COVID-19 recovery

9th April 2021

**Title:** 6-month neurological and psychiatric outcomes in 236 379 survivors of COVID-19: a retrospective cohort study using electronic health records

The Lancet Psychiatry | 6th April 2021

Neurological and psychiatric sequelae of COVID-19 have been reported, but more data are needed to adequately assess the effects of COVID-19 on brain health. This study aimed to provide robust estimates of incidence rates and relative risks of neurological and psychiatric diagnoses in patients in the 6 months following a COVID-19 diagnosis.

This study provides evidence for substantial neurological and psychiatric morbidity in the 6 months after COVID-19 infection. Risks were greatest in, but not limited to, patients who had severe COVID-19. This information could help in service planning and identification of research priorities. Complementary study designs, including prospective cohorts, are needed to corroborate and explain these findings.

Full document: [6-month neurological and psychiatric outcomes in 236 379 survivors of COVID-19: a retrospective cohort study using electronic health records](https://www.thelancet.com/action/showPdf?pii=S2215-0366%2821%2900084-5)

See also:

* [Covid-19 raises risk of depression and dementia, study suggests](https://www.bbc.co.uk/news/health-56650125) | BBC News
* [One in three has neurological or psychiatric condition diagnosed after covid infection, study finds](https://www.bmj.com/content/373/bmj.n908) | BMJ

**Title:** What might long COVID mean for the nation’s health?

The Health Foundation | 1st April 2021

There is much more to learn about how COVID-19 affects people and what the implications are for the nation's long-term health. Against this uncertainty, the Health Foundation’s COVID-19 impact inquiry team has reviewed emerging evidence on long COVID. This article summarises the findings to date, and asks: What is long COVID?

* Does hospitalisation affect long COVID?
* How long does long COVID last?
* Can long COVID be treated?
* Does long COVID affect everyone equally?
* What is the wider impact of long COVID for individuals?

Full detail: [What might long COVID mean for the nation’s health?](https://www.health.org.uk/news-and-comment/blogs/what-might-long-covid-mean-for-the-nations-health)

**Title:** Shaping the future of digital technology in health and social care

The Kings Fund | 7th April 2021

This report, commissioned by the Health Foundation, provides a summary of evidence for how emerging technologies such as artificial intelligence, smartphones, wearable devices and the internet of things are being used within care settings around the world.

The authors analyse the available evidence around the use of these technologies to support leaders in health and care to engage in long-term thinking about the role of digital technology. The report looks back at recent developments in digital technology in the health and care system before the Covid-19 pandemic, supplemented by the Fund’s evidence-gathering on how digital technologies have been used during the pandemic, in England in particular. It also considers a set of potential futures to distil factors driving change and what this means for leaders now.

Full report: [Shaping the future of digital technology in health and social care](https://www.kingsfund.org.uk/sites/default/files/2021-04/Shaping%20the%20future%20of%20digital%20technology%20in%20health%20and%20social%20care.pdf)

**Title:** The role of trauma-informed care during the Covid-19 pandemic

The Kings Fund | 6th April 2021

The initial impacts of the Covid-19 pandemic – serious illness, death of loved ones, isolation – have been a source of psychosocial stress for many. But for people already living with experiences of trauma, the isolation and uncertainty of the pandemic increased the risk of further psychological harm.

At the same time, many services that in more normal times offer people support have been less available. Schools, voluntary organisations, and also many health and care services have frequently been closed, postponed or have moved to remote provision, changing the nature of how people engage with services.

These issues present key challenges for providers working in a rapidly changing context – how to support people who have experienced trauma, as well as supporting their workforces to deliver this support and responding to the trauma they may have experienced or witnessed.

This article explores how the Covid-19 pandemic has demonstrated the need for, and the potential of, trauma-informed approaches.

Full detail: [The role of trauma-informed care during the Covid-19 pandemic](https://www.kingsfund.org.uk/blog/2021/04/role-trauma-informed-care-covid-19)

**Title:** Face coverings in schools and colleges to remain in place

Public Health England | 6th April 2021

Face coverings in schools and colleges are to remain in place at start of summer term, following an ongoing review of the evidence and data. This cautious approach will help limit the risk of transmission and enable continued monitoring of the effect of school and college returns, as twice weekly testing is established and embedded in pupil’s routines.

It is expected that face coverings will no longer be required to be worn in classrooms, or by students in other communal areas, at step 3 of the roadmap, which will be no earlier than May 17th. At that point the next stage of easements, including increased social contact indoors, will be confirmed following a review of the latest data on infection and vaccination rates.

Full detail: [Face coverings in schools and colleges to remain in place](https://www.gov.uk/government/news/face-coverings-in-schools-and-colleges-to-remain-in-place)

**Title:** Recovery Loan Scheme

HM Treasury | 6th April 2021

A new government-backed loan scheme has been launched to provide additional finance to those businesses that need it. The Recovery Loan Scheme will ensure businesses continue to benefit from Government-guaranteed finance throughout 2021.

With non-essential retail and outdoor hospitality reopening next week, Ministers have ensured that appropriate support is still available to businesses to protect jobs. Businesses – ranging from coffee shops and restaurants, to hairdressers and gyms – and can access loans varying in size from £25,000, up to a maximum of £10 million.

Full detail: [Recovery Loan Scheme](https://www.gov.uk/government/news/recovery-loan-scheme-launches-today)

**Title:** Further easing of Covid restrictions confirmed for 12 April

Gov.uk | 5th April 2021

Outdoor hospitality will be among those reopening in England next week after the Prime Minister confirmed the roadmap is on track and planned easements can go ahead. Significant parts of the indoor economy and further outdoor settings will reopen from 12 April, after data confirmed the government’s “four tests” for easing Covid restrictions had been met. Before proceeding to this step, the government studied the latest data to assess the impact of the first step, which began when schools reopened on 8 March.

Full detail: [Further easing of Covid restrictions confirmed for 12 April](https://www.gov.uk/government/news/further-easing-of-covid-restrictions-confirmed-for-12-april)

**Title:** Twice weekly rapid testing to be available to everyone in England

Department of Health and Social Care | 5th April 2021

Everyone in England will be able to access free, regular, rapid coronavirus testing from 9 April, the government has announced.

In a significant step forward, which paves the way for businesses and society reopening, anyone will be able to access free, rapid lateral flow tests (LFDs) for themselves and their families to use twice a week, in line with clinical guidance.

Rapid testing has so far been available to those most at risk and people who need to leave home for work, including frontline NHS workers, care home staff and residents, and schoolchildren and their families. Now rapid testing will be offered to everyone, with people encouraged to take regular tests to help prevent outbreaks and reclaim a more normal way of life.

Full detail: [Twice weekly rapid testing to be available to everyone in England](https://www.gov.uk/government/news/twice-weekly-rapid-testing-to-be-available-to-everyone-in-england)

See also: [New campaign urges public to get tested twice a week](https://www.gov.uk/government/news/new-campaign-urges-public-to-get-tested-twice-a-week) | Department of Health and Social Care

**Title:** Moderna vaccine UK rollout begins in Wales

BBC News | 7th April 2021

The UK has begun the rollout of its third coronavirus vaccine, the Moderna jab, in Wales. The UK is committed to buying 17 million doses of Moderna, enough to vaccinate about 8.5 million people.

Like the Pfizer-BioNTech and Oxford-AstraZeneca jabs which are already in use, the Moderna jab is given in two doses, several weeks apart. Like Pfizer's, it is an RNA vaccine and works by injecting part of the virus's genetic code into the body, where it enters cells and tells them to create antigens.

These antigens are recognised by the immune system and prepare it to fight coronavirus. No actual virus is needed to create an mRNA vaccine, meaning the rate at which it can be produced is accelerated. It requires temperatures of around -20C for shipping - similar to a normal freezer.

Trial results suggested efficacy against the disease was 94.1%, and vaccine efficacy against severe Covid-19 was 100%. More than 30,000 people in the US took part in the trial, from a wide range of age groups and ethnic backgrounds.

Full detail: [Moderna vaccine UK rollout begins in Wales](https://www.bbc.co.uk/news/uk-wales-56657038)

**Title:** Covid-19 vaccine passports: access, equity, and ethics

BMJ | 2021; 373: n861 | 1st April 2021

The purpose of vaccine passports, governments argue, is to allow people to travel, attend large gatherings, access public venues, and return to work without compromising personal safety and public health. This editorial discusses how there remains considerable practical and ethical challenges to their implementation, and states that while the merits of vaccine passports may be undeniable, implementation will require ethical justifications and practical solutions that do not discriminate against the poor, the less technically literate, and people from low and middle income countries.

Full editorial: [Covid-19 vaccine passports: access, equity, and ethics](https://www.bmj.com/content/373/bmj.n861)

See also: [Certifying status for “vaccine passports” must not increase GPs’ workload, says Royal College](https://www.bmj.com/content/373/bmj.n919) | BMJ

**Title:** Digital Health Passes in the Age of COVID-19. Are “Vaccine Passports” Lawful and Ethical?

JAMA | 7th April 2021

This Viewpoint discusses digital health passes (DHPs) that would grant access to work, entertainment, shopping, and travel with confirmation of COVID-19 immunity, and the scientific, legal, ethical, and equity considerations that must be worked through for DHPs to be considered effective and fair.

Full detail: [Digital health passes in the age of covid-19. Are “vaccine passports” lawful and ethical?](https://jamanetwork.com/journals/jama/fullarticle/2778526)

**Title:** COVID-19 return to work in the roadmap out of lockdown: guidelines for workers, employers and health practitioners

Society of Occupational Medicine | 31st March 2021

These guidelines, published in collaboration with the University of Glasgow, are aimed at workers, employers and health practitioners to increase understanding of the risks of returning to work and the appropriate work-related control measures that could be implemented.

There are multiple factors to consider in the COVID-19 return to work risk assessment. These include community infection levels, individual vulnerability, workplace / commute transmission risk, workers' concerns / expectations and more recently, vaccination and previous COVID-19 infection.

Presenting a simple, stepwise approach, the document outlines the multiple factors needed to be considered to inform decisions and facilitate safe return to work.

Full detail: [COVID-19 return to work in the roadmap out of lockdown: guidelines for workers, employers and health practitioners](https://www.som.org.uk/sites/som.org.uk/files/COVID-19_return_to_work_in_the_roadmap_out_of_lockdown_March_2021.pdf)

See also: [University of Glasgow and SOM launch new return to work guidelines](https://www.som.org.uk/university-glasgow-and-som-launch-new-return-work-guidelines%20)

**Title:** Coronavirus infections levelling off in England – react study

Imperial College London | 8th April 2021

Throughout March, and shortly after the reopening of schools, our study swabbed more than 140,000 people to find out how many people currently have the virus in England, and identify those who have a greater risk of infection. The research found that the rate of new infections levelled off, or plateaued, with 1 in 500 people having the virus (0.2% of the population). This represents approximately a 60% fall since the study's previous findings in February. The study also found that infections are leading to fewer hospital admissions and deaths, which likely reflects the impact of the vaccination programme.

Primary school-aged children (aged 5-12) had the highest number of infections at 0.41%, while those aged 65 and above had the lowest at 0.09%. These trends are likely due to a combination of factors including schools reopening and the COVID-19 vaccination programme.

The researchers also estimated that the reproduction number (R) is 1.0, which means the epidemic is neither growing nor shrinking as each infected person infects one other individual, on average.

Full detail: [REACT-1 round 10 report: Level prevalence of SARS-CoV-2 swab-positivity in England during third national lockdown in March 2021](https://spiral.imperial.ac.uk/bitstream/10044/1/87351/2/react1_r10_preprint.pdf)

Press release: [Coronavirus infections levelling off in England - REACT study](https://www.imperial.ac.uk/news/218993/coronavirus-infections-levelling-england-react-study/)

See also: [Findings from the latest COVID-19 REACT-1 study published](https://www.gov.uk/government/news/findings-from-the-latest-covid-19-react-1-study-published) | Department of Health and Social Care

**Title:** COVID-19 vaccines have prevented 10,400 deaths in older adults

Public Health England | 8th April 2021

Public Health England (PHE) analysis indicates that the COVID-19 vaccination programme prevented 10,400 deaths in those aged 60 and older in England up to the end of March, an additional 4,300 since the previous update.

From 8 December 2020 to the end of March 2021, over 15 million vaccine doses were given to adults aged 60 and over. The analysis compared the observed number of deaths with the number of deaths that would have been expected if the vaccine hadn’t been given during this time period. To allow for the time taken to develop an immune response to vaccination, the analysis assumed it would take 31 days before the effect of vaccination on deaths is observed.

Using this method, PHE estimates that around 10,400 deaths were prevented to the end of March – 9,100 in those aged 80 and over, 1,200 in those aged 70 to 79 and 100 in those aged 60 to 69.

This analysis takes into account the direct effects of vaccines, there is now increasing evidence that vaccines help to reduce transmission, therefore it is likely that an even higher number of deaths will have been prevented by the vaccination programme.

Full detail: [COVID-19 vaccines have prevented 10,400 deaths in older adults](https://www.gov.uk/government/news/covid-19-vaccines-have-prevented-10-400-deaths-in-older-adults)

**Title:** Delivering prevention in an ageing world: Using technology effectively – Consultation paper

International Longevity Centre UK | 1st April 2021

As part of the ILC-UK’s 'Delivering prevention in an ageing world' programme, this consultation paper identifies the key areas where technology can play a crucial role in helping push forward the prevention agenda. The paper also collates examples of good practice, including learnings from the ongoing Covid-19 pandemic.

Full detail: [Delivering prevention in an ageing world: Using technology effectively – Consultation paper](https://ilcuk.org.uk/wp-content/uploads/2021/04/ILC-Using-technology-effectively-Consultation-paper.pdf)

**Title:** Hospital admissions and deaths could rise this summer, modellers warn

BMJ | 2021; 373: n923 | 7th April 2021

The later stages of the UK government’s roadmap out of lockdown are “highly likely” to cause a surge of covid-19 infections, hospital admissions, and deaths this summer, suggests modelling from three groups of scientists considered by the Scientific Advisory Group for Emergencies (Sage).

SPI-M-O, Sage’s Scientific Pandemic Influenza Group on Modelling (Operational) subgroup, reviewed modelling from Imperial College London, the University of Warwick, and the London School of Hygiene and Tropical Medicine. It concluded that any resurgence in hospital admissions and deaths after reopening non-essential retail, hairdressers, gyms, and outdoor hospitality from 12 April was “highly unlikely to put unsustainable pressure on the NHS.”

But the return of indoor socialising, the reopening of indoor hospitality including cinemas, theatres, and concert halls (stage 3) from 17 May, and the removal of remaining social distancing rules with full unlocking (stage 4) from 21 June “is highly likely” to lead to a further resurgence in admissions and deaths, says the SPI-M-O paper. The scale, shape, and timing of that potential third wave is “highly uncertain,” it adds.

Further detail: [Hospital admissions and deaths could rise this summer, modellers warn](https://www.bmj.com/content/373/bmj.n923)

Full report: [Evaluating England’s Roadmap out of Lockdown](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/975910/S1183_SPI-M_Imperial_College_London_Evaluating_England_s_Roadmap_out_of_Lockdown.pdf) | Imperial College London

**Title:** Country in the grip of a mental health crisis with children worst affected, new analysis finds

Royal College of Psychiatrists | 8th April 2021

Children and young people are bearing the brunt of the mental health crisis caused by the pandemic, new analysis by the Royal College of Psychiatrists has found.

A year on from the first lockdown and after warnings from the mental health sector about the impact of the pandemic on the country’s mental health, NHS Digital data shows that while the crisis is affecting people of all ages, it is under-18s who are suffering most.

The Royal College of Psychiatrists’ analysis found that:

* Nearly 400,000 children and 2.2m adults seek help for mental health problems during the pandemic
* 80,226 more children and young people were referred to CYP mental health services between April and December last year, up by 28% on 2019, to 372,438.
* 600,628 more treatment sessions were given to children and young people, up by a fifth on 2019 to 3.58 million.
* 18,269 children and young people needed urgent or emergency crisis care - including assessments to see if someone needs to be sectioned because they or others are at harm - an increase of 18% on 2019, to 18,269.

The Royal College of Psychiatrists is calling for the additional £500 million in the Government’s mental health recovery plan to urgently reach the frontline so that people can get the support they need. This funding is on top of the existing planned investment in mental health services set out in the NHS Long Term Plan.

Press release: [Country in the grip of a mental health crisis with children worst affected, new analysis finds](https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2021/04/08/country-in-the-grip-of-a-mental-health-crisis-with-children-worst-affected-new-analysis-finds)

**Title:** Levelling Up Health

All Party Parliamentary Group for Longevity | 9th April 2021

Covid-19 has had a devastating impact on our country, exposing our nation’s poor health and our health inequalities - 90% of those who died with Covid had significant prior poor health.

This paper states that a new healthcare system is essential to confront how unhealthy we are.  The report sets out why this is needed and what should be done. It proposes a 10 Year Health Improvement Plan, and a Health Improvement Fund, a shift in political attitudes that have impeded progress, clear priorities for action and the need to challenge and change organisations that harm our children and our health.

Full paper: [Levelling Up Health](https://static1.squarespace.com/static/5d349e15bf59a30001efeaeb/t/606f7115c96b9c377aa2e3bc/1617916190582/Levelling%2Bup%2BHealth%2BReport%2B9%2BApril%2B2021%2BFINAL.pdf)

See also:

* [Welcome recognition that a healthy population is one of our nation’s most important assets](https://www.health.org.uk/news-and-comment/news/welcome-recognition-that-a-healthy-population-is-one-of-nations-important-assets) | The Health Foundation
* [‘Levelling up’ – from slogan to strategy](https://www.kingsfund.org.uk/blog/2021/04/levelling-up-slogan-strategy) | The King's Fund

**Title:** What is behind the low covid-19 vaccine take-up in some ethnic minorities?

BMJ Opinion | 8th April 2021

The unequal burden of covid-19 is etched along ethnic and racial lines. While the risks from covid-19 are now better established, mitigation efforts remain insufficient, particularly among more marginalised groups. More recently, vaccine uptake reveals a disturbing pattern that exposes continued racial inequalities.

The latest data from the Office for National Statistics confirms that ethnic minorities in England are considerably less likely to receive a covid-19 vaccine than their White counterparts. While 90.2% of those aged 70 years and over living in England had received at least one dose of vaccine by 11 March 2021, uptake rates were 58.8% and 68.7% in Black African and Black Caribbean groups, respectively. This was followed by Bangladeshi (72.7%) and Pakistani (74.0%) populations, with the most pronounced differences seen in those living in the most deprived areas of England.

This BMJ Opinion piece states that the lower covid-19 vaccine take-up in some ethnic minorities follows a historical trend, but this should not be normalised or even exist today.

Full detail: [What is behind the low covid-19 vaccine take-up in some ethnic minorities?](https://blogs.bmj.com/bmj/2021/04/08/what-is-behind-the-low-covid-19-vaccine-take-up-in-some-ethnic-minorities/)

**Title:** Coronavirus and the social impacts on Great Britain: 6 April 2021

Office for National Statistics | 6th April 2021

This bulletin contains data and indicators from a module being undertaken through the Office for National Statistics’ (ONS’) Opinions and Lifestyle Survey (OPN) to understand the impact of the coronavirus (COVID-19) pandemic on British society.

The bulletin presents a summary of the results. Breakdowns by age, sex, region and country,

Main points:

This week, over the period 24 to 28 March 2021, based on adults in Great Britain:

* Compliance with most measures to stop the spread of the coronavirus (COVID-19) remained high, with 89% of adults reporting handwashing when returning home and 97% using a face covering; both proportions unchanged from last week.
* More people are leaving home in the last seven days than did in mid-January, for reasons such as: to visit a park or local green space (23%, compared with 14%); to meet up with people in a public place (14%, compared with 5%) and to shop for things other than basic necessities (13%, compared with 5%).
* New questions this week showed us that 36% of adults met up with someone outside their household, childcare or support bubble in the last seven days, of which 4% met indoors, 26% met outdoors and 5% met both indoors and outdoors.
* Over half (53%) of working adults reported leaving home for work in the past seven days; an increase from the 51% reported last week and a notable increase since mid-February (44% in the period 10 to 14 February 2021).
* Personal well-being levels appeared to worsen for most measures including happiness (6.7 this week, 6.9 last week), life satisfaction (6.6 this week, 6.7 last week) and anxiety (4.0 this week, 3.9 last week); levels of feeling worthwhile remained unchanged (7.2).
* Positive sentiment towards the COVID-19 vaccine remained high; 95% of adults reported they had now either received a vaccine or would be likely to have a vaccine if offered; 94% last week.
* Nearly 7 in 10 (68%) parents in England reported that their secondary school or college-aged child took part in rapid testing; the majority (85%) of which felt very comfortable or comfortable with their child taking part.

Full detail: [Coronavirus and the social impacts on Great Britain: 6 April 2021](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/coronavirusandthesocialimpactsongreatbritain/6april2021)

**Title:** Coronavirus (COVID-19) roundup

Office for National Statistics | 7th April 2021

The Office for National Statistics has published its latest data on the coronavirus (COVID-19) and its social impacts on Great Britain.

This week, it found:

* 36% of adults reported meeting up with someone outside their household, childcare or support bubble (excluding work or education) in the seven days ending 28 March 2021.
* Of those, 26% met outdoors only, 5% met both indoors and outdoors and 4% met indoors only.
* 23% of adults thought life will return to normal in six months or less, down from 29% in the week ending 21 March 2021.

Full detail: [Coronavirus (COVID-19) roundup](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronaviruscovid19roundup/2020-03-26#society)

We

[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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