COVID-19 recovery

20th November 2020

**Title**: Managing the COVID-19 pandemic in care homes for older people

British Geriatrics Society | updated 16th November 2020

The COVID-19 pandemic raises particular challenges for care home residents, their families and the staff that look after them. This guidance (Version 4) has been developed to help care home staff and NHS staff who work with them to support residents through the pandemic.

The guidance is written as the United Kingdom moves into the second wave of the COVID-19 pandemic. It is designed to be applicable to care home residents across all four nations of the UK. Residents of care homes for older people have been particularly affected by COVID-19. Across the four nations 28-50% of all COVID-related deaths occurred in care home residents.

Full guidance: [Managing the COVID-19 pandemic in care homes for older people](https://www.bgs.org.uk/sites/default/files/content/attachment/2020-11-16/Managing%20the%20COVID-19%20pandemic%20in%20care%20homes%20November%202020_0.pdf)

**Title**: REDUCING HEALTH INEQUALITIES ASSOCIATED WITH COVID-19: A FRAMEWORK FOR HEALTHCARE PROVIDERS

NHS Providers | 17th November 2020

Health and care services worldwide have faced an unparalleled challenge in responding to and managing the impact of COVID-19. The disproportionate impact of the virus has highlighted longstanding health inequalities for example for people from areas with higher levels of socio-economic deprivation, or for those from Black, Asian and minority ethnic (BAME) communities.

This framework sets out core principles for understanding and taking action on health inequalities that have developed or worsened as a result of the COVID-19 crisis. It is intended to support NHS trusts during delivery of surge plans, as well as in service restoration and recovery action.

It has been developed by the Provider Public Health Network, a group of public health professionals who work in or closely with NHS provider organisations, with support from Public Health England (PHE), and in conjunction with NHS Providers.

Full framework: [Reducing health inequalities associated with Covid-19: A framework for healthcare providers](https://nhsproviders.org/reducing-health-inequalities-associated-with-covid-19)

**Title:** New film shows importance of ventilation to reduce spread of COVID-19

Department of Health and Social Care | 18th November 2020

A new public information campaign has been launched to highlight how letting fresh air into indoor spaces can reduce the risk of infection from coronavirus by over 70%.

The film illustrates how coronavirus lingers in the air in spaces with no fresh air, increasing the risk of people breathing in infected particles, and how the risk can be reduced significantly by regularly ventilating enclosed areas.

Airing indoor spaces is particularly important when:

* people have visitors (when permitted) or tradespeople in their home, for example for construction or emergencies
* someone from a support bubble is meeting with another household indoors
* a care worker is seeing a patient indoors
* someone in the household has the virus, as this can help prevent transmission to other household members

Full detail: [New film shows importance of ventilation to reduce spread of COVID-19](https://www.gov.uk/government/news/new-film-shows-importance-of-ventilation-to-reduce-spread-of-covid-19?utm_source=0801cf07-f8ac-45b4-93c4-cf766fdf9ee6&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate)

**Title:** NHS launches 40 ‘long COVID’ clinics to tackle persistent symptoms

NHS England | 15th November 2020

The NHS will launch a network of more than 40 ‘long COVID’ specialist clinics within weeks to help thousands of patients suffering debilitating effects of the virus months after being infected.

The clinics, due to start opening at the end of November, will bring together doctors, nurses, therapist and other NHS staff to physical and psychological assessments of those experiencing enduring symptoms.

The condition, which is thought to affect more than 60,000 people in the UK, can cause continuing fatigue, brain fog, breathlessness and pain.

NHS England has provided £10 million to fund the pioneering clinics, which will see patients who have been hospitalised, officially diagnosed after a test or reasonably believe they had COVID-19.

Full detail: [NHS launches 40 ‘long COVID’ clinics to tackle persistent symptoms](https://www.england.nhs.uk/2020/11/nhs-launches-40-long-covid-clinics-to-tackle-persistent-symptoms/)

**Title:** Exiting the lockdown: a strategy for sustainably controlling the transmission of covid-19 in England

BMA | 18th November 2020

As England prepares to exit its second lockdown the BMA says we cannot make the same mistake and risk a rebound surge in infections, and the need for further national lockdowns. A sustainable strategy for reducing transmission of COVID-19 until a vaccine becomes available and is widely taken up is desperately needed.

This report states that we must not squander the efforts of the many people who have followed the law, stayed at home, sacrificed freedoms and incurred financial loss in order to contain the virus.

The report sets out an exit strategy that the BMA believes must be put in place now to help towards near-elimination of COVID-19, enabling us to control the infection after lockdown ends and to prevent the need for further local or national lockdowns.

The steps that are now required to control COVID-19 can be split into three phases, from ending lockdown through to mass vaccination.

Full report: [Exiting the lockdown: a strategy for sustainably controlling the transmission of covid-19 in England](https://www.bma.org.uk/media/3536/bma-exiting-covid-lockdown-3-phase-strategy-nov-2020.pdf)

See also: BMJ: [Government must reduce social mixing after lockdown, says BMA](https://www.bmj.com/content/371/bmj.m4522?hwsamljwt=eyJ0eXAiOiJKV1QiLCJhbGciOiJIUzI1NiJ9.eyJodHRwczovL3NjaGVtYS5oaWdod2lyZXByZXNzLmNvbS9zYW1sL2F0dHJpYnV0ZS9wZXJzaXN0ZW50LWlkIjpbImh0dHBzOi8vaWRwLmVuZy5uaHMudWsvb3BlbmF0aGVucyFodHRwczovL29wZW5hdGhlbnMtc3AuYm1qLmNvbS9lbnRpdHkvYm1qIWkyajBkcHJ0czFxbWJjY2E1aWYybDVnYyJdLCJzdWIiOiJibWpqb3VybmFscy83NTAyNTkiLCJodHRwczovL3NjaGVtYS5oaWdod2lyZXByZXNzLmNvbS9zYW1sL2F0dHJpYnV0ZS9TaGliLUF1dGhlbnRpY2F0aW9uLUluc3RhbnQiOlsiMjAyMC0xMS0xOVQwOToxNzoxNC43MTZaIl0sImh0dHBzOi8vc2NoZW1hLmhpZ2h3aXJlcHJlc3MuY29tL3NhbWwvc2NvcGUiOlsiNDMxNTkyMi5lbmcubmhzLnVrIl0sImh0dHBzOi8vc2NoZW1hLmhpZ2h3aXJlcHJlc3MuY29tL3NhbWwvaHdQdWJTdWJkYiI6ImJtampvdXJuYWxzIiwiaHR0cHM6Ly9zY2hlbWEuaGlnaHdpcmVwcmVzcy5jb20vc2FtbC9od1B1YlVzZXJJZHMiOlsiNzUwMjU5Il0sImlzcyI6Imh0dHBzOi8vaGlnaHdpcmVwcmVzcy5jb20vIiwiaHR0cHM6Ly9zY2hlbWEuaGlnaHdpcmVwcmVzcy5jb20vc2FtbC9hdHRyaWJ1dGUvU2hpYi1BcHBsaWNhdGlvbi1JRCI6WyJibWoiXSwiaHR0cHM6Ly9zY2hlbWEuaGlnaHdpcmVwcmVzcy5jb20vc2FtbC9hdHRyaWJ1dGUvU2hpYi1BdXRobkNvbnRleHQtRGVjbCI6WyJ1cm46b2FzaXM6bmFtZXM6dGM6U0FNTDoyLjA6YWM6Y2xhc3Nlczp1bnNwZWNpZmllZCJdLCJodHRwczovL3NjaGVtYS5oaWdod2lyZXByZXNzLmNvbS9zYW1sL2F0dHJpYnV0ZS9lZHVQZXJzb25TY29wZWRBZmZpbGlhdGlvbiI6WyJtZW1iZXJANDMxNTkyMi5lbmcubmhzLnVrIl0sImF1ZCI6Imh0dHBzOi8vaGlnaHdpcmVwcmVzcy5jb20vIiwiaHR0cHM6Ly9zY2hlbWEuaGlnaHdpcmVwcmVzcy5jb20vc2FtbC9hdHRyaWJ1dGUvU2hpYi1TZXNzaW9uLUlEIjpbIl84ZmZkNTA4OTA4ZDkxNDhhZjg2MDcwNDA0MWVmZWNlZCJdLCJodHRwczovL3NjaGVtYS5oaWdod2lyZXByZXNzLmNvbS9zYW1sL2F0dHJpYnV0ZS91c2VybmFtZSI6WyJuaHNzeWFjYXJyaWNrMDAxIl0sImh0dHBzOi8vc2NoZW1hLmhpZ2h3aXJlcHJlc3MuY29tL3NhbWwvYXR0cmlidXRlL29yZ2FuaXNhdGlvbk51bSI6WyI0MzE1OTIyIl0sImh0dHBzOi8vc2NoZW1hLmhpZ2h3aXJlcHJlc3MuY29tL3NhbWwvYXR0cmlidXRlL1NoaWItSWRlbnRpdHktUHJvdmlkZXIiOlsiaHR0cHM6Ly9pZHAuZW5nLm5ocy51ay9vcGVuYXRoZW5zIl0sImV4cCI6MTYwNTg4OTE3MywiaWF0IjoxNjA1NzE2MzczLCJqdGkiOiIwYjQyNmMyOS05ZDcxLTQxOTQtODA5OC0yZTY2OWM1MmZlZmUifQ.VvX6dtj39bQGN3R9GPHtvIy7tSow9jebiKgHEJik25c)

**Title:** Urgent actions and policies needed to address COVID-19 among UK ethnic minorities

The Lancet | 19th November 2020

As the UK enters a winter wave of the COVID-19 pandemic, our understanding of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) continues to evolve. However, what is strikingly clear from early data is the disproportionate effect of COVID-19 on elderly, socioeconomically deprived, and ethnic minority groups, both in the UK and globally.

Rapid analyses of large-scale population-based data show increased risk of exposure to SARS-CoV-2 and poor outcomes in these groups. This comment piece discusses the need for urgent actions and policies to address COVID-19 among UK ethnic minorities.

Full detail: [Urgent actions and policies needed to address COVID-19 among UK ethnic minorities](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2820%2932465-X/fulltext)

**Title:** COVID-19 vaccines: no time for complacency

The Lancet | 21st November 2020

Pfizer and BioNTech recently announced that their COVID-19 vaccine candidate had 90% efficacy in clinical trials. Similar announcements have been made about the Russian Sputnik V and Moderna vaccines.

This editorial states that whilst the prospect of preventing illness and death, and avoiding the harm and misery of extended restrictions is a cause for optimism, we are far from ending COVID-19 as a public health issue.

Full editorial: [COVID-19 vaccines: no time for complacency](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2820%2932472-7/fulltext)

**Title:** The COVID-19 Long-Term Care situation in England

International Long Term Care Policy Network| 19th November 2020

This report, co-authored by researchers from organisations including The King's Fund, Nuffield Trust, Health Foundation, provides an overview of the impact of COVID-19 so far on people who use and provide long-term care in England and of the policy and practice measures adopted to mitigate its impact.

The report finds that the initial policy responses did not adequately consider the social care sector and that the pandemic has laid bare long-standing problems in the long-term care system in England.

Full report: [The COVID-19 Long-Term Care situation in England](https://ltccovid.org/wp-content/uploads/2020/11/COVID-19-Long-Term-Care-situation-in-England-19-November-2.pdf)

**Title**: HSJ podcast: Long-covid care cannot be delayed any longer

HSJ | 20th November 2020

With delays to promised support clinics, warnings about the need to protect staff pay, and trusts accused of penalising staff during their recovery, this podcast explores why the NHS must provide serious support sooner rather than later for debilitating long-covid.

Full detail: [HSJ podcast: Long-covid care cannot be delayed any longer](https://www.hsj.co.uk/hsj-health-check-podcast/hsj-podcast-long-covid-care-cannot-be-delayed-any-longer/7029005.article?mkt_tok=eyJpIjoiWkRKbU5UYzRaV001TnpKaCIsInQiOiJ1REtETnNRbTRsXC9RNzljbENSOExscDFDeDhQSDJyVEhtR2dsQXZUWXlJWTlvcGlMd1dSQzVhcTU1aGFSMnFVNnBUazFTdGk4VGFkSlZ0Nm9zaTdoUFoyMlFQcFJWY1lBd2l5eG5uUEx2U3pJYUN4bUZtdWpqUFVuczhGb1JTRzEifQ%3D%3D)

**Title:** What does the future hold for digital health and care?

The Kings Fund | 13th December 2020

The Covid-19 pandemic has seen many health and care services turn to digital technology to continue meeting patients’ needs. But beyond remote consultations, what are the key technologies to look out for in the future?

The King's Fund explain eight key innovations and their potential to transform health and care delivery.

1. [Smartphones and wearables](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#smartphones-wearables)
2. [At-home or portable diagnostics](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#at-home)
3. [Smart or implantable drug delivery mechanisms](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#smart-implantable)
4. [Digital therapeutics and immersive technologies](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#digital-therapeutics)
5. [Genome sequencing](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#genome)
6. [Artificial intelligence](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#artificial-intelligence)
7. [Robotics and automation](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#robotics)
8. [The connected community](https://www.kingsfund.org.uk/publications/eight-technologies-will-change-health-and-care#community)

Full detail: [What does the future hold for digital health and care?](https://www.kingsfund.org.uk/publications/digital-revolution)

**TITLE**: CONSENSUS STATEMENT EMPHASISES IMPORTANCE OF COVID-19-SECURE WORKPLACES

Public Health England | 20th November 2020

Public Health England (PHE), Health and Safety Executive (HSE) and Faculty of Occupational Medicine (FOM) have issued a consensus statement on the best approach to reduce occupational risk for workers including those of ethnic minority groups.

The statement recommends implementing and reinforcing existing HSE, government and specific industry guidance, workplace procedures and systems which help mitigate the risk of exposure to coronavirus (COVID-19) for all workers.

The statement adds that actions targeted at the entire workforce, rather than solely at ethnic minority groups may help reduce the risk of stigmatisation and opportunity inequalities at work.

Full detail: [Consensus statement emphasises importance of COVID-19-secure workplaces](https://www.gov.uk/government/news/consensus-statement-emphasises-importance-of-covid-19-secure-workplaces?utm_source=d467d774-031e-427f-be3c-aed4809e7ae4&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate)

**TITLE**: NHS PLANNING TO START COVID VACCINATION OF UNDER 50s BY END OF JANUARY

HSJ | 20th November 2020

The NHS’ current plan for the covid vaccine rollout — dependent on the arrival of supplies — would see the whole adult population able to begin receiving it before the end of January, according to leaked documents seen by HSJ. Under the plan, everyone who wants to would have been vaccinated by early April.

It relies on a range of assumptions including that there will be 75 per cent takeup, outside of residential settings like care homes and prisons, where 100 per cent is expected.

The plan also relies on supplies, including more than 7 million doses being available in December. It is not clear what impact a delay to this would have on the rollout. With most doses due to be administered between early January and mid-March — at a rate of 4-5 million every week — a small delay may not make a huge impact to the overall schedule.

The dates pencilled in for beginning each group are:

* Care home residents and staff, healthcare workers **-** from beginning of December;
* Ages 80 plus - from mid-December;
* Everyone aged 70-80 - from late December;
* Everyone aged 65-70 - from early January;
* All high and moderate risk under 65s - from early January;
* Everyone aged 50-65 - from mid January; and
* Everyone aged 18-50 - from late January; but with the bulk of this group vaccinated during March.

Full detail: [NHS planning to start Covid vaccination of under 50s by end of January](https://www.hsj.co.uk/coronavirus/exclusive-nhs-planning-to-start-covid-vaccination-of-under-50s-by-end-of-january/7029015.article?mkt_tok=eyJpIjoiT1RobFpqVmhNR1ZpWlRCbSIsInQiOiJOQmVNRUpVb1ZINmF6ZWZRUnh5b2E2YlBcL282WGhHK1pwdHl2QXM1Q2pLd25TeTZNVTh5bU9IOE5CSThYbE5hWFpxZlBOb2lxKzlza0VGSWJJbzlMWlpIUFRJRXJyU2xQb1F2WUNqdlJXczBBRG16b29lNFNHaFJRa0NWVzZralAifQ%3D%3D)

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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.

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