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Compliance with the test and protect isolation period: barriers and incentives to compliance

**Proposal from ScotCen
Social Research**

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ScotCen is an integral part of NatCen Social Research, the UK's largest independent social research institute and an educational charity. Where we refer specifically to ScotCen, this is generally in the context of the research team based at our offices in central Edinburgh (though currently working from home). We use NatCen to denote the organisation as a whole and our shared resources or capability.

Section A. Understanding the requirement (10%)

A1. Understanding of the brief & rationale for undertaking the research

Policy context

Both the Test, Isolate, Support strategy¹ and the Test and Protect programme² are designed, along with the FACTS guidelines³, to support the Scottish Government's aims of disrupting the transmission of COVID-19 and keeping the population safe. Such public health interventions are well-established strategies for interrupting community transmission of infectious disease. Each of these measures is in place in order to suppress the virus, along with any subsequent ill health and loss of life, ultimately enabling the easing of restrictions and a return to a more normal way of life.

The success of the Test and Protect programme is not solely reliant on deployment of the significant resources and infrastructure that are needed but also the willing participation and adherence of those who either test positive for coronavirus, have been in close contact with someone who has and/or who are returning from travel outside of the UK. In order to comply with the isolation requirements, individuals need to understand what is required and be in a position to comply when asked to do so, with a clear understanding of the support that is available to them. Importantly, they must also be convinced of the validity of the restrictions placed on them so that they will follow them in the face of the challenges that self-isolation presents. They should also feel that they are fully supported to do so in ways that matter to them and their individual circumstances.

Through both the NHS Inform² and Ready Scotland⁴ websites, as well as frequent reiteration of the FACTS guidance in Government communications (such as regular televised joint ministerial and public health briefings), a wealth of information and support is available for those asked to isolate, including a step-by-step Test and Protect guide. In recognition of the impact of self-isolation on individuals and households, resources are available to support those asked to self-isolate, particularly in the event that assistance from friends, family and/or neighbours is not possible. The Ready Scotland website⁴ provides contact details for a range of organisations available to support or advise on a range of physical, mental, emotional and financial needs, as well as the free National Assistance Helpline number, a service that is available five days a week to offer support in accessing essentials such as food or medicine. To reduce the financial impact of self-isolation and the potential for income-driven non-compliance, the Self-Isolation Support Grant was introduced to provide a financial payment of £500 to individuals on low incomes who are unemployed or unable to work as a result of the requirement to self-isolate (excluding those for whom this is a result of international travel). This grant can be applied for again if the individual is asked to isolate more than once⁵.

While positive developments such as the rollout of vaccinations offer hope for the future, the Test, Isolate, Support strategy and the Test & Protect programme remain crucial as Scotland continues to navigate the COVID-19 pandemic. Therefore, understanding current levels of compliance as well as incentives and barriers to compliance is important in order to support individuals in helping to suppress the virus, disrupt transmission and keep others safe.

¹ Scottish Government (2020) <https://www.gov.scot/publications/coronavirus-covid-19-test-trace-isolate-support/>

² NHS Inform (2020) <https://www.nhsinform.scot/campaigns/test-and-protect>

³ Face coverings, Avoid crowded places, Clean hands regularly, Two metre distance, Self-isolate – see Scottish Government (2020) FACTS poster available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2020/08/coronavirus-covid-19-facts-poster-translations/documents/english/english/govscot%3Adocument/20-21%2B-%2BCoronavirus%2B-%2BTranslations%2B-%2BFACTS%2BPoster%2B-%2BEnglish%2B-%2B9%2BJuly%2B2020.pdf>

⁴ Ready Scotland - see <https://ready.scot/coronavirus/get-help>

⁵ Scottish Government. (2020). *Coronavirus (COVID-19): Test and Protect: Support grants*. Available at: <https://www.gov.scot/publications/coronavirus-covid-19-test-and-protect/pages/support-grants/>

Understanding of policy & practice issues

The success of the Test, Isolate, Support strategy is dependent on the facilitation of a high volume of tests, not only due to the transmission potential of the virus but also as many of the symptoms, which include a new continuous cough, fever and/or a loss of taste or smell, are common across a range of illnesses. The nature of the pandemic meant that the Scottish Government had to respond quickly and adapt their approach as the situation developed. This included the rollout of a significant expansion of testing in November 2020⁶ with tests for all hospital admissions, increased frequency of testing for health and social care staff, care home visitor testing and the mass testing of university students prior to the Christmas break. This expansion built upon work previously undertaken to deliver increased testing capacity through the establishment of regional hub laboratories and lateral flow tests.

The Test and Protect contact tracing programme, delivered by NHS Scotland, is the means by which the Test, Trace, Isolate strategy is put into practice. A 24/7 automated phone service and online testing guide allow members of the public to assess their symptoms and guides them through accessing a test should this be required. Those who test positive for COVID-19 are then contacted by telephone (in some cases initially by text) in order to identify and collect the details of contacts who should isolate as a result of being in close contact with them for 15 minutes or more at a distance of less than 2 metres. Additional identification of individuals who need to isolate is also, where this has been downloaded, facilitated by the Protect Scotland App⁷ - a smartphone app which monitors proximity to other phone users and flags where someone has been in close contact with an index case, including those who may not be identified via contract tracing (e.g. when in contact with someone who does not have their contact details).

However, the provision of testing is only one of the factors that determines the success of community transmission interventions such as Test and Protect. Adherence to the isolation guidance has been described as being “essential to preventing a resurgence of the pandemic”⁸. But such adherence is not without its challenges. Individuals who are awaiting a test result, those who have tested positive, their close contacts and those returning from international travel are required to remain at home at all times for a period of anywhere between 24 hours and ten days. Any members of their household that subsequently develop symptoms are also asked to self-isolate and seek a test. It is possible that individuals may need to self-isolate on more than one occasion and for more than one reason.

While it has been reported that a high proportion of adults in the UK indicate a willingness to self-isolate if asked and not go out at all (85% - 86% in November/December 2020)⁹, there is evidence to suggest that compliance in reality is likely to be low - estimated to be between 18% and 39%⁸ and potentially as low as 11% of those asked to isolate as a close contact rather than an index case¹⁰.

Evidence from previous research undertaken in Scotland and elsewhere in the UK^{8,9,10,11} has highlighted a number of factors that may lead to partial or non-compliance with self-isolation (classified using the COM-B model¹⁰) including:

⁶ Scottish Government (2020) - see <https://www.gov.scot/news/testing-expansion-update/>

⁷ See <https://protect.scot/>

⁸ Scientific Pandemic Influenza Group on Behaviours (SPI-B) (2020). *The impact of financial and other targeted support on rates of self-isolation or quarantine [SPI-B: 16 September 2020]*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/925133/S0759_SPI-B_The_impact_of_financial_and_other_targeted_support_on_rates_of_self-isolation_or_quarantine.pdf

⁹ Scottish Government (2021). *Public attitudes to Coronavirus: January update*. Available at: <https://www.gov.scot/publications/public-attitudes-coronavirus-january-update/>

¹⁰ See Smith, L., Potts, H., Amlot, R., Fear, N., Michie, S and Rubin, J. (2020). *Adherence to the test, trace and isolate system: results from a time series of 21 nationally representative surveys in the UK (the COVID-19 Rapid Survey of Adherence to Interventions and Responses [CORSAIR] study)*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/928684/S0732_CORSAIR_-_Adherence_to_the_test_trace_and_isolate_system.pdf

¹¹ Scottish Government (2020). *Barriers to adherence with COVID-19 restrictions: Findings from qualitative research with individuals in Scotland*. Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2021/01/barriers-adherence-covid-19-restrictions/documents/barriers-adherence-covid-19-restrictions-findings-qualitative-research-individuals-scotland/barriers-adherence-covid-19-restrictions-findings-qualitative-research-individuals-scotland/govscot%3Adocument/barriers-adherence-covid-19-restrictions-findings-qualitative-research-individuals-scotland.pdf>

- *Capability* - difficulty keeping track of current restrictions and guidelines and perception of the acceptability of reducing compliance behaviours as symptoms improve.
- *Opportunity* – lost/uncertain incomes, schooling, childcare and caring responsibilities (especially if the sole carer for someone else), affording and/or accessing food/essential supplies (especially if no friends/family nearby), unexpected costs (e.g. food deliveries, dog walkers etc.), non-coronavirus related medical needs and difficulties isolating from others in the same household.
- *Motivation* - general fatigue with the pandemic and the required restrictions, confusion over what is required, discouragement in the perceived non-compliance of others, the stress of waiting for a test result and/or potentially having to isolate for longer, using their own judgement to adapt the guidance as they see fit, reluctance to isolate again having isolated previously and not developing symptoms.

In addition, the CORSAIRS study¹⁰ identified several groups where lower levels of compliance may be more likely including men, younger people, those with dependent children in the household, those in lower socio-economic groups, those experiencing greater financial hardship and those who are less well informed regarding the guidance for self-isolation.

Research rationale and objectives

To help ensure the success of the Test and Protect programme, it is important to collect high quality, robust data among a sufficiently large sample of those asked to self-isolate in order to understand in greater depth current attitudes towards, understanding and levels of compliance, as well as the incentives and barriers to doing so. Given the rate at which the pandemic has and is likely to evolve, it is furthermore vital that up-to-date data is collected which can be understood in the context of changes that take place immediately prior to and during its collection. This project aims to do this, particularly in relation to the three key themes of:

1. *Knowledge* – do people know what is expected of them, what is and is not appropriate in terms of behaviour, how the guidance differs depending on the reason for self-isolation (symptoms/positive testing, close contact, international travel) and what support is available?
2. *Attitudes* – what is the reality of the isolation experience for individuals and what are the factors that influence their compliance/non-compliance (including partial)?
3. *Practice* – how do isolation behaviours differ, if at all, by the length of isolation period (the first 24 hours, 24 hours up to day seven, the eighth to tenth days), between demographic sub-groups and between types of cases (index, close contact and international travel)? What support is known about and/or being accessed and what can be done to ensure that guidance is adhered to?

While information collected to date has shed some light on experiences of self-isolation, as well as incentives and barriers to compliance, these studies have typically included relatively small samples of those with experience of isolation. A larger sample size of those required to self-isolate in Scotland will provide detail of the overall picture whilst permitting analysis of differences in attitudes, knowledge and behaviours by factors such as demographic groupings (gender, age, working status, family status, geographical spread, socio-economic group/deprivation level) and by the three distinct isolation groups: index cases, contact cases and those returning from international travel. Such analysis is most insightful when combined with in-depth interviewing allowing further exploration of the issues at stake, particularly in relation to the attitudes, perceptions, knowledge and motivations that influence levels of self-isolation compliance.

The combined strength of a large survey of those asked to self-isolate along with in-depth qualitative exploration will allow the Scottish Government and its partners to gain a better understanding of common and distinct experiences, incentives and barriers to compliance, as well

how support can be targeted in the best possible way for specific groups. This knowledge will inform the development of policies and practices to improve the Test and Protect system and support high levels of compliance that will ultimately ensure that the population of Scotland can be protected.

Underpinning all of this is the absolute requirement for confidentiality. Those who take part in the survey must be assured of the confidential nature of their participation, particularly those who are/have been partially or fully non-compliant. The research must be seen as a means by which to understand experiences and challenges in order to better support those asked to self-isolate and not as a means of checking up on them. As noted in section B1, maximising response amongst all participants – including those who have not fully complied with isolation requirements – will be important to ensure the validity and value of the data.

Our experience

ScotCen has been designing and delivering applied social research projects in Scotland utilising both qualitative and quantitative methods since 1998. We are wholly committed to high quality, independent research that delivers real public benefit. We will also work with you to ensure that the research has the widest possible impact, delivering value for money not only in terms of initial outputs but longer-term influence on policy, practice and wider debate. We bring expertise in survey design and delivery alongside considerable experience of the development and conduct of qualitative data collection and are experienced in delivering high quality data to tight timescales to meet urgent policy needs.

In addition, our portfolio of work includes projects examining key public health issues including smoking, diet, obesity, mental health and, in the last year, the COVID-19 pandemic. Perhaps of particular relevance here is our work exploring public attitudes to the COVID-19 vaccine, obesity, alcohol and dementia and exploring knowledge, awareness and opinions of public health responses to these issues. Thus, we are able to apply a range of knowledge and learning from related and relevant public health research to this project.

Many of our projects – spanning both quantitative and qualitative methods - have been adapted to be suitable for online and/or telephone interviewing. For example, the Scottish Health Survey, routinely undertaken as an interviewer-led, in home, face-to-face data collection was adapted and delivered using telephone interviewers, maintaining a probability sampling approach¹². Similarly, planned face-to-face qualitative in-depth interviews with young people accessing housing services in West Dunbartonshire were adapted and delivered using a mix of video software (e.g. Zoom) and telephone. This demonstrates our ability to respond to the challenges presented by the COVID-19 pandemic whilst maintaining delivery of robust, high quality and ethically sound research.

We recognise the importance of engaging participants who may be harder to reach or less willing to participate in research. Such experience is especially relevant for this study where those who have been partially or fully non-compliant with self-isolation guidance are a particular subgroup of interest but may be more reluctant to participate. As part of the Age 12 sweep of the **Growing Up in Scotland study (GUS)**, targeted design and messaging was used on survey invites to better engage participants in groups less likely to respond. We also conducted a number of qualitative in-depth interviews with young people between the ages of 11 and 24, adults engaged in problematic gambling behaviour and adults with mental health issues to measure the **impact of gambling on children, young people and vulnerable groups** in 2020, with a follow-up survey undertaken by post, online or telephone with young people aged 11-24.

We have a highly experienced team with the capacity to implement the research in the timeline proposed. Where relevant or necessary, the core team would also draw on the expertise of their colleagues in NatCen who have also delivered a wide range of relevant studies. A few examples of recent relevant projects are provided below, and we can provide more examples on request.

¹² McLean, J., Rutherford, L. and Wilson, V. (eds) (2021) *The Scottish Health Survey 2020 edition: telephone survey – Vol.1 – Main report* Available at: <https://www.gov.scot/publications/scottish-health-survey-telephone-survey-august-september-2020-main-report/>

- **The Optimum study: Public Attitudes to COVID-19 Vaccination (ongoing):** Led by the University of Stirling with NatCen/ScotCen staff as co-investigators, this ESRC grant-funded study is a mixed method study exploring attitudes to the COVID-19 vaccines in order to develop an information campaign that will be trusted by the public in order and which will encourage uptake. An initial online survey (currently at over 4,500 responses following its launch in mid-January 2021) is now being followed by in-depth qualitative interviews with a focus on respondents across the UK who are unsure or intend not to take the vaccine.
- **NHS COVID-19 IoW app survey (2020):** NatCen was commissioned to undertake a survey of residents of the Isle of Wight as part of an evaluation of the Track, Test and Trace app being trialled there at the time. The survey used a census design approach with all households contacted by letter to invite up to two adults per household to take part in an online survey, with a final sample of over 18,000 respondents. The survey generated insight regarding awareness, usage, reasons for not downloading the app, the user experience, levels of trust in its confidentiality and perceptions of the data captured in the app, as well as activities undertaken in the last 7 days and presence of COVID-19 symptoms.
- **Isle of Wight residents and NHS Volunteer follow up surveys (2020):** Following the successful completion of the Isle of Wight app survey (see above), follow-up online surveys with two respondent groups (3,500 respondents who took part in the initial residents survey and 705 NHS Volunteers) were commissioned to examine attitudes towards and usage of the newly updated app.
- **Scottish Health Survey Telephone Survey (2020):** With face-to-face fieldwork paused in early 2020, a shorter telephone version of the Scottish Health Survey was undertaken in August and September 2020. This involved 1,920 adults who opted into a telephone interview following an initial invitation by letter. This survey provided a snapshot of various measures related to the health of the adult population in Scotland including general health, mental wellbeing, social capital and loneliness, diet, obesity and food insecurity, physical activity, smoking, alcohol consumption and dental health, with breakdowns (where sample sizes allowed) by those who had and had not been advised to shield.
- **Youth Homelessness in West Dunbartonshire (ongoing):** ScotCen was commissioned by Action for Children and West Dunbartonshire Council to undertake research to understand the scope and scale of youth homelessness in West Dunbartonshire and to capture learning from approaches being piloted to address youth homelessness. The research involves qualitative research with young people aged 16-24 who are at risk of, or have experienced, homelessness.
- **Use of Health and Disability Benefits (2020):** NatCen/ScotCen were commissioned by the Department of Work and Pensions to conduct a study examining how recipients of health and disability benefits use these benefits to meet their health-related needs. The study involved 120 face-to-face interviews with health and disability benefit recipients across the UK, including Scotland.
- **Other COVID-19 related studies undertaken by NatCen include:**
 - **Monitoring socioeconomic and mental health trajectories through the COVID-19 pandemic (ongoing):** Data from the longitudinal Understanding Society study collected before and during the pandemic is being analysed as part of an ESRC-funded project examining the groups hit hardest by the immediate and longer-term financial and mental health impacts of the COVID-19 outbreak.
 - **The ELSA COVID-19 substudy (ongoing):** This study was undertaken to investigate the effects of the COVID-19 crisis on those aged 50 and over in England, with data collected primarily via online surveying (with some telephone interviews) from just over 7,000 respondents asking about experiences of the

pandemic including the financial consequences, the impact on those advised to shield and the experiences of those with multimorbidity, volunteers and carers.

- **The Wellcome Monitor (ongoing):** This online panel study of awareness, engagement with and attitudes towards science and health research has been augmented to include questions related to experiences during the COVID-19 pandemic, views on restrictions that are in place and levels of trust in the information provided.
- **The National Diet and Nutrition Survey follow up (ongoing):** An online survey of respondents from the past four years of the survey to explore the impact of the COVID-19 pandemic on diet, nutrition and physical activity.
- **The Study of Early Education and Development (SEED, ongoing):** This research has been commissioned to investigate the impacts of COVID-19 and lockdown on children and families in England including challenges related to school closures, home schooling, family welfare and the mental health of children.

Section B. Research design and methodology (20%)

B1. Proposed methodology

To address research questions 1-3 and potentially question 8, a survey that builds on questions developed by King's College London and subsequently developed further by the Department of Health and Social Care (DHSC), is required. As well as providing SAGE with robust data on compliance levels and a typology of compliance among those in the Test and Protect system, we agree that a survey questionnaire is the most appropriate means of measuring the levels of knowledge and understanding of isolation requirements. We are also of the view that there is scope to address research question 8 via the survey, should space permit, but would recommend also considering addressing research question 7 both quantitatively and qualitatively. Given the budget, timescale and large eligible sample, we also agree that conducting the survey using a predominantly web-based approach is sensible.

For answering research questions 4-8, we agree a qualitative methodology is most appropriate. To answer these research questions fully we propose conducting in-depth telephone or video interviews (e.g. via MS Teams) with a purposive sample of those who have responded to waves 1 and 2 of our survey.

We recognise that as a result of the ongoing coronavirus pandemic, those who have been contacted by Test and Protect may be facing additional personal and professional pressures. We agree therefore, that in-depth interviews conducted by telephone or videocall is the most appropriate and effective methodology for this project as this approach will minimise the burden of participation on respondents. Due to the pandemic, it is not possible to meet participants face-to-face, either in their own homes or in another location.

Our approach to the survey and qualitative elements are discussed in more detail in the following sections. Key milestones, dependencies and feasibility issues are discussed throughout this section and covered in more detail in section D1 on project management.

Survey development, fieldwork and analysis

Sampling

Population of interest: The ITT requests that we aim to achieve responses from a minimum of 1,000 individuals per month, with the possibility of a higher target. Based on current infection levels and contract tracing information, there are roughly 9-10,000 cases each week, with 15-18,000 distinct contacts. There are also currently around 3,000 travellers each week contacted by the National Contact Tracing Centre who have been asked to isolate. There are four sub-groups of particular interest: index cases, household contacts, non-household contacts and international travellers. Current information suggests that international travellers will be the smallest of these groups. If the infection rate continues to fall, we may expect numbers in each group to reduce before fieldwork commences in March/April. Nevertheless, there will remain more than enough to provide the data required.

[Redacted text block]

[Redacted text block]

[Redacted text block]

[Redacted text block]

¹³ Note that as the international traveller group is significantly smaller than each of the other groups, international travellers must be over-sampled to return the same number of surveys as other groups. This selection bias must then be adjusted for in the weighting to ensure the views of international travellers are not disproportionate when whole sample views are considered. Such adjustment reduces the sample efficiency and the 'effective sample size' meaning it may be more efficient to select a smaller sample/aim for a lower target number of surveys from international travellers in the first place.

¹⁴ The percentage of email addresses that are invalid due to errors, bounce backs or being blocked typically range from around 3-4% when supplied directly by the participant to as much as 12% on some client-supplied samples. The invalid rate for SMS numbers can similarly range between 4% and 13% depending on the source and quality of the sample.

[REDACTED]

[REDACTED]

This is just one possible approach to stratification and there are further sampling options which may be considered depending on the priorities and resources of Scottish Government and what it is capable to do with the Test and Protect system. Our survey statistician is available to provide advice and support with sample design. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

However, as the sample will not be managed by ScotCen, this approach would be reliant on someone in the relevant agency/team having the capacity to undertake these tasks. If this is the case, we are able to provide statistical advice to support the sampling and weighting.

Sampling summary: We would be happy to discuss the advantages and disadvantages of different sampling approaches with you in more detail. If you are unable to undertake the random sampling and stratification tasks discussed above, then we would suggest, at a minimum, that equal amounts of individuals in each sub-group are issued. This would mitigate against having significantly disproportionate responses from any particular group which may lead to biased results – e.g. if we assume that compliance and/or views on isolation are likely to vary between each of the key sub-groups.

Contact strategy

Our understanding of the requirement is that contact with potential participants in the Test and Protect system will be made via SMS and/or email and, as the contractor, we would *not* be issuing these invitations. SMS and email delivery of invitations is fast and participation can be instant

hence removing barriers that other contact methods typically have. We agree that this is an appropriate method of recruitment given the project's planned duration and budget. Mitigations around concerns about likely opt-in rates and the quality of the contact information are addressed in the sections on 'sampling' and 'maximising response'.

As Britain's largest independent social research agency, delivering surveys with SMS and email invitations is now common practice in our work. Recent examples of similar approaches to recruitment we have managed include: OPTIMUM: a mixed methods study to develop strategies for optimising general public uptake of a COVID-19 vaccine (OPTIMUM), the National Travel Survey Panel and our NatCen Panel. Our significant experience also extends to delivering surveys where we, as the contractor, are not responsible for the issuing of invitations, most recently for the NHS COVID-19 Volunteers Survey administered by NHS Volunteer Responders (other examples include a Survey of Bus Drivers for Transport for London and a Survey of Private Landlords). So, we are confident we can work effectively with the relevant body to successfully deliver the survey irrespective of how hands-on our role is in the recruitment process.

The content of the invitations is of paramount importance if the study is to be a success. While not responsible for issuing the invitations themselves, we are happy to use our extensive experience and evidence base to draft invitation content for your consideration. We discuss the importance of invitation content further below in the section on 'maximising response'.

Invitations need to include a means of accessing the online questionnaire. [REDACTED]

In the fieldwork section, below, we discuss options around when to begin making contact with potential participants in each wave, along with a suggested fieldwork duration and potential issue dates for reminder messages, if used. The option to complete the survey over the phone is likely to play an important part in the recruitment process and we discuss this in more detail in the below sections on mode and maximising response. In Section E on ethics, we outline the vitally important role the privacy notice and our approach to securing informed consent plays in our approach to recruitment.

The questionnaire

We note the availability of questions developed by King's College London and subsequently developed further by the Department of Health and Social Care (DHSC). In our experience of designing and delivering surveys, it is almost always preferable to use existing robust measures than to craft new ones from scratch, and this is especially true when time and/or resources are limited. Since the proposed survey questions appear to stem from robust sources, have evidence of being piloted and have a proven track record of working in the large-scale survey format, they seem like a sensible foundation from which to build a questionnaire that will work in the Scottish context at the time of data collection. Most survey work we conduct involves taking pre-existing survey questions and ensuring they are up to date and relevant before translating them into an online/telephone survey instrument that functions. So we are very confident that we can produce a tool that will deliver the high quality data you require. Recent examples of handling and delivering

pre-existing questionnaires include the ONS Infection Study (for which we are a delivery partner) and large-scale population surveys in Scotland, including the Scottish Crime and Justice Survey.

At a minimum, we would recommend that pre-existing questions are reviewed with a view to ensuring they will remain relevant and understood in Scotland at the time of data collection. The review would involve working collaboratively with you to ensure that any terminology, definitions or references to guidance are up to date in line with current public health advice (e.g. update any questions that refer to a 14 day isolation period). ScotCen are accustomed to carrying out such reviews, for example on the Scottish Health Survey 2020 Telephone survey and Behaviour in Scottish Schools Survey 2021. A further strength is our ability to draw upon our dedicated 'Questionnaire Design and Testing Hub' to ensure that any updates required are done in such a way that maintains the ability to compare with other data sources, as much as is feasible.

We note the requirement to draft questions for the Scottish context including questions for international travellers. The timing is short yet the requirement for high-quality robust data relies on well-crafted survey questions. We will draw on our wealth of experience and expertise in both designing survey questions ourselves, and training others to do so, to ensure any new and updated questions are fit for purpose.

. Recent and highly relevant survey development work we will be drawing on will include the OPTIMUM COVID-19 vaccination study and the survey of older people's experience of shielding and isolation during the COVID-19 pandemic (part of the English Longitudinal Study of Ageing). We have also recently drafted new and updated questions on, and relating to, COVID-19 for the Scottish Health Survey, Growing Up in Scotland study, British Social Attitudes and Understanding Society, among others.

Many of the large-scale surveys we conduct for public bodies include a question on re-contact for future research (e.g. Scottish Health Survey, Scottish Crime and Justice Survey) and we have been involved in cognitively testing such questions in the past so we are happy to draw on our expertise to recommend question wording.

Below we have included a table of what we view as some of the relevant questions/topics worthy of consideration for inclusion, and how these align to research objectives. It is unlikely, however, that all these topics could be covered in a 15 minute survey of closed questions, which is what has been costed for as indicated by the specification. We agree that an average interview length of around 15 minutes is desirable and strikes a good balance between reasonable content coverage and participant burden and are happy to work with you to plan content and structure and meet the desired length.

Table B.1 Potential questionnaire topic areas

Topic area	Research objective
[Redacted]	[Redacted]
[Redacted]	[Redacted]

[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
Impact & experiences Financial impact(s), Practical impact(s), Emotional/mental impact(s), Any other impacts inc. on others in household, Support received/accessed, Support aware of, Additional support needed/couldn't access	Practice Attitudes Knowledge
Knowledge of self-isolation guidance True/false statements on what the guidance asks you to do, Willingness to provide details of close contacts if were asked (non-index cases) and why	Knowledge Attitudes
General Covid attitudes Trust in information from various organisations inc. Scottish Government, Views on restrictions Effectiveness of particular behaviours inc. efficacy of self-isolation, Belief in need for/effectiveness of test and trace, Level of concern about Covid/perceived risk generally (self/others), Beliefs about spreading Covid (if not covered earlier), Attitudes re the general compliance of others, Whether know anyone who has had Covid	Knowledge Attitudes
Additional respondent demographic data: Highest educational qualification, Employment details and/or postcode for SIMD profiling, Ethnicity	Demographic sub-group analysis
Consent for follow up research	In-depth qualitative exploration, particularly among those partially or fully non-compliant

As soon as is feasible in the life of the project, we would request a copy of the existing questionnaire content from the King's College London and DHSC surveys. We would translate this into a working copy of the questionnaire (in MS Word) that we would take responsibility for maintaining up to, and including, the point at which the Scottish Government lead signs it off.

The research team, in collaboration with survey computing colleagues, would take the final signed off MS Word version of the questionnaire and script it for the platform being used for both online and telephone interviewing.

[REDACTED]

Survey mode

The invitation to tender proposed online data collection with a telephone option as online participation may not suit everyone.

[REDACTED]

[REDACTED]

It is vital that the study takes the necessary steps to allow such groups to participate so their compliance levels can be captured along with their knowledge, understanding and experiences of isolation.

The 'online first' approach is relatively low-risk and has been tried and tested on other studies among a variety of populations (for example, OPTIMUM COVID-19 Vaccination study, NHS Test & Trace App Survey (Isle of Wight), BikeLife, TFL Survey of London Bus Drivers, British Social Attitudes 2020

[REDACTED]

[REDACTED]

[REDACTED]

Telephone: We estimate that up to 5% of the participating sample could opt for telephone interviewing, although this somewhat depends on the point in the recruitment process that it is introduced as an option.

[REDACTED]

[REDACTED]

Those opting for telephone completion would be taken through the questionnaire by NatGen's TU. Our TU interviewers are dedicated experts in carrying out surveys with named and unnamed samples drawn from a variety of sources. This study would build on their recent experience of

surveying the public on topics on, and related to, COVID-19 including the NHS Test and Trace App study in the Isle of Wight and the OPTIMUM COVID-19 Vaccination study.

Fieldwork

We agree that conducting the survey over several waves is important if the study is to capture accurate data on compliance and to ensure that it is not unduly affected by external events (for example, school holidays, Easter bank holiday weekend etc). We propose delivering three waves of fieldwork,

Each wave would include a fresh sample of people from the Test and Protect system. More details on identifying the timeframe a person needs to be on the system to be eligible for inclusion in a wave can be found in the earlier section on sampling.

Below is a suggested fieldwork timetable that draws on our experience of delivering web-first surveys via SMS/Email invitations. Note that this is just one possible option for delivering the three waves of fieldwork and, in the absence of information about external capability and capacity, includes some assumptions on what may be feasible. Other approaches are likely to be possible and we would be happy to work with you to develop an approach that is feasible to all.

Drawing on evidence from the many surveys of this type that we have carried out, each wave we have scheduled invitations and reminders to be issued on the days of the week, times of day we expect them to have the greatest impact with potential participants.

Table B.2 Key survey fieldwork dates

Key points in fieldwork period	Wave 1	Wave 2	Wave 3
Test and Protect sample to be included (i.e. on the system between these dates)			
Review response to previous wave to inform sample size assumptions*			
Decision on final issued sample size made*			
Questionnaire content signed off			
Unique IDs delivered to body sending invites			
SMS and email invitations issued (fieldwork start state)	Fri 19th March	Fri 23rd April	Fri 21st May

Email invitation issued (to those in sample with SMS and email address available) (sent 4pm)**	[REDACTED]	[REDACTED]	[REDACTED]
Reminder 1 issued (if applicable) (sent am)***	[REDACTED]	[REDACTED]	[REDACTED]
Reminder 2 issued (if applicable)***	[REDACTED]	[REDACTED]	[REDACTED]
Fieldwork end date	Wed 31st March	Wed 5th May	Wed 2nd June
Submit wave report	[REDACTED]	[REDACTED]	[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Maximising response

NatCen has a strong track record of achieving high levels of participation in our online and telephone surveys, both with the general population at large, with hard to reach groups, and on salient and potentially sensitive subjects. In our section on sampling we agree with your assessment that predicting the likely opt-in on this study is challenging. Recent experience with surveys on, or related to, COVID-19 suggest the topic is highly salient among the general population, but it is less clear how well those on the Test and Protect system will respond.

To gain a breadth of understanding it is critical that the survey captures as wide a range of circumstances and views as is possible, including, crucially, from index cases, household contacts, non-household contacts and international travellers. It is reasonable to assume willingness to participate will vary across different sub-groups in the system. Index cases, and to a lesser extent household contacts, may be more willing than non-household contacts and international travellers to take part given that for the latter groups contact with Test and Protect was not initiated by them. It is not unreasonable to assume that those adhering to the guidance around isolation may feel more comfortable about taking part in a survey on the topic than those who are knowingly not following the guidance and whom may have some reservations about disclosing this in the survey. In addition to this there is the additional challenge of trying to encourage participation among those groups typically hard to reach in social survey research e.g. young men and those in more deprived areas.

Many of these considerations can be, to some extent, mitigated against both, in advance, and during fieldwork. Below we discuss actions that are likely to encourage participation and help significantly towards achieving 1000 interviews per wave.

[REDACTED]

[Redacted]

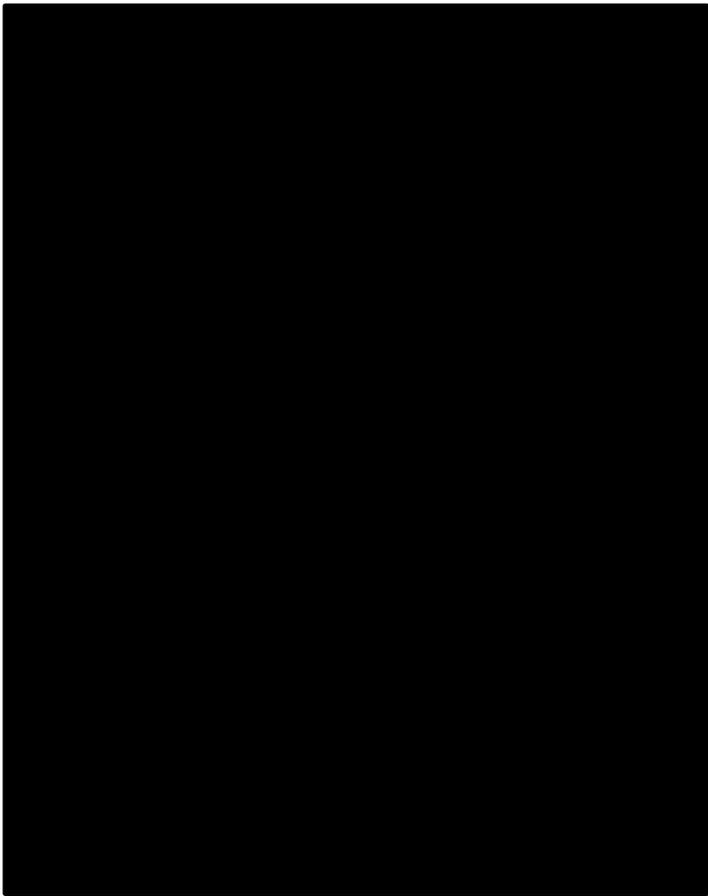
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[Redacted]

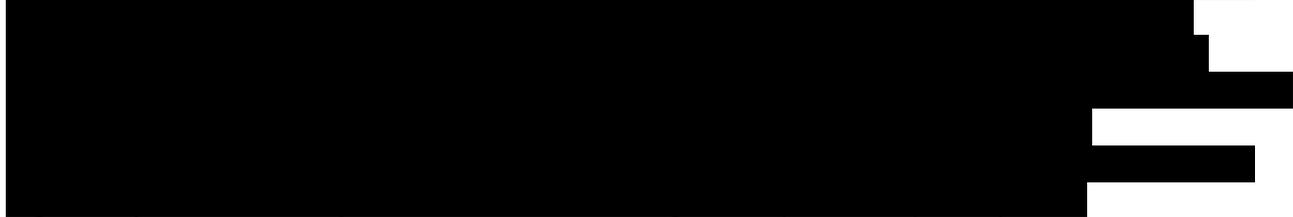
Reminders: It is unclear what scope, if any, there is for reminders to be used and where the responsibility and costs for issuing them would lie. In our experience, reminders are a very cost efficient way of encouraging participation and can often be very effective at picking up people with different characteristics to those that participate on the back of an invitation alone.

[Redacted]

15 'What influences people's responses to public health messages for managing risks and preventing infectious diseases? A rapid systematic review of the evidence and recommendations'

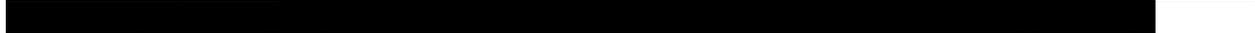


Incentivisation: Financial incentives can be an effective means of encouraging people to take part in social surveys, especially when targeted at those groups considered hard to reach in surveys generally or in the topic of interest in particular.



Analysis

Our data manager will conduct data cleaning and checking for data quality and provide the research team with a dataset for analysis at each wave of fieldwork which will include a flag for mode of completion.



A successful isolation policy requires high levels of compliance to the requirement to isolate for the required period of time. Existing evidence indicates that while intention to isolate is relatively high, actual adherence, according to self-reports, is low. Analysis will provide robust evidence of compliance rates in Scotland, including an investigation how rates and types of compliance (e.g. fully compliant, partially compliant, fully non-compliant) vary across the key groups of interest (index cases, contact cases and international travellers).

Recent literature suggests that compliance to isolate is lower among men, younger age groups, those with children in the household, those of lower socio-economic status, those in financial hardship and key workers. Quantitative evidence, along with recent qualitative research by the Scottish Government, highlighted that challenges around isolation include the presence of caring responsibilities, financial stability, having young children and key worker employment. These findings warrant further investigation in relation to compliance and we draw on these findings and

others that have emerged from existing body of evidence on adherence to inform our analytical plan.

Our team includes experienced survey data analysts who will use SPSS to undertake the analysis.

Our graphically illustrated analysis and reporting will bring to life the variety of experiences and behaviours across the different groups of people with experience of isolating. We will conduct descriptive analysis using frequencies and cross-tabulations to bring out the key metrics. If appropriate, our analysis will incorporate tests of statistical testing to identify where differences between groups are statistically significant.

Qualitative development, fieldwork and analysis

Sampling

The final sampling strategy will be agreed with the Scottish Government either at the inception meeting or in discussions after the first waves of the survey have been conducted.

Table B.3 demonstrates a possible purposive sampling strategy which could be adopted during this study to capture a diverse range of those contacted by the Test and Protect system who have also completed a survey.

Table B.3 Potential qualitative sampling frame for those contacted by Test and Protect

TOTAL			
COVID +ve			
Index case			
Contact: Household case			
Contact: Non - household case			
<i>International Traveller</i>			

Other	[Redacted]
-------	------------

Whatever sampling strategy is agreed with the Scottish Government, it will be important to sample on a number of additional criteria to ensure the following groups are included in the study:

[Redacted]

Clearly, we have outlined a large number of potential respondent categories of interest. However, it should also be noted that there is major overlap between a number of these categories, and as such it should be possible to sample across these areas. Nevertheless, given the number of potential sampling criteria of interest as well as the importance of including those who have complied or not with self-isolation measures, it must be acknowledged that some potential categories of interest may only be represented by two or three interviewees.

[Redacted]

[Redacted]

Sampling and recruitment from the survey

ScotCen has a wealth of experience of conducting follow-up qualitative studies from our own or other surveys which ask respondents if they give permission to be recontacted, including our current public attitudes to COVID-19 vaccination study (NatCen panel survey followed by 30 qualitative interviews).

As has been mentioned in the survey methodology above, survey respondents would be asked if they are willing to take part in an in-depth interview. [REDACTED]

ScotCen would draw the sample on the basis of the sampling criteria outlined above, once agreement had been reached with the Scottish Government. [REDACTED]

It is likely that more than sufficient numbers will respond from survey waves 1 and 2 in order to fulfil the agreed qualitative sampling criteria. However, it is possible that a very small number of potential interviewees in specific sub-groups of interest will be less willing to take part. We propose targeting these potential interviewees in wave 3 of the survey, though given that the likely size of the sampling frame is going to be large, we do not think that it is a major risk.

Data collection

Once the interviewee has responded to ScotCen and indicated willingness to participate, a phone/video interview will be arranged at a time of their choosing, including evenings and weekends. This approach should enable all those who are interested to take part. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] All interviews will be conducted by members of our core research team who are well trained and highly experienced in conducting qualitative interviews on sensitive topics with a range of groups, including vulnerable adults. The interviewers would ask for verbal consent from the interviewees and record this as part of the interview.

[REDACTED]

[REDACTED]

[REDACTED] The interview topic guides will be developed by ScotCen, in consultation with the client. We propose that the interview topic guide should address issues such as:

-
- Background: personal/familial experience of COVID-19, general impact of the pandemic, COVID-19 vaccination, etc.
 - Test and Protect system: views of first contact from tracer, nature of contact with tracer, reasons for self-isolation (i.e. index case, household or non-household case) advice/support given, perceived acceptability of advice, etc.
 - Self-isolation: how easy or difficult is compliance, which measures are easiest to comply with and which are most difficult. [REDACTED]
 - Barriers and facilitators: what factors helped with complying with isolation measures and which mitigated against it, what support (official and/or informal) was accessed, perceptions of usefulness of official and other support systems, influence of family, friends and wider community, etc.
 - Future changes: views of ways in which Test and Protect and support systems may be improved in the future, other modifications that may improve compliance.

Data analysis

By its nature, qualitative data tends to be voluminous, complex and diverse. We believe that qualitative analysis, therefore, requires a robust and systematic approach which can be documented and demonstrated to an external audience. Over the years, NatCen has been at the forefront of attempts to develop such an approach for use in applied social research settings. The strength of NatCen's approach to analysis is in our commitment to going beyond thematic analysis to a case-and-theme-based approach.

[REDACTED]

[REDACTED]



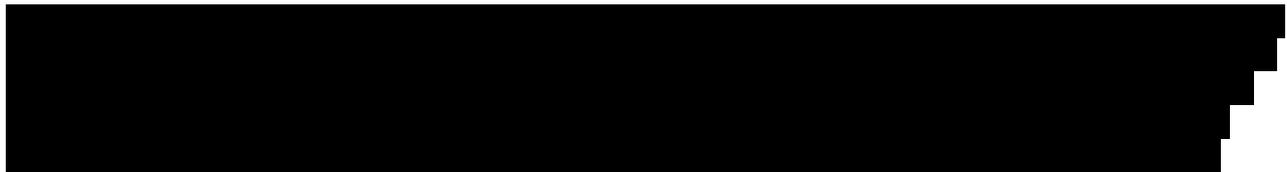
Outputs and deliverables

We can confirm that our team has the capacity and capability to produce the required research outputs. From an updated project plan after the inception meeting, right through to delivery of a final report and data, we will use our experience and the expertise of the research team to produce timely outputs that help Scottish Government and others to fill the evidence gap on compliance and shed light on knowledge and understanding of isolation and the support on offer among those in the Test and Protect system.

When delivering interim and final reports, our aim will be to bring the results of the survey and qualitative research together in a complimentary fashion. In the main, the results of the qualitative research will follow on from and be used to augment and explain key elements of the survey results. If Scottish Government would prefer a more integrated approach, with qualitative findings and discussion combined throughout the chapters to expand on survey results, we would be pleased to follow this approach.

We have a great deal of experience of conducting mixed method studies of this kind and of generating concise, focused and readable outputs of varying lengths and formats for research, policy and ministerial audiences. Experience ranges from detailed National Statistics branded reports (e.g. Scottish Health Survey) to interim slide packs for the Scottish Government on emerging findings from the Scottish Social Attitudes survey.

Drafting summary research findings is commonplace on the studies we carry out so we are confident we can distil study findings into an engaging set of key findings. We are confident that we will be able to convey the key messages concisely and effectively in writing and as part of presentations. Our overall aim with the main report and associated research findings summary would be to distil the key findings, explain their significance and point to clear findings which will aid Scottish Government's thinking. Findings will be presented in a manner which will help Scottish Government establish whether those with experience of isolation feel the support they received was sufficient and will enable you to identify and explore options for providing effective future support. Presentations of our findings to steering groups, advisory groups and technical working groups is something the research team frequently do on our research studies and we are happy to work with the project lead to ensure any presentations are tailored to audiences appropriately.



[REDACTED]

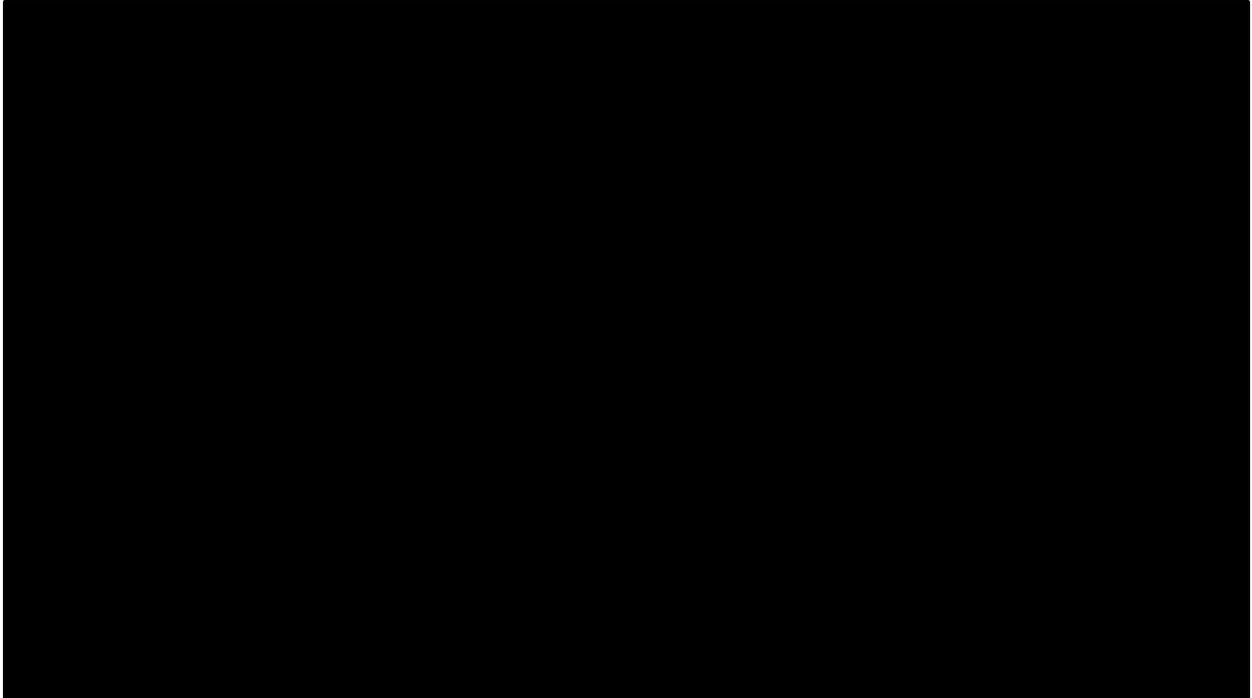


Section C. Staff, skills & task allocation

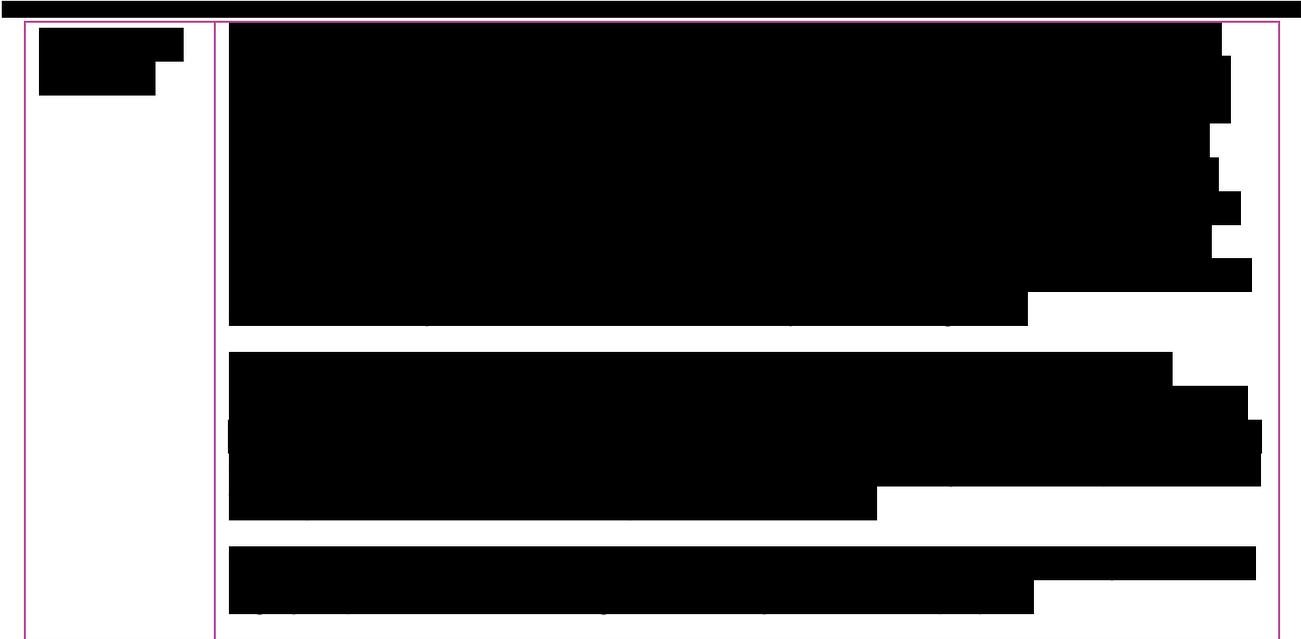
C1. Staff

We have carefully selected a team that brings extensive experience of designing and delivering surveys and qualitative research to tight timescales, expertise in COVID-related research and a strong track record of delivery for Scottish Government. The project has concurrent survey and qualitative data collection and a requirement for rapid turnaround and presentation of emerging findings. Our team is sufficiently large, bringing together two teams of researchers with relevant experience and capacity, to ensure the smooth, parallel delivery of the survey and qualitative data collection over the planned timescales. We have no conflicts of interest.

The organogram below outlines our team structure and the table that follows provides details of team roles, responsibilities and suitability for the project along with the estimated time each team member will spend on it.



[Redacted]	[Redacted]
[Redacted]	[Redacted]



C2. Quality assurance

Quality Director

As Quality Director, [REDACTED] will have a designated quality assurance role from the outset of the project. His role will include overall responsibility for all aspects of ScotCen's work and supervision of the team. [REDACTED] will ensure quality throughout the project via formal review of all processes, instruments and deliverables at key stages to monitor progress. Each review will reference ScotCen's/NatCen's well developed and ISO 20252 certified quality management procedures - covering all aspects of the design, fieldwork, qualitative data processing, analysis and reporting stages - as well as the standards and requirements set out in the brief and subsequently in meetings with Scottish Government. Our procedures for this contract have been informed by our extensive experience of designing, delivering and reporting on large, mixed method projects incorporating the collection and processing of quantitative and qualitative data. Reviews will include: signing off the sampling approach, questionnaires, topic guides and analysis plans; checking output, presentations and reports; and oversight of team meetings.

Delivering concise, accessible, relevant and timely reports

At ScotCen Social Research we have a strong focus on the quality of our reports, ensuring that they are engaging, clear, accessible to the audience they are written for, accurate and, of course, delivered to time. We have extensive experience of communicating research findings to a range of audiences, including policy-makers, practitioners and the general public as well as researchers. We will work closely with you to fully understand the terms of reference and expected audience for the project report and ensure it meets the requirement. We also have experience of working with clients to deliver reports on time, often to tight timescales utilising dedicated timetables which make clear tasks, dependencies and timings for all parties involved.

All research outputs will be agreed with Scottish Government in advance. [REDACTED]

[REDACTED] We are experienced in complying with Scottish Government requirements including the style guide and templates, with adherence to these forming part of the QA process. To ensure outputs are high quality, provide robust evidence with a clear explanation of approach, are concise and accessible for a range of audiences we have:

- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

The work of research staff is supervised via regular team meetings and quality assurance of project outputs and deliverables. [REDACTED]

[REDACTED]

Ensuring analysis is free from bias

As a trusted, not-for-profit, independent research organisation with responsibility for numerous high profile, National Statistics datasets and reports, ScotCen and NatCen place great emphasis on ensuring all aspects of our research, including analysis, is free from bias. ScotCen's whole approach to the project, from sampling and recruitment to final reporting, has been designed to minimise bias. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] Interpretation of data is a routine feature of project delivery for all ScotCen researchers and forms part of their core training.

Quality of communication skills

All members of ScotCen staff are given an extensive training programme in all aspects of the research process, including line, team and time management, communication skills, reporting, oral presentations and research dissemination. [REDACTED]

[REDACTED] Written reports routinely form part of the deliverables from our projects alongside oral presentations. Given our team's wealth of experience in producing research outputs and giving oral presentations and debriefs to a range of audiences, encompassing both professional and public groups, ScotCen is very well placed to deliver the reports and presentations required for this project.

Section D. Project management and risk assessment (20%)

D1. Project management (60%)

This is a large, mixed method project requiring the design and co-ordination of survey data collection, followed by extensive qualitative fieldwork. It also has a fixed timetable within which data collection must be achieved. As such it requires close communication with Scottish Government and relevant partners, careful planning, robust project management and a responsive and flexible approach.

ScotCen is part of Britain's leading independent social research organisation, widely known for delivering some of the most important projects in the UK. We therefore have extensive experience of managing projects to time and budget. We prioritise:

- **A strong focus on understanding your project objectives** so our outputs are tailored to those working to improve the understanding of Scottish Government and other key stakeholders of the views, needs and experiences of people asked to self-isolate as a result of COVID-19.
- **Building a strong collaborative relationship** with you, striving to provide high quality evidence and advice to inform your decision-making.
- **Regular communications** including frequent provision of project updates, regular fieldwork progress figures and data along with team meetings via telephone or video conference.
- **Effective planning, resourcing, timetabling and reviewing project progress** [REDACTED]
- **Robust approach to risk assessment and management** reviewed regularly at meetings with you.

Project Timetable

We can confirm that the team outlined in Section C have the technical skills and capacity to deliver a high-quality project that meets your research questions according to the timescales provided below. We have included a suggested project timetable (Table D1 below) based on the information presented in the invitation to tender. It has been developed on the assumption that all the relevant approvals, governance, commissioning and recruitment processes are in place as and when required. Any delay to these key steps is likely to have an impact on what we have proposed here. We are happy to review and refine the timetable, with you, in detail as soon as the contract has been awarded.

Both ScotCen and the Scottish Government have an important role to play in ensuring that project milestones are met. [REDACTED]

To launch survey fieldwork on time it is critical that we receive Scottish Government sign off when required to allow sufficient time to set up and test the survey instrument. Any condensation of this period of the project increases the risk of errors which may ultimately affect data quality. [REDACTED]

[Redacted text block]

[Redacted text block]

Table X: Project Plan

	Milestone	Deadline
[Redacted]	[Redacted]	[Redacted]

[REDACTED]

Where changes in staffing are unavoidable (for example if named staff leave NatGen) we have a large pool of suitably qualified staff within our teams to identify replacements at the same level. Any replacements will be agreed with Scottish Government.

D2. Risk assessment (40%)

Our approach to risk management builds on [REDACTED]

[REDACTED] The table below sets our view of the main risks facing the project. NatCen has a detailed and regularly reviewed Business Continuity Plan which can be provided on request.

Risk	Likelihood of occurring	Level of impact if occurs	Mitigations
General business continuity planning & IT			
Key staff ill/unavailable over contract period	Medium	Low	[REDACTED]
Technological failure or a threat to business continuity	Low	Medium	[REDACTED]
Data or system compromised (e.g. virus or hacking)	Low	High	[REDACTED]
Loss of data	Low	Medium	[REDACTED]
Delays to project timetable			

Delays in project timetable including delays in recruitment and Scottish Government agreement of data sharing process with partners	Medium	Medium	[REDACTED]
Delays gaining ethical approval for the study	Low	Medium	[REDACTED]
Data security			
Complaint relating to data disclosure or handling of data	Low	High	[REDACTED]
Information security and data protection principles are not adhered to	Low	High	[REDACTED]
Data collection			

Low response rate	Medium to High	High	[Redacted]
Key groups missing/under-represented in survey and qual interviews	Medium to High	Medium	[Redacted]
The risk of harm or distress to participants during survey data collection and associated reputational damage	Low	High	[Redacted]
Research design and primary data collection methods not robust	Low	High	[Redacted]

Participant concerns following invitation to the surveys, including about the purpose or content of interviews	Medium	Medium	
Respondent harm or distress as a result of participation in the research	Low	High	
Complaint resulting from researcher or interviewer behaviour	Low	Low to medium	
Harm to member of research team during fieldwork	Low	High	
Project deliverables			
Delays to project outputs	Low	Medium	

Qualitative analytical and interpretative framework is not robust and is biased	Low	Medium	[REDACTED]
Analysis does not provide the information that Scottish Government requires	Low	High	[REDACTED]
Outputs are of poor quality and/or do not deliver the information that the Scottish Government and partners require	Low	Medium	[REDACTED]

Section E. Ethical sensitivities and ethical scrutiny (15%)

E1. Ethical sensitivities (80%)

NatCen designs and conducts research to high ethical standards, ensuring appropriate research governance is in place for every project. We have clear frameworks to ensure that the ethical issues within a research project are identified and addressed. NatCen adheres to the Social Research Association (SRA) Ethical Guidelines (updated February 2021), and any other ethical requirements governing our clients and collaborators where these are not in conflict with the SRA Guidelines.

Valid informed consent

Participation in social research must be with fully informed consent. It is therefore necessary to make clear to participating individuals exactly what is expected of them, what implications their participation has, and that they can opt out at any stage if they wish.

[Redacted text block]

[Redacted text block]

[Redacted text block]

Accessibility and minimising burden on participants

We will make every effort to remove any barriers to participating in the research.

We recognise that potential participants may face a number of barriers in participating in a telephone survey or interview, including burdens placed on them from working from home, home schooling and working patterns. Therefore, qualitative interviews will take place at times and dates convenient for the participants.

Avoidance of harm

We recognise that discussing compliance to Covid-19 isolation guidelines may be sensitive and discussing reasons for non-compliance or the impact of compliance could potentially be distressing for some participants. We will take a number of steps to minimise the potential for distress in the questionnaire and interviews and avoid causing harm. These steps include:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

[REDACTED]

[REDACTED]

[REDACTED]

Safeguarding and disclosure

NatCen has a robust disclosure procedure for dealing with instances where a participant discloses serious harm or potential harm to themselves or identifiable others (copy of policy available upon request).

[REDACTED]

Safety of researchers involved in the fieldwork

The health and safety of all staff is important to NatCen and therefore a process to support researchers in fieldwork is implemented for all research projects.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Equality considerations

NatCen is committed to conducting social research that has the power to make lives better. This includes ongoing work to actively promote equality, diversity and inclusion methodologically and substantively through our research work. We also work to improve the accessibility of our research, in terms of reaching marginalised groups and in terms of our methods. NatCen also conducts data collection outside of working hours and at weekends to widen access to our studies. During the coronavirus pandemic, conducting interviews and group discussions via online videoconferencing software has become increasingly common on our projects. However, on these projects we also offer the option on one-to-one telephone interviews to avoid excluding people with limited or no access to technology.

Data security and confidentiality

Data collection and management, analysis, storage and destruction will be conducted by NatCen staff in alignment with our Quality Management System and Information Security processes. NatCen already undertakes a range of work for the Scottish Government. NatCen is compliant with the relevant data protection regulations, has documented information security procedures and is accredited to ISO 27001 Information Security Management. Compliance is monitored through reporting of issues, regular audits and intensive ISP surveillance visits every six months.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

NatCen operates to extremely high standards in respect of participant confidentiality and anonymity and has rigorous data security and protection procedures to protect against direct or indirect disclosure of identity which will be built into all stages of the research. Any information

provided by respondents will be kept strictly confidential and not divulged to anyone (including staff at Scottish Government) in any form such that the responses made by any individual can be identified. NatCen has clear protocols for handling of data which are regularly reviewed and updated.

Protection of the interpretation of the research findings

The rigorous approach adopted by ScotCen throughout the project, from the initial ethical application and review through to final reporting and dissemination, will ensure that a high quality, independent research report is produced. We have discussed in previous sections how we would aim to address potential biases that might arise during sampling, recruitment, analysis and reporting. As members of a wider advisory group, including the client, will have had opportunity to comment on emerging findings and drafts, any areas of potential contention should be discussed fully in the report.

E2. Ethical scrutiny (20%)

Ethical scrutiny of this project would be provided by NatCen's Research Ethics Committee (REC), which involves senior NatCen staff and is consistent with the requirements of the ESRC and GSR Professional Guidance. Within NatCen's ethical procedure, projects undergo either a Stage 1 expedited or a Stage 2 full review by the REC (a Stage 2 review involves a REC meeting). This procedure helps ensure that all research undertaken by NatCen is ethically sound and meets the ethical standards of government and other funders. It provides reassurance to potential research participants and, where relevant, to gatekeepers. The system is designed to ensure that potential delays to projects are minimised. An application is submitted shortly before the fortnightly meeting, and a decision given then or shortly afterwards. We envisage that a Stage 2 review is required for this research and have allowed for this in the timetable. As a member of a NatCen REC, **Lisa Rutherford** (Project Director) has a sound understanding of the key elements of the study that will be scrutinised by the REC. This knowledge will be applied to the application hence ensuring timely completion of this element of the study.

Section F. Data Security (10%)

NatCen has an established information security management system (ISMS) which includes an Information Security Policy that is reviewed by the Information Security Management Group and signed by the Chief Executive (attached separately). This policy is enforced and monitored as part of our ongoing certification to ISO 27001.

The Quality and Information Security Management Group, which comprises the Head of Information Security, SIRO/DPO, Director of IT and other relevant members of staff, is responsible for security policy development and maintenance.

NatCen has a central risk register which is reviewed periodically by the Quality and Information Security Management Group and relevant risk owners. The process is audited as part of our ISO 27001 commitment.

Please describe where data will be processed and how it will be secured, including any encryption controls and also including the measures put in place with sub-contractors.

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Please describe how data will be secured during transmission between the Scottish Government, the Contractor and sub-contractors, including any encryption controls and use of usb memory sticks.

[Redacted]

[Redacted]

Please describe the measures in place to protect computers, software, middleware and infrastructure used to process data against loss or compromise from cyber-attack and crime, including the use of firewalls, user accounts and passwords, secure storage.

Watchguard Firewalls protect all external gateways to the NatCen network. All our perimeter firewalls have IPS enabled, and updates are downloaded automatically as they become available.

[REDACTED]

[REDACTED]

[REDACTED]

Please describe the measure in place to ensure that only authorised individuals have access to only that data required for them to perform their role, and thus reduce the risk of information being lost or stolen.

[REDACTED]

Please describe the measures taken to ensure that data processed digitally is protected from malware, virus and untrusted software.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Please describe the processes in place to ensure that computers, software, middleware and infrastructure, upon which the service relies, are patched with updates/hotfixes to ensure they are not vulnerable to known security issues.

[REDACTED]

Please describe what training is given to employees, contractors and sub-contractors in regard to information security and data protection, including lone and home workers.

[REDACTED]

[Redacted]

[Redacted]

[Redacted]

Please describe how back-ups of the data will be taken and protected. Also, how data will be restored in the event of an incident, to ensure business continuity and continuity of the service offered.

Please indicate if such Disaster Recovery procedures are tested, how often, and the date of the last test.

[Redacted]

[Redacted]

[Redacted]

Tenderers should provide details of any Information Assurance certification they possess, or standards they conform to (e.g. ISO 27001, ISO 22301, ISO/IEC 20000, Cyber Essentials/Cyber Essentials Plus or their equivalents).

NatCen is certified to ISO 27001 and Cyber Essentials Plus (certificates are attached separately)

[Redacted]

Section X. Fair work practices

X1. Fair work practices

NatCen has a union which is open to all members of staff to join. Regular sessions in various formats are also held between staff and Senior Management to share information and collect feedback. The organisation also conducts a regular staff survey.

NatCen holds regular training courses and seminars throughout the year giving staff the opportunity to expand their skills and knowledge. Where internal training does not cover a specific training need NatCen brings in external trainers or funds staff attending external training courses. All new staff undergo a detailed induction course and discuss their training needs with their managers at monthly one to ones. Aside from training on research and transferable skills, staff are also able to access support with wellbeing and lifestyle issues via training courses, online resources and access to our external Employee Assistance Programme.

NatCen does not make inappropriate use of zero hour contracts.

We publish our gender pay gap annually and have an action plan which we review and update each year. We currently have a pay gap which is in favour of women. We are confident that women and men are paid equally for doing equivalent work at the National Centre for Social Research (NatCen) and we have adopted transparent pay structures for our staff. We recruit from the widest possible pools, advertising our jobs externally, and ensuring that language used in advertisements is gender neutral. We have recently established an Equality, Diversity and Inclusion Group to promote and consider these issues as they affect the full range of processes at NatCen from the research we conducted to how we recruit and treat our staff. The group are undertaking a Staff Diversity Monitoring Survey to provide better data to inform their understanding of key issues amongst staff.

A significant proportion of our employees are social scientists, many of whom are female. Additionally, we engage a high proportion of female staff in administrative and support roles in our Brentwood, Edinburgh and London offices.

NatCen recognises the importance of paying our people at a rate that is competitive and fair. Decent wages mean our people can provide for their family, build self-worth and create a sense of purpose. In addition, we have introduced targeted pay progression and discretionary payments to retain staff.

We also recognise the value of flexible working. Many of our staff are on part-time contracts and/or routinely work from home for part of their working week (almost all staff have permanently been working from home over the past year).

Our workers (freelance interviewers and nurses who carry out much of our field research and interviews) are paid according to their grade and geographical region. Pay for our interviewers and nurses is fee based: they are paid for each completed interview (plus additional fees for unproductive households, travel and admin time). In all cases this meets the National Minimum Wage and we carry out National Living Wage checks on all interviewer/ nurse pay in each payroll period and, if necessary, top up pay to ensure the National Living Wage is earned. We have recently conducted a review of the total hours worked and fees earned by our interviewers in Scotland to ensure that they earn above the Real Living Wage. [REDACTED]

X2. Scottish Business Pledge

We have not signed the Scottish Business Pledge but are committed to doing so in the future.

X3. Living Wage

We do not have Scottish Living Wage Accreditation but commit to paying staff directly involved with the delivery of this contract the Real Living Wage