COVID-19 recovery

5th February 2021

**Title:** Coronavirus: no going back to normal

Institute for Government | 28th January 2021

Life after coronavirus will not feel like life before. This paper states that it is best that governments acknowledge that and start planning now in order to capture the best that can come out of a very tough period while not raising expectations that life will suddenly snap back to an almost forgotten normal.

Full detail: [Coronavirus: no going back to normal](https://www.instituteforgovernment.org.uk/sites/default/files/publications/coronavirus-no-going-back-normal.pdf)

**Title:** Covid-19 recovery and resilience: what can health and care learn from other disasters?

The King’s Fund | 4th February 2021

As Covid-19 swept the globe, countries rushed to tackle the immediate threat of the virus. New hospitals were built in a matter of days, people have been required to restrict their activities to an extent inconceivable during peacetime and a new class of vaccine was developed, trialled and approved within a matter of months. The scale of the emergency response has been extraordinary. But while focus has rightly been on the immediate response to the virus, this article asks what comes next?

The authors look at what the health and care system can learn from the experience of recovery from other disasters, and share the four priorities that require conscious attention and action:

* Putting mental health and wellbeing at the forefront of recovery efforts
* Ensuring communities are not left behind
* Making collaboration work
* Prioritising workforce wellbeing

Full detail: [Covid-19 recovery and resilience: what can health and care learn from other disasters?](https://features.kingsfund.org.uk/2021/02/covid-19-recovery-resilience-health-care/#Introduction-dJdcexE62X)

**Title:** What helped the UK cope with the Covid-19 pandemic and lockdowns?

What Works Centre for Wellbeing | January 2021

Researchers of the COVID-19 Social Study examined the relationship between how we spent our time on different activities during the working week (Monday-Friday) and the impact on our mental health and wellbeing between the end of March and the end of May 2020. They analysed responses to the Office for National Statistics - Opinions and Lifestyle Survey and identified a number of strategies that were effective coping mechanisms during the first wave of the lockdown in 2020.

Key findings:

* Staying connected to friends and family was the most important coping mechanisms identified by people during the UK’s first lockdown.
* Gardening and exercise had the biggest association with supporting people’s wellbeing, while following Coid-19 related news had the most negative effects on our wellbeing
* Different people have different coping strategies. Some of us prefer to problem solve, while some of us try to avoid our difficulties. Others rely on emotional reframing or the social support of their friends and family.
* It is important to recognise which strategies are more helpful for our mental health and long-term wellbeing.
* Research has clearly shown that physical activity such as exercising or gardening has improved mental health and wellbeing during the pandemic.
* Some people have also used arts and cultural engagement as a way to cope.
* There may be long-term impacts on our wellbeing from negative changes to eating, drinking alcohol and gambling behaviours. This is especially the case for those who were already at-risk from these issues. A wellbeing-based recovery will depend on helping people access and choose healthier styles of coping.

Full report: [What helped the UK cope with the Covid-19 pandemic and lockdowns?](https://whatworkswellbeing.org/wp-content/uploads/2021/01/coping-strategies-Covid-19-Jan2021-WhatWorksWellbeing.pdf)

**Title:** Will a new NHS structure in England help recovery from the pandemic?

BMJ | 2021; 372: n248 | 3rd February 2021

The NHS will feel the effects of covid-19 for many years. Serious short term challenges also remain: hospitals are under extreme strain, the backlog of unmet healthcare needs is substantial, and the NHS faces the mammoth task of vaccinating the population against covid-19.

Amid these challenges, NHS leaders are calling for changes to NHS structures and legislation. In November 2020, NHS England published proposals for new legislation to change the way the NHS is organised. The changes are designed to support local NHS organisations to collaborate to improve care and manage resources as they recover from covid-19.

This BMJ analysis draw on evidence from the long history of NHS reorganisations to assess the proposals and help understand their potential effect, and outline key questions for the NHS and government as they develop the plans further.

Key messages:

* NHS leaders in England are calling for changes to healthcare system structures and legislation
* The changes are designed to support collaboration between organisations and services, and could mean some NHS agencies being abolished and new area based authorities created
* Encouraging collaboration makes sense, but the potential benefits of the new system proposed may be overstated and the risks of reorganisation underplayed
* NHS leaders and government have a long list of policy priorities as the country recovers from the pandemic and a major structural reorganisation of the healthcare system should not be one of them

Full detail: [Will a new NHS structure in England help recovery from the pandemic?](https://www.bmj.com/content/372/bmj.n248)

**Title:** Covid crisis has exacerbated many weaknesses in government, finds IfG's annual Whitehall Monitor report

Institute for Government | 27th January 2021

A new report by the Institute for Government, reveals the way the pandemic has changed how the government takes decisions, spends money and makes policy. The last year saw a drop in the government’s transparency on its spending, only a small proportion of Covid contracts awarded on a competitive basis, and many policy U-turns. 2020 also saw the highest number of ‘ministerial directions’ – formal instructions for civil servants to continue with a policy despite their concerns about value for money or feasibility – for decades. The business secretary alone issued seven directions for pandemic-support policies, many of which, including the Self-Employment Income Support Scheme (SEISS) and Bounce Back loans, have proved to be poorly targeted and costly.

Government has awarded contracts at high speed. Only 1% of the £17.3bn spent on Covid contracts has been awarded through competitive tendering, and 61% awarded with no competition at all.

Full report:  [Whitehall Monitor 2021](https://www.instituteforgovernment.org.uk/sites/default/files/publications/whitehall-monitor-2021_2.pdf)

**Title:** Short-term outpatient follow-up of COVID-19 patients: A multidisciplinary approach

EclinicalMedicine | 28th January 2021

Short-term follow-up of COVID-19 patients reveals pulmonary dysfunction, myocardial damage and severe psychological distress. Little is known of the burden of these sequelae, and there are no clear recommendations for follow-up of COVID-19 patients.

In this multi-disciplinary evaluation, cardiopulmonary function and psychological impairment after hospitalization for COVID-19 are mapped.

Overall, most patients suffered from functional limitations. Dyspnea on exertion was most frequently reported, possibly related to decreased DLCOc. This could be caused by pulmonary fibrosis, which should be investigated in long-term follow-up. In addition, mechanical ventilation, deconditioning, or pulmonary embolism may play an important role.

Full article: [Short-term outpatient follow-up of COVID-19 patients: A multidisciplinary approach](https://www.thelancet.com/action/showPdf?pii=S2589-5370%2821%2900011-0)

**Title:** More than 50 Long-term effects of COVID-19: a systematic review and meta-analysis

medRixv | 30th January 2021

This review intends to identify studies assessing long-term effects of COVID-19 and estimates the prevalence of each symptom, sign, or laboratory parameter of patients at a post-COVID-19 stage (extending beyond the acute phases of COVID-19 reported to date).

It reports that 4 in 5 of patients in the review continue to have at least one overall effect beyond two weeks following acute infection. Although the relative sample size is an acknowledged limitation of this study, the authors call for more evidence and research from multi-disciplinary teams as therse are are crucial to understanding the causes, mechanisms, and risks to develop preventive measures, rehabilitation techniques, and clinical management strategies with whole-patient perspectives designed to address the after-COVID-19 care.

Full detail: [More than 50 Long-term effects of COVID-19: a systematic review and meta-analysis](https://www.medrxiv.org/content/10.1101/2021.01.27.21250617v2.full.pdf)

Please note: *This article is a preprint and has not been certified by peer review. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.*

**Title:** New Commissioner appointed to oversee education catch-up

Department for Education | 3rd February 2021

The government has announced the appointment of Sir Kevan Collins as the government’s Education Recovery Commissioner, to oversee a comprehensive programme of catch-up aimed at young people who have lost out on learning due to the pandemic.

In his new role, he will work with government to deliver measures that will support children who have missed out on face-to-face education due to extended school closures.

This will include addressing factors such as curriculum content and quantity of teaching time in the coming months, to ensure the impact the pandemic has had on learning is addressed as quickly and comprehensively as possible.

This will involve a further £300 million on tutoring programmes, building on last year’s £1 billion Covid Catch Up fund, as well as potential plans for summer schools developed in partnership with the education sector.

Full detail: [New Commissioner appointed to oversee education catch-up](https://www.gov.uk/government/news/new-commissioner-appointed-to-oversee-education-catch-up)

**Title:** Costs of lost schooling could amount to hundreds of billions in the long-run

Institute for Fiscal Studies | 1st February 2021

 As a result of the pandemic, children across the UK are likely to lose at least half a year of normal, in person schooling. In the absence of a massive policy response, the long-run effects of this learning loss are likely to be substantial.

In this IFS observation, Luke Sibieta, Research Fellow at the IFS, sets out the potential long-run costs of lost schooling. The figures are extremely large and are not intended as precise estimates. Instead, they are intended to illustrate the scale of potential costs and risks we face, and the economic rationale for a massive national plan to address this crisis.

Key findings include:

* By February half-term, children across the UK will have lost at least half a year of normal, in person schooling. This would increase to two thirds of a year if schools weren’t to reopen as normal until Easter
* Early evidence already suggests this loss of schooling is contributing to lower educational progress and skills, particularly for disadvantaged pupils
* Existing evidence on returns to schooling would imply a long-run loss in earnings of £350bn
* If by some miracle, the efforts by schools, teachers, children, parents and charities allowed us to mitigate 75% of this effect, the total loss would still be £90bn
* A large amount of these negative effects are likely to be borne by children from lower-income families, resulting in a likely rise in inequality over the long-run
* A massive injection of resources is likely to be required to help pupils properly catch up
* A useful benchmark to judge these plans is the normal cost of half a year of schooling, about £30 billion across the UK
* So far, governments across the UK have allocated about £1.5bn towards the cost of catch-up. This is highly unlikely to be sufficient to help pupils catch-up or prevent inequalities from widening.

Further detail: [Costs of lost schooling could amount to hundreds of billions in the long-run](https://www.ifs.org.uk/publications/15292)

Full IFS Observation: [The crisis in lost learning calls for a massive national policy response](https://www.ifs.org.uk/publications/15291)

**Title:** Survey reveals the mental and physical health impacts of home working during Covid-19

Royal Society for Public Health | 4th February 2021

With working from home set to continue for millions of UK workers, research by RSPH shows that there are key health and wellbeing disparities between different groups of people who made the move to home working as a result of Covid-19.

**The polling revealed that:**

* Overall, more people felt working from home was better for their health and wellbeing (45%), compared to around one third (29%) who thought working from home was worse for their health and wellbeing
* However, people who switched to working from home as a result of Covid-19 had experienced health and wellbeing impacts, with the most common being feeling less connected to colleagues (67%), taking less exercise (46%), developing musculoskeletal problems (39%) and disturbed sleep (37%)
* Over one in four (26%) are working from home from either a sofa or a bedroom
* Nearly half (48%) of people who work from a sofa or bedroom said they had developed musculoskeletal problems and nearly two thirds (59%) said they felt more isolated from their colleagues
* Women were more likely than men to feel isolated (58% of women V 39% of men) and develop musculoskeletal problems (44% of women V 29% of men) as a result of working from home
* Home working is having an impact on people’s mental health, with 67% saying they felt less connected to their colleagues and 56% saying they found it harder to switch off. However only a third of respondents had been offered support with their mental health (34%) from their employer.
* People who live with multiple housemates were more likely to think that working from home was worse for their health and wellbeing (41%), compared to people who live on their own (29%) or with just their partner (24%)

The findings of the survey also showed that the vast majority of people didn’t want to go back to working in an office full time, with nearly three quarters of people (74%) saying that they wanted to split their time between home working and working in an office.

Further detail:  [Survey reveals the mental and physical health impacts of home working during Covid-19](https://www.rsph.org.uk/about-us/news/survey-reveals-the-mental-and-physical-health-impacts-of-home-working-during-covid-19.html#.YBwNmoIwQMM.twitter)

Full report: [Disparity Begins at Home: How home working is impacting the public’s health](https://www.rsph.org.uk/static/63790689-3678-4432-829561bdb7f6420e/Workingfromhomepolicypaper2221.pdf)

**Title:** Nurses and female health care workers most at risk of distress during Covid-19 pandemic

University of Sheffield | 5th February 2021

Researchers at the University of Sheffield have conducted the largest global review of the factors linked to psychological distress in health care workers during the Covid-19 pandemic.

* The study found nurses and females are most likely to experience psychological distress during an infectious disease outbreak
* Findings show distress for health care workers can persist for up to three years after the initial outbreak
* Health care workers who reported facing stigma during the pandemic experienced greater distress
* Social support, perceiving control, sufficient information about the outbreak and proper protection were associated with less psychological distress

Further detail: [Nurses and female health care workers most at risk of distress during Covid-19 pandemic](https://www.sheffield.ac.uk/news/nurses-and-female-health-care-workers-most-risk-distress-during-covid-19-pandemic)
Full review: [Factors associated with psychological distress in health-care workers during an infectious disease outbreak: A rapid systematic review of the evidence](https://www.frontiersin.org/articles/10.3389/fpsyt.2020.589545/full)

**Title:** World-first COVID-19 alternating dose vaccine study launches in UK

Department of Health and Social Care | 4th February 2021

Patients taking part in a new clinical study will soon receive different COVID-19 vaccines for their first or second dose. The study will examine whether different vaccines can safely be used for 2-dose regimes in the future.

Backed by £7 million of government funding, the study will determine the effects of using different vaccines for the first and second dose – for example, using Oxford University/AstraZeneca’s vaccine for the first dose, followed by Pfizer/BioNTech’s vaccine for the second.

The study, run by the National Immunisation Schedule Evaluation Consortium (NISEC) across 8 National Institute for Health Research (NIHR) supported sites, will also gather immunological evidence on different intervals between the first and second dose for a mixed-vaccine regimen against control groups when the same vaccine is used for both doses.

A same-dose regimen is currently implemented for the national COVID-19 vaccination programme, and there are no current plans for this to change. Anyone who has received either the Pfizer or AstraZeneca vaccination as part of the UK-wide delivery plan will not be affected by this study. They will receive their second dose from the same source and over the same 12-week interval.

Full detail: [World-first COVID-19 alternating dose vaccine study launches in UK](https://www.gov.uk/government/news/world-first-covid-19-alternating-dose-vaccine-study-launches-in-uk)

**Title:** COVID-19 Vaccine AstraZeneca confirms 100% protection against severe disease, hospitalisation and death

AstraZeneca | The Lancet [preprint] | 3rd February 2021

One dose of the Oxford/AstraZeneca vaccine provides sustained protection against Covid for at least three months and cuts transmission of the virus by two-thirds, according to research published as a preprint in The Lancet.

The primary analysis of the Phase III clinical trials from the UK, Brazil and South Africa, confirmed COVID-19 Vaccine AstraZeneca is safe and effective at preventing COVID-19, with no severe cases and no hospitalisations, more than 22 days after the first dose.

Results demonstrated vaccine efficacy of 76% (CI: 59% to 86%) after a first dose, with protection maintained to the second dose. With an inter-dose interval of 12 weeks or more, vaccine efficacy increased to 82% (CI: 63%, 92%).

The analysis also showed the potential for the vaccine to reduce asymptomatic transmission of the virus, based on weekly swabs obtained from volunteers in the UK trial. The data showed that PCR positive readings were reduced by 67% (CI: 49%, 78%) after a single dose, and 50% (CI: 38% to 59%) after the two dose regimen, supporting a substantial impact on transmission of the virus.

Further detail: [COVID-19 Vaccine AstraZeneca confirms 100% protection against severe disease, hospitalisation and death in the primary analysis of Phase III trials](https://www.astrazeneca.com/media-centre/press-releases/2021/covid-19-vaccine-astrazeneca-confirms-protection-against-severe-disease-hospitalisation-and-death-in-the-primary-analysis-of-phase-iii-trials.html)

Full research paper: [Single dose administration, and the influence of the timing of
the booster dose on immunogenicity and efficacy of ChAdOx1 nCoV-19 (AZD1222) vaccine](https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3777268)

See also:

* [Study showing Oxford vaccine slows virus spread 'superb' - Hancock](https://www.bbc.co.uk/news/uk-55913913) | BBC News
* [Oxford vaccine could substantially cut spread](https://www.bbc.co.uk/news/health-55910964) | BBC News

**Title:** How to vaccinate the world against covid-19

BMJ | 2021; 372: n211 | 5th February 2021

In the scramble for covid-19 vaccines richer countries, predictably, have secured stocks first. With the headache of distribution on top of procurement, this BMJ Feature asks how will the world reach the herd immunity levels needed to defeat the virus?

Full detail: [How to vaccinate the world against covid-19](https://www.bmj.com/content/372/bmj.n211)

**Title:** Study shows coronavirus antibodies last for 'at least six months' after infection

UK Biobank | 3rd February 2021

UK Biobank, the UK’s major biomedical database and research resource, reports the 6-month results of a major government-backed study of SARS-CoV-2 infection. For the 6-month period from the end of May 2020 to the beginning of December 2020, UK Biobank collected monthly blood samples and data on potential symptoms from 20,200 UK Biobank participants and their adult children and grandchildren.

The study measured the levels of previous infection in various population groups across the UK, as well as how long antibodies persisted in those who were infected.

Key findings:

* The study found that 8.8% of the UK population had been infected by December 2020, rising as high as 12.4% in London and as low as 5.5% in Scotland.
* One of the most significant findings of the study is that 99% of participants who had tested positive for previous infection retained antibodies to SARS-CoV-2 for 3 months after being infected, and 88% did so for the full 6 months of the study.
* This discovery provides an early indication that the antibodies produced following natural infection, and potentially following vaccination, may protect most people against subsequent infection for at least 6 months.

Further detail: [UK Biobank study shows that COVID-19 antibodies remain for at least 6 months](https://www.ukbiobank.ac.uk/learn-more-about-uk-biobank/news/uk-biobank-study-shows-that-covid-19-antibodies-remain-for-at-least-6-months)

Full report: [UK Biobank SARS-CoV-2 Serology Study](https://www.ukbiobank.ac.uk/media/x0nd5sul/ukb_serologystudy_report_revised_6months_jan21.pdf)

See also:

* [Antibodies last at least six months in most](https://www.bbc.co.uk/news/health-55905158) | BBC News
* [Coronavirus antibodies last for at least six months after infection, study finds](https://news.sky.com/story/covid-19-virus-antibodies-last-for-at-least-six-months-after-infection-study-finds-12207174) | Sky News

**Title:** **Title:** UK government secures additional 40 million doses of Valneva vaccine

Department of Health & Social Care | 1st February 2021

The UK Government has signed a deal for a further 40 million doses of Valneva’s promising vaccine candidate, meaning 100 million doses of Valneva vaccine have now been secured. The latest deal will bolster long-term vaccine production in Scotland and brings the total UK vaccine portfolio to 407 million doses over the next two years.

The decision to purchase 40 million extra doses is based on the UK’s strategy to take a wide approach, using different technologies and viral targets to ensure the UK has the best chance of securing access to successful vaccines as quickly as possible. It will also give the UK future flexibility should we need to revaccinate any of the population.

Full detail: [UK government secures additional 40 million doses of Valneva vaccine](https://www.gov.uk/government/news/uk-government-secures-additional-40-million-doses-of-valneva-vaccine?utm_medium=email&utm_campaign=govuk-notifications&utm_source=b8eda042-75ed-4b99-99cd-a21ac2322c5a&utm_content=daily)

**Title:** More than 10 million people receive first dose of COVID-19 vaccine in UK

Department of Health and Social Care | 3rd February 2021

More than 10 million people in the UK have received their first dose of a COVID-19 vaccine, marking a significant milestone for the largest vaccination programme in British history.

Figures out today show the NHS vaccinated a total of 10,021,471 million people between 8 December 2020 and 2 February 2021, including 9 in 10 people aged 75 and over in England. These top 4 groups account for 88% of COVID deaths, which is why the vaccines will play such a crucial role in saving lives and reducing the demand on the NHS.

The vaccination programme continues to expand, with thousands of vaccination centres open – ranging from GP and pharmacy-led services to hospitals and large-scale vaccination centres – to provide easy access to those eligible, regardless of where they live.

Full detail: [More than 10 million people receive first dose of COVID-19 vaccine in UK](https://www.gov.uk/government/news/more-than-10-million-people-receive-first-dose-of-covid-19-vaccine-in-uk)

**Title:** New vaccines partnership to rapidly respond to new virus variants

Department of Health and Social Care | 5th February 2021

A new partnership between the UK Government and vaccine manufacturer CureVac has been established to rapidly develop new vaccines in response to new Covid-19 variants if needed.

Both the Pfizer/BioNTech and Oxford/AstraZeneca vaccines are safe and effective and appear to work well against the Covid-19 variants currently dominant in the UK.

The new agreement will utilise UK expertise on genomics and virus sequencing to allow new varieties of vaccines based on messenger RNA technology to be developed quickly against new strains of Covid-19 if they are needed.

The Government is establishing an expert advisory group to identify the variants that the UK could need vaccines against.

Through the agreement the UK has placed an initial order for 50 million doses of new vaccines to be delivered later this year if they are required.

Full detail: [New vaccines partnership to rapidly respond to new virus variants](https://www.gov.uk/government/news/new-vaccines-partnership-to-rapidly-respond-to-new-virus-variants)

**Title:** WHO warns against “vaccine nationalism” or face further virus mutations

BMJ | 2021; 372: n292 | 1st February 2021

World Health Organization officials have voiced concerns at “vaccine nationalism” which could increase the risk of the coronavirus mutating further, after a week long row over a shortfall in EU supplies of covid-19 vaccines.

Bruce Aylward, senior adviser to WHO’s director general, said, “Anything that restricts the ability to get these products out will affect our ability to control this disease and prevent variants emerging. The world is going to have to collaborate to get out of this,” he said.

Full detail: **:** [WHO warns against “vaccine nationalism” or face further virus mutations](https://www.bmj.com/content/372/bmj.n292)

**Title:** Lockdown fatigue: The diminishing effects of quarantines on the spread of COVID-19

Covid Economics, Vetted and Real-Time Papers | February 2021

Non-Pharmaceutical Interventions (NPIs) have been for most countries the key policy instrument utilized to contain the impact of the COVID-19 pandemic. In this article, the authors conduct an empirical analysis of the impact of these policies on the virus’ transmission and death toll.

The analysis finds that lockdowns tend to significantly reduce the spread of the virus and the number of related deaths. It also shows that this benign impact declines over time: after four months of strict lockdown, NPIs have a significantly weaker contribution in terms of their effect in reducing COVID-19 related fatalities.

Part of the fading effect of quarantines could be attributed to an increasing non-compliance with mobility restrictions, as reflected in our estimates of a declining effect of lockdowns on measures of actual mobility. However, this paper additionally finds that a reduction in de facto mobility also exhibits a diminishing effect on health outcomes, which suggests that lockdown fatigues may have introduced broader hurdles to containment policies.

Full detail: [Lockdown fatigue: The diminishing effects of quarantines on the spread of COVID-19](https://cepr.org/file/10300/download?token=--L8zvKH)

**Title:** Government confirms mandatory hotel quarantine to be introduced from 15 February

Department of Health and Social Care | 5th February 2021

From 15 February anyone travelling to the UK from a country on the UK’s travel ban list will be required to quarantine in a government-approved facility for 10 days.

* Discussions with transport and hospitality industry already underway and commercial specification issued to hotels
* Health Secretary to oversee implementation and to chair new Cabinet sub-committee, working closely with former Vice Chief of Defence Staff, General Sir Gordon Messenger, on government rollout
* Discussions with Australia and New Zealand have taken place to share expertise on quarantining

Full detail: [Government confirms mandatory hotel quarantine to be introduced from 15 February](https://www.gov.uk/government/news/government-confirms-mandatory-hotel-quarantine-to-be-introduced-from-15-february)

**Title:** Coronavirus (COVID-19) weekly insights: latest health indicators in England, 5 February 2021

Office for National Statistics | 5th February 2021

This article brings together latest coronavirus (COVID-19) data in England. Infection and hospital admission rates remain high and the number of deaths involving COVID-19 has increased in the most recent week. Cases compatible with the new UK variant of COVID-19 have decreased but continue to account for the majority of positive cases in England.

Main points:

* Infection rates have decreased but remain high, with 1 in 65 (1.55%) of the population estimated to have the coronavirus (COVID-19) in the week ending 30 January 2021 (Coronavirus (COVID-19) Infection Survey (CIS)).
* Cases compatible with the new UK variant have decreased in all regions except the East of England, Yorkshire and The Humber and the East Midlands (week ending 30 January 2021, CIS).
* The rate of confirmed COVID-19 patients admitted to hospital decreased but remained high at 25.3 per 100,000 people in the week ending 31 January 2021, almost twice the rate seen in early December 2020.
* In the week ending 22 January 2021, the number of registered deaths involving COVID-19 in England increased by 17.6%.
* Deaths involving COVID-19 represented nearly half (45.3%) of all deaths in England.
* A quarter of adults aged 80 years and over had antibodies against COVID-19 in the 28 days up to 18 January 2021 (CIS).
* Over 9 in 10 (92%) reported that they either would be likely to have the COVID-19 vaccine, had accepted a vaccination offer or had already been vaccinated (Opinions and Lifestyle Survey, Great Britain, 27 to 31 January 2021).
* The proportion of adults staying at home or only leaving for essential needs (57%) remains higher than during the winter 2020 restrictions (Opinions and Lifestyle Survey, Great Britain, 27 to 31 January 2021).

Full detail: [Coronavirus (COVID-19) weekly insights: latest health indicators in England, 5 February 2021](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronaviruscovid19weeklyinsights/latesthealthindicatorsinengland5february2021)

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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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