COVID-19 recovery

16th October 2020

**Title:** Building A Resilient State: A Collection Of Essays

Reform | October 2020

The Covid-19 pandemic has placed a huge strain on the state, and while the response has demonstrated some of the great strengths of our public services and machinery of government, it has also exposed some of the biggest flaws.

As an introduction to Reform's new ‘Resilient State’ programme, this collection of essays brings together insight and expertise from across the political spectrum to explore different aspects of a resilient state. The series aims to provide a platform for innovative ideas, to stimulate debate, and help shape a way forward.

Full detail: [Building a resilient state: a collection of essays](https://reform.uk/sites/default/files/2020-10/Building%20a%20resilient%20state%20A%20collection%20of%20essays_0.pdf)

**Title:** Power down to level up: resilient place-shaping for a post-Covid world

Local Government Information Unit | 9th October 2020

Place plays an important role for an increasing number of local councils as a strategic lens and a blueprint for local leadership. Recognition of place is vital for community wellbeing, particularly as disruption and complexity grow in society, politics and the economy in the wake of the Covid-19 pandemic. But governance in England is experiencing a period of further centralisation which is in danger of smothering local efforts at place leadership.

This paper draws on case studies and analysis to argue that an effective case for refocusing UK governance on place must overcome entrenched orthodoxies about where local capacity lies, the nature of power in the modern state, and how we best measure policy success.

Key recommendations in the report include calls for more fiscal devolution, citizen-centred public services, cutting Whitehall red tape, promoting a sustainable local economy and strengthening local public health.

Full report: [Power down to level up: resilient place-shaping for a post-Covid age](https://lgiu.org/wp-content/uploads/2020/10/Power-down-to-level-up-LGIU.pdf)

**Title:** Levelling up communities

The Covid Recovery Commission | October 2020  
  
The Covid Recovery Commission was formed in July 2020. The independent Commission brings together some of the UK’s most prominent business figures and entrepreneurs. The Commission will release three short papers before the end of 2020 and a final report in February 2021.

This first report presents the Commission’s initial analysis on how inequality impacts on individuals, neighbourhoods and communities right across the UK and how these inequalities have been impacted by the Covid-19 pandemic.

It argues that a new approach to levelling up is needed to tackle these inequalities. This should focus on local impacts and use a comprehensive strategy, wider than simply rebalancing economic fortunes, to ensure the UK economy and society is fairer post-Covid-19, than it was before.

Full report: [Levelling up communities](https://covidrecoverycommission.co.uk/wp-content/uploads/2020/10/Levelling-up-communities.pdf)

See also: [Government urged to define ‘levelling up’ as new data reveals Covid is widening inequalities in the UK’s most deprived neighbourhoods](https://covidrecoverycommission.co.uk/government-urged-to-define-levelling-up-as-new-data-reveals-covid-is-widening-inequalities-in-the-uks-most-deprived-neighbourhoods/)

**Title:** COVID-19 recovery: potential treatments for post-intensive care syndrome

The Lancet Respiratory Health | 12th October 2020

The long-term effects of surviving COVID-19 have become a new focus of attention for clinicians and researchers. This focus has been driven partly by concerns about late ill-effects of a previously unknown virus, but recognised generic patterns of chronic disease after critical illness also exist.

These patterns are termed PICS, an acronym both for post-intensive care syndrome and for persistent inflammation, immunosuppression, and catabolism syndrome. This comment piece recommends unifying post-COVID-19 research aims with those of PICS research and propose a novel approach to its management by repurposing drugs that are approved, inexpensive, and safe.

Full detail: [COVID-19 recovery: potential treatments for post-intensive care syndrome](https://www.thelancet.com/action/showPdf?pii=S2213-2600%2820%2930457-4)

**Title:** Mental Health Disorders Related to COVID-19–Related Deaths

JAMA | 12th October 2020

This Viewpoint discusses the mental health consequences of the coronavirus disease 2019 (COVID-19) pandemic and emphasizes the importance of developing a public health strategy to manage the waves of grief, posttraumatic stress disorder, opioid use, and other mental health consequences of coronavirus-related death and disruption.

Full detail: [Mental health disorders related to covid-19–related deaths](https://jamanetwork.com/journals/jama/fullarticle/2771763)

**TITLE:** STORIES OF SHIELDING. LIFE IN THE PANDEMIC FOR THOSE WITH HEALTH AND CARE NEEDS

National Voices | October 2020

When lockdown began, National Voices created a digital platform - Our Covid Voices - for people with health and care needs to share their experiences of the impact of the pandemic. This provided the unfiltered views and stories from people at great risk of all the effects of the pandemic, including anxiety, uncertainty and changes to their care. Also their relationships, their jobs and dealing with the everyday aspects of life in the pandemic.

This report is a compilation of the contributions to help inform any decisions taken in the future regarding the way their needs are addressed.

Full report: [Stories of shielding. Life in the pandemic for those with health and care needs](https://www.nationalvoices.org.uk/sites/default/files/public/publications/stories_of_shielding_-_national_voices.pdf)

**Title**: Shielding may be reintroduced for vulnerable people in highest risk areas

BMJ | 2020; 371: m3969 | 13th October 2020

The government may reintroduce advice for clinically extremely vulnerable people to shield from covid-19 if they live in “exceptionally high risk areas” of England.

People at greatest risk of serious illness from the virus—including those with conditions affecting the immune system, certain cancers, and organ transplant recipients—will receive specific advice depending on the risk level in their local area, the government said.

The new locally tailored guidance will be linked to the government’s three tier alert system, which is being introduced this week to try to stem rising covid-19 infections across England.

The government said those living in very high risk areas may once again be advised to formally shield, as they were when national lockdown was introduced in March. This would mean staying at home, not going to work or school, and limiting social interactions to their own household and support bubble to reduce their risk.

Advice to shield will not automatically be given if an area is placed in the very high alert level—as Liverpool has been—but ministers will consider it as an additional intervention based on advice from local public health experts and the chief medical officer or a deputy chief medical officer.

Full detail: [Shielding may be reintroduced for vulnerable people in highest risk areas](https://www.bmj.com/content/371/bmj.m3969)

**Title**: Leading doctors argue against local lockdowns

BMJ | 2020; 371: m3959 | 13th October 2020

The UK government’s own scientific advisers and other leading experts argued against a policy of increased restrictions in local areas to control the covid-19 pandemic, instead calling for a national short period of lockdown or “circuit breaker,” documents show.

The newly released documents reveal that the Scientific Advisory Group for Emergencies recommended on 21 September that such an immediate circuit breaker was the best way to control cases.

The SAGE documents also suggested:

* Advising people to work from home if they can
* Banning all contact within the home with members of other households
* Closure of all bars, restaurants, cafes, indoor gyms, and personal services, and
* All university and college teaching to be online.

Of all the measures SAGE proposed, only one—advising people to work from home—was implemented by the government at the time.

Full detail: [Leading doctors argue against local lockdowns](https://www.bmj.com/content/371/bmj.m3959)

See also: [Scientific Advisory Group for Emergencies. SAGE 58 minutes: Coronavirus (COVID-19) response](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/925853/S0768_Fifty-eighth_SAGE_meeting_on_Covid-19.pdf)

**TITLE:** EXPERTS RECOMMEND TWO WEEK CIRCUIT BREAK TO REDUCE TRANSMISSION IN THE UK

BMJ | 2020; 371: m4038 | 16th October 2020

A two-week lockdown in the UK could “put the epidemic back by around 28 days or more,” the government’s Scientific Advisory Group for Emergencies (SAGE) has said.

Documents published this week show that, on 21 September, SAGE recommended a two to three week “circuit breaker” to reduce the reproduction number to under one. But the UK government has not, so far, announced such a measure.

This is despite researchers estimating that such a break could reduce deaths by around 29% to 49%. In a preprint, a team from UK universities used simple analysis and age structured models matched to the unfolding UK epidemic to investigate the action of precautionary breaks.

The researchers suggested that the break could be combined with the school half term holiday in October but said this same logic could also be applied to the Christmas holidays by extending them for a week into 2021, or to the spring half term.

Full detail: [Experts recommend two week circuit break to reduce transmission in the UK](https://www.bmj.com/content/371/bmj.m4038)

Related: [Summary of the effectiveness and harms of different non-pharmaceutical interventions](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/925854/S0769_Summary_of_effectiveness_and_harms_of_NPIs.pdf)

**Title**: Living with Covid-19

National Institute for Health Research | 15th October 2020

The National Institute for Health Research Centre for Engagement and Dissemination has published its first dynamic themed review of the scientific evidence on, and lived experience of, long-term ‘ongoing’ COVID-19.

‘Living with COVID’ draws on the most up-to-date expert consensus and published evidence, as well as the lived experience of both post-hospitalised and non-hospitalised COVID-19 patients, to better understand the impact of ongoing effects of COVID19, how health and social care services should respond, and what future research questions might be.

The review’s findings include:

* Ongoing COVID may not be one syndrome but possibly up to four different syndromes.
* A common theme is that symptoms arise in one physiological system then abate only for symptoms to arise in a different system.
* A working diagnosis recognised by healthcare services, employers and government agencies would facilitate patient access to much needed support and provide the basis for planning appropriate services.
* There are powerful stories that ongoing COVID symptoms are experienced by people of all ages, and people from all backgrounds. We cannot assume that groups who are at low risk of life threatening disease and death during acute infections are also at low risk of ongoing COVID.

Full detail: [Living with Covid19. A dynamic review of the evidence around ongoing covid-19 symptoms (often called long covid)](https://evidence.nihr.ac.uk/themedreview/living-with-covid19/)

See also: [Long Covid could be four different syndromes, review suggests](https://www.bmj.com/content/371/bmj.m3981) | BMJ

**Title**: Scientific consensus on the COVID-19 pandemic: we need to act now

The Lancet | 15th October 2020

In a Correspondence, published in The Lancet, a group of 80 researchers warn that a so-called herd immunity approach to managing COVID-19 by allowing immunity to develop in low-risk populations while protecting the most vulnerable is “a dangerous fallacy unsupported by the scientific evidence”. Faced with a second wave of COVID-19, and more than a million recorded deaths worldwide, the authors present their view of the evidence-based consensus on COVID-19.

Full detail: [Scientific consensus on the COVID-19 pandemic: we need to act now](https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2932153-X)  
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**Title**: How will Brexit affect the UK’s response to coronavirus?

Nuffield Trust | 14th October 2020

As the European Council meets to review the state of negotiations on the future EU-UK partnership, a new Nuffield Trust briefing assesses how leaving the single market might affect UK health and social care services just as they are grappling with a second wave of Covid-19 and the biggest health crisis of our times.

Key findings

* Leaving the single market will create new and wide-ranging problems for the majority of NHS medicines and medical devices which come from or via the EU. Measures such as stockpiling and planned delays in bringing in full controls will help, but data since the EU referendum shows medicines shortages have become more common and seem to fluctuate easily. The coronavirus wave and Brexit stockpiling both created spikes in imported supplies, and filling both requirements at once may be very difficult.
* Export blocks on medically vital supplies by the EU were used during the first wave of coronavirus and could cover the UK after 31 December.
* The UK will no longer have access to the European Centre for Disease Prevention and Control (ECDC), which collects and shares intelligence on pandemics and other infectious disease outbreaks. The UK is trying to negotiate access to the Early Warning and Response System, which shares information between ECDC and member states during pandemics, but this will depend on whether a deal is reached and whether this provision is secured.
* Based on negotiating documents, draft treaties, and briefing to date, the majority of the crucial issues for health which could have been secured in an agreement are not agreed upon by the two sides, or the outcome is uncertain. These should be given a higher priority in the context of the ongoing pandemic.
* Several important areas for responding to coronavirus depend on cooperative practices and favourable decisions across the EU and UK, beyond simply the presence or absence of a deal. These include allowances at customs on the EU side; the exchange of data and intelligence; and the UK being subject to blocks on exports. Bad relations will magnify the issues the NHS faces in trying to tackle coronavirus next year.
* Poor funding for public health and social care contributed to limitations in the UK’s capacity to address coronavirus during the first wave. Leaving the single market will mean slower growth, making addressing these more difficult though the case to do so remains very strong.

Full briefing: [How will Brexit affect the UK’s response to coronavirus?](https://www.nuffieldtrust.org.uk/files/2020-10/coronavirus-brexit-briefing-3.pdf)

**Title**: Epidemiological changes on the Isle of Wight after the launch of the NHS Test and Trace programme

The Lancet Digital Health | 14th October 2020

In May 2020, the UK National Health Service (NHS) Test and Trace programme was launched in England in response to the COVID-19 pandemic. The programme was first rolled out on the Isle of Wight and included version 1 of the NHS contact tracing app. The aim of this study was to make a preliminary assessment of the epidemiological impact of the Test and Trace programme using publicly available data.

The results show that the epidemic on the Isle of Wight was controlled quickly and effectively after the launch of Test and Trace. These findings highlight the need for further research to determine the causes of the reduction in the spread of the disease, as these could be translated into local and national non-pharmaceutical intervention strategies in the period before a treatment or vaccination for COVID-19 becomes available.

Full paper: [Epidemiological changes on the Isle of Wight after the launch of the NHS Test and Trace programme: a preliminary analysis](https://www.thelancet.com/action/showPdf?pii=S2589-7500%2820%2930241-7)

Related: [Towards better contact-tracing in the UK](https://www.thelancet.com/action/showPdf?pii=S2589-7500%2820%2930245-4) | The Lancet Digital Health [comment]

**Title:** the experiences of people with long-COVID

BJGP Open | 13th October 2020

An unknown proportion of people who had an apparently mild COVID-19 infection continue to suffer with persistent symptoms, including chest pain, shortness of breath, muscle and joint pains, headaches, cognitive impairment (‘brain fog’), and fatigue.

Post-acute COVID-19 (‘long-COVID’) seems to be a multisystem disease, sometimes occurring after a mild acute illness; people struggling with these persistent symptoms refer to themselves as ‘long haulers’.

The aim of this paper was toexplore the experiences of people with persisting symptoms following COVID-19 infection, and their views on primary care support received.

The main themes discovered include: the *‘hard and heavy work’* of enduring and managing symptoms and accessing care; living with uncertainty, helplessness and fear, particularly over whether recovery is possible; the importance of finding the 'right' GP (understanding, empathy, and support needed); and recovery and rehabilitation: what would help?

Full paper: [Finding the 'right' GP: a qualitative study of the experiences of people with long-COVID](https://bjgpopen.org/content/bjgpoa/early/2020/10/12/bjgpopen20X101143.full.pdf)

**Title:** Supporting nurses' mental health during the pandemic

Nursing | October 2020 | Volume 50 - Issue 10 - p54-57

During the COVID-19 pandemic, healthcare facilities have established new policies affecting nursing care, often with little input from the nurses who must implement them. These changes have led to mistrust and an altered sense of safety among nurses.

This article focuses on how changing institutional policies affecting personal protective equipment and family visitation have affected nurses' mental health and offers practical suggestions for supporting resilience and mental health in nurses during this unprecedented public health crisis.

Full article: [Supporting nurses' mental health during the pandemic](https://journals.lww.com/nursing/Fulltext/2020/10000/Supporting_nurses__mental_health_during_the.13.aspx)

**Title**: Clinically extremely vulnerable receive updated advice tailored to local COVID alert levels

Department of Health & Social Care | 13th October 2020

Clinically extremely vulnerable people in England will receive new guidance to help them reduce their risk from coronavirus, tailored to where they live the government has announced.

The guidance will be tied into the new local COVID alert levels framework, meaning those at the highest risk of serious illness from the virus will receive specific advice depending on the level of risk in their local area, as coronavirus rates continue to rise:

* Those considered most clinically vulnerable to receive updated guidance tailored to their local area, in line with new local COVID alert levels
* New guidance will support them to take appropriate protective actions in their everyday lives, while retaining as much normality as possible
* Clinically extremely vulnerable group includes those with specific health conditions, certain cancers and organ transplant recipients

Full detail: [Clinically extremely vulnerable receive updated advice tailored to local COVID alert levels](https://www.gov.uk/government/news/clinically-extremely-vulnerable-receive-updated-advice-tailored-to-local-covid-alert-levels)

**Title**: Rough sleepers to be helped to keep safe this winter

Ministry of Housing, Communities & Local Government | 13th October 2020

Rough sleepers and those at risk of becoming homeless will be helped to keep safe this winter through a package of support. This will give local areas the tools and funding they need to protect people from life-threatening cold weather and the risks posed by coronavirus.

The announcement includes:

* A new £10 million Cold Weather Fund to support councils get rough sleepers off the streets during the winter by helping them to provide more self-contained accommodation.
* An additional £2 million for faith and community groups to help them provide secure accommodation for rough sleepers.
* Comprehensive guidance to the sector, produced with Public Health England, Homeless Link and Housing Justice to help shelters open more safely, where not doing so would endanger lives.

These measures will help councils build on their existing plans to protect people over winter which have been supported by the £266 million Next Step Accommodation Programme – the aim of which is to keep people safe and ensure that as few people as possible return to the streets.

Full detail: [Rough sleepers to be helped to keep safe this winter](https://www.gov.uk/government/news/rough-sleepers-to-be-helped-to-keep-safe-this-winter)

**Title**: Prime Minister announces new local COVID Alert Levels

Prime Minister's Office, 10 Downing Street | 12th October 2020

The Prime Minister has set out how the government will further simplify and standardise local rules by introducing a three tiered system of local COVID Alert Levels in England. Addressing MPs before hosting a Downing Street press conference, he confirmed the levels will be set at medium, high, and very high.

The “medium” alert level – which will cover most of the country – will consist of the current national measures, which came into force on 25 September. This includes the Rule of Six, and the closure of hospitality at 10pm.

The “high” alert level will reflect many current local interventions, but there will now be consistency across the country. This primarily aims to reduce household to household transmission by preventing all mixing between households or support bubbles indoors. The Rule of Six will apply in outdoor spaces, including private gardens.

The “very high” alert level will apply where transmission rates are causing the greatest concern, based on an assessment of all the available data and the local situation. This includes incidence and test positivity, including amongst older and more at-risk age groups, as well as the growth rate, hospital admissions and other factors.

In these areas, the government will set a baseline of prohibiting social mixing indoors and in private gardens, with the Rule of Six allowed in open public spaces like parks and beaches.

Pubs and bars must close, and can only remain open where they operate as if they were a restaurant – which means serving substantial meals, like a main lunchtime or evening meal. They may only serve alcohol as part of such a meal. People will be advised not to travel in and out of these areas.

Non-essential retail, schools and universities will remain open in all levels.

Full detail: [Prime Minister announces new local COVID Alert Levels](https://www.gov.uk/government/news/prime-minister-announces-new-local-covid-alert-levels)

**Title**: Job Support Scheme expanded to firms required to close due to Covid Restrictions

HM Treasury | updated 12th October 2020

The government’s Job Support Scheme (JSS) will be expanded to protect jobs and support businesses required to close their doors as a result of coronavirus restrictions.

Under the expansion, firms whose premises are legally required to shut for some period over winter as part of local or national restrictions will receive grants to pay the wages of staff who cannot work.

The government will support eligible businesses by paying two thirds of each employees’ salary (or 67%), up to a maximum of £2,100 a month.

Full detail: [Job Support Scheme expanded to firms required to close due to Covid Restrictions](https://www.gov.uk/government/news/job-support-scheme-expanded-to-firms-required-to-close-due-to-covid-restrictions)

**Title:** COVID-19 policies in the UK and consequences for mental health

The Lancet Psychiatry | 15th October 2020

The lockdown to “flatten the curve” of COVID-19 has caused harm to many people globally. This correspondence discusses the impact of such measures on the mental health and wellbeing on children and young people.

Full detail: [Covid-19 policies in the UK and consequences for mental health](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30457-0/fulltext)

**Title:** Guidance for health professionals supporting groups with specific complex needs who are or have been shielding

The British Psychological Society | 15th October 2020

This document is aimed at psychologists and other health professionals supporting adults who are or have been subject to shielding, who have additional complex needs or considerations, including adults with learning/intellectual disabilities, autism spectrum conditions, and/or those living with dementia.

The considerations may also be relevant for those living with long term health conditions and their families. People living with these conditions often live with hidden disabilities and the difficulties they face can consequently be less obvious to services and society due to Covid-19.

The guidance specifically focusses on those in the ‘high’ risk category defined by the UK government but recognises that many people not officially in the ‘high risk’ category may have been shielding and therefore may face similar challenges, especially those shielding others, or those in ‘moderate risk’ categories.

Full guidance: [Guidance for health professionals supporting groups with specific complex needs who are or have been shielding](https://www.bps.org.uk/sites/www.bps.org.uk/files/Policy/Policy%20-%20Files/Guidance%20for%20Health%20Professionals%20Supporting%20Groups%20with%20Specific%20Complex%20Needs.pdf)

**Title**: Coronavirus and the latest indicators for the UK economy and society

Office for National Statistics | 15th October 2020

Early experimental data on the impact of the coronavirus (COVID-19) on the UK economy and society. These faster indicators are created using rapid response surveys, novel data sources and experimental methods.

Full detail: [Coronavirus and the latest indicators for the UK economy and society](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronavirustheukeconomyandsocietyfasterindicators/15october2020)

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[TRFT Library & Knowledge Service](https://www.trftlibraryknowledge.com/) aim to bring together the latest guidelines, research and news on Covid-19 through our [Covid-19 portal](https://www.trftlibraryknowledge.com/coronavirus.html). For daily updates on Covid-19 visit our '[Latest Health](https://trfthealthweeklydigest.wordpress.com/)' newsfeed, or use the hashtag [#covid19rftlks](https://twitter.com/hashtag/covid19rftlks?src=hashtag_click) to see our latest tweets on Covid-19 research, guidelines and news.

We also produce a range of subject-specific news feeds to ensure our clinical and professional teams stay up to date with developments in their work areas. Please visit our [website](http://www.trftlibraryknowledge.com/) for more information

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