemptions https://www.gov.uk/government/publications/coronavirus-covid-19-travellers-exempt-from-uk-border-rules/coronavirus-covid-19-travellers-exempt-from-uk-border-rules

7. Scottish Parliament (2021) Chamber and committees, Questions ref S5W-35314 https://www.parliament.scot/chamber-and-committees/written-questions-and-answers/question?ref=S5W-35314

8. Scottish government (2021) Coronavirus: international travel and managed isolation (quarantine), sectoral exemptions. https://www.gov.scot/publications/coronavirus-covid-19-international-travel-quarantine/pages/sectoral-exemptions/

9. Brignall, M (2021) Covid test chaos for travellers quarantined with no kit and no results, *The Guardian*, May 29th 2021. https://www.theguardian.com/money/2021/may/29/covid-test-travellers-quarantined-kit-results

10. Wilkinson, D and Pugh, J (2021) Is it ethical to quarantine people in hotel rooms? *The Conversation*, https://theconversation.com/is-it-ethical-to-quarantine-people-in-hotel-rooms-155080

11. New Zealand Government (2021) Charges for managed isolation, https://www.miq.govt.nz/being-in-managed-isolation/charges-for-managed-isolation/

12. Brooks, S, Webster, R, Smith, L, Woodland, L, Wesseley, S, Greenberg, N, Rubin, G (2020) The psychological impact of quarantine and how to reduce it: rapid review of the evidence, *The Lancet*, 395, 10227, P912-920. doi:10.1016/S0140-6736(20)30460-8

13. Davies, C (2021) Quarantine hotel rooms are 'like a prison', BBC News February 17th 2021. https://www.bbc.co.uk/news/business-56095362

14. Gelder, S (2021) 'Not worth it' - Guests leave scathing trip advisor reviews for quarantine hotels, *Huffington Post*, February 23rd 2021. https://www.huffingtonpost.co.uk/entry/hotel-quarantine-reviews-trip-advisor_uk_6034e51ac5b66dfc102168e4

15. Baxter, L and Walker, W (2021) Woman in hotel quarantine fed small, out of date food and treated like a criminal, *The Mirror*. https://www.mirror.co.uk/news/uk-news/woman-hotel-quarantine-fed-small-23988192

16. Davies, R and Elgot, R (2021) Air systems in some UK quarantine hotels 'risk spreading Covid' *The Guardian*, February 17th 2021. https://www.theguardian.com/politics/2021/feb/17/air-systems-in-some-uk-quarantine-hotels-risk-spreading-covid

17. Knaus, C and Davey, M (2021) Health officials beg for hotel quarantine to be upgraded byt Paul Kelly insists it is fit for purpose, *The Guardian*, April 27th 2021. https://www.theguardian.com/australia-news/2021/apr/27/health-officials-beg-australian-government-to-upgrade-hotel-quarantine-amid-covid-leaks

18. Nickson, S (2021) Coronavirus hotel quarantine: key questions for government, Institute for Government,
https://www.instituteforgovernment.org.uk/sites/default/files/publications/hotel-quarantine.pdf

19. DHSC (2021) Managed quarantine: what to expect,
https://www.gov.uk/government/publications/managed-quarantine-what-to-expect/managed-quarantine-what-to-expect

20. Carter, H, Weston, D, Greenbert, N, Oliver, 1, Robin, C, Rubin, G, Wessley, S, Amlot, R (2021) Experiences of supported isolation in returning travellers during the early Covid-19 response: an interview study, *MedRXiv* preprint, doi:10.1101/2021.02.17.21251735

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